

Autism Initiatives (UK)

Outreach Services

Inspection report

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Ratings

Overall rating for this service	Good ●
Is the service safe?	Good ●
Is the service effective?	Good ●
Is the service caring?	Good ●
Is the service responsive?	Good ●
Is the service well-led?	Good ●

Summary of findings

Overall summary

About the service

Outreach Services is a domiciliary care service providing support and personal care to people who live in their own homes. The service provides support to autistic people and people with a learning disability. At the time of our inspection there were 224 people using the service who lived across a large geographical area within the Northwest of England.

Not everyone who used the service received personal care. CQC only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do we also consider any wider social care provided.

Many of the people who received support lived in 'supported living' settings. People held an individual tenancy for their own property or lived in shared accommodation where they held a tenancy for their bedroom; and shared communal areas such as lounges and kitchens. Each 'supported living' service had designated space for staff to store their belongings, maintain records and when needed, provide sleeping in support.

People's experience of using this service and what we found

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

Right Support:

The provider was working to transfer a small number of Autism Initiative owned properties into alternative ownership. This would then ensure all people who used the service were supported in a way which fully met the principles of 'Right support, right care, right culture'.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice. People had a choice in who supported them; staff knew people well and trusting relationships had been formed.

Staff supported people to take part in employment and education opportunities and to pursue their leisure interests in their local area. The provider demonstrated a commitment to offering opportunities for people to reduce the risk of people experiencing social isolation.

Right Care:

People received kind and compassionate care. Staff protected and respected people's privacy and dignity,

understanding and responding to their individual needs. People could communicate with staff and understood information given to them because staff supported them consistently and understood their individual communication needs.

Right Culture:

People led inclusive and empowered lives because of the ethos, values, attitudes and behaviours of the registered managers and staff employed. People received good quality care and support and because appropriately trained staff could meet their needs and wishes. The provider had clear and effective governance systems in place which identified and managed risks through audits and action plans.

People receiving support, and those important to them, were involved in planning their care.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection

The last rating for this service was good (published 30 January 2018).

Why we inspected

The inspection was prompted in part due to concerns received about poor care, medicines and a lack of action by the management team to respond to concerns. A decision was made for us to inspect and examine those risks.

We found no evidence during this inspection that people were at risk of harm from this concern. Please see the safe and well led sections of this full report.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Good ●

The service was safe.

Details are in our safe findings below.

Is the service effective?

Good ●

The service was effective.

Details are in our effective findings below.

Is the service caring?

Good ●

The service was caring.

Details are in our caring findings below.

Is the service responsive?

Good ●

The service was responsive.

Details are in our responsive findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

Outreach Services

Detailed findings

Background to this inspection

The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Health and Social Care Act 2008.

Inspection team

This inspection was carried out by 2 inspectors.

Service and service type

This service is a domiciliary care agency. It provides personal care to people living in their own houses and flats and specialist housing.

This service provides care and support to people living in a number of 'supported living' settings, so that they can live as independently as possible. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for supported living; this inspection looked at people's personal care and support.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there were 2 registered managers in post.

Notice of inspection

The first day of this inspection was unannounced.

Inspection activity started on 10 May 2023 and ended on 30 May 2023. We visited the location's office on 10

and 30 May 2023. We visited the location's satellite office on 18 May 2023.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

Throughout our inspection we visited people and observed interactions between staff and people who used the service. We spoke directly with 4 people who used the service and 2 family members about their experience of the care provided. We also received written feedback from a further 2 relatives.

We spoke with 21 members of staff including the registered managers, members of the management and positive behaviour support team, the health and wellbeing lead and support workers.

We reviewed a range of records. This included 12 people's care records and multiple medication records. We looked at 11 staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At our last inspection we rated this key question good. The rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management

- People's needs were appropriately assessed; support plans had been developed to minimise any risk to people's health and wellbeing. Staff told us the support plans were easy to follow and assisted them to provide safe care.
- When needed, people had detailed positive behaviour support plans which assisted staff to understand how to support them through periods of anxiety or distress. Staff demonstrated a supportive approach and worked with the providers support services to develop positive approaches. One staff member said, "We get good training. I feel confident supporting people. There is always a reason for the behaviour."

Systems and processes to safeguard people from the risk of abuse; Learning lessons when things go wrong

- Systems were in place to protect people from the risk of abuse. Staff received training and understood the actions they must take if they felt someone was being harmed or abused.
- Staff also understood how to respond to, record and report incidents and accidents safely and told us they were confident any concerns would be treated seriously by the registered manager and the wider management team.
- Accidents and incidents were appropriately reported to external agencies. Records were reviewed on a regular basis to identify any lessons learnt.

Staffing and recruitment

- There were enough staff to meet people's needs. We were told there had been challenges in recent months however both management and support staff confirmed this was now improving.
- Recruitment procedures were safe. Checks were carried out on all staff before they started employment. This included checks made on temporary (agency) workers.
- Where appropriate, people who used the service were actively involved in the recruitment of new staff.
- Once appointed, people had a say in who supported them. One person told us they had not liked on staff member. When they raised this, the staff member did not provide them with support anymore and their views had been respected.

Using medicines safely

- Medicines were managed safely. People received their medicines as prescribed. Detailed and accurate records were maintained.
- Medicines were only administered by staff who had the correct training to do so. Regular checks on the competency of staff to administer medicines were undertaken.

Preventing and controlling infection

- Systems were in place to protect people from the risk of infections. Staff had completed training and had access to adequate supplies of personal protective equipment (PPE).

Is the service effective?

Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

At our last inspection we rated this key question good. The rating for this key question has remained good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Ensuring consent to care and treatment in line with law and guidance

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The MCA requires that, as far as possible, people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA. When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty.

We checked whether the service was working within the principles of the MCA, whether appropriate legal authorisations were in place when needed to deprive a person of their liberty, and whether any conditions relating to those authorisations were being met.

- The service was working within the principles of the MCA. Capacity had been assessed; and any restrictions imposed to mitigate risk were clearly recorded. When appropriate referrals to the Court of Protection had been made.
- In a small number of cases we identified further detail was needed to explain the reason for a restriction; and to demonstrate the need for a restriction was kept under review. We raised this and the management team took immediate action to address this.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- People's needs were assessed before they received a service. Detailed transition plans were developed to ensure people were offered a support service which met their needs.
- Transition plans gave people an opportunity to develop relationships with staff and people they may be planning to share accommodation with. As staff learnt about people, this information was used to develop risk assessments and support plans. Support plans reflected best practice.
- People confirmed they were involved in developing their support plans. One person commented, "The focus is on us and our autism."

Staff support: induction, training, skills and experience

- Staff received an induction when they started employment and completed the training they needed to

support people effectively. Comments from staff members included, "I love it. It is very rewarding, and the company is great. The induction was good" and, "There is no limit on being able to improve yourself."

- Staff received ongoing support through regular supervision and observations of their practice.

Supporting people to eat and drink enough to maintain a balanced diet

- Staff were aware of people's nutritional needs and had clear information within support plans with regards to this.
- People confirmed they were supported with their dietary needs and were provided with the assistance they needed to prepare meals as well as to eat and drink.

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- Staff worked with other agencies to ensure people received consistent, effective and timely care. Support plans reflected professional input and advice.
- People had detailed health actions plans in place which identified health support needs and how these needs would be met. Health actions plans are also used when a person is admitted to hospital and helps hospital staff to know how best to support and person during their stay.
- Relatives confirmed people were supported to access their GP and other health services if this was needed. One told us, "Staff will call the doctors and will keep me informed."

Is the service caring?

Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

At our last inspection we rated this key question good. The rating for this key question has remained good. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; respecting equality and diversity; Respecting and promoting people's privacy, dignity and independence

- We observed people were well treated and supported. People who used the service spoke positively about the care they received. Comments included, "The staff are nice," "I have a team who know me. The support is good. It has helped me" and, "I am just happy."
- Relatives also told us people were treated respectfully. We were told, "[Name] has calmed down and is more settled. I have seen a big change in [Name]" and, "[Name's] confidence has soared."
- People also told us they were supported to be as independent as possible and gave examples of learning new skills around the home and gaining employment opportunities.
- Staff spoke about people who used the service with fondness. They knew people well and how they liked to be supported. One staff member told us, "We like to help people be independent."
- Support plans identified peoples' protected characteristics under the Equality Act 2010.

Supporting people to express their views and be involved in making decisions about their care

- Support plans and reviews demonstrated how people were involved in making decisions about their care.
- People confirmed they had been involved in developing and reviewing their support plans. Staff met with people on a regular basis to discuss and agree personal outcomes and goals which people wanted to achieve. We observed there was a focus on achieving these personal outcomes through the support which was provided.

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs.

At our last inspection we rated this key question good. The rating for this key question has remained good. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences; Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- People received personalised care which reflected their needs and preferences. One person told us, "I get up when I feel like it, I go to bed when I am ready."
- People's social and cultural interests were an important focus when developing support plans with people and there was a genuine commitment to encouraging people to develop and maintain relationships to avoid the risk of social isolation.
- The provider had appointed a health and wellbeing lead who told us how they provided opportunities for people to engage in a number of social and sporting activities. We saw examples of how this had brought people together. In some cases, people's confidence had grown to start leading groups themselves. The provider told us of plans to expand this role further to provide greater opportunities for more people.
- People were also supported to source and maintain education opportunities as well as voluntary and paid employment.

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- The communication needs of people were assessed and reflected within support plans.
- When appropriate, alternative methods to the spoken word were used to support people to communicate effectively and to support decision making. For example, we observed people communicating using the Picture Exchange Communication System (PECS).
- Information about the service was available in different formats so people had access to information in a format they could understand.

Improving care quality in response to complaints or concerns

- There was a system in place for recording and responding to complaints.
- People confirmed they knew how to raise concerns and felt confident any issues would be addressed. A relative told us, "I would speak to the staff or any manager."

End of life care and support

- At the time of the inspection, nobody was being care for at the end of their life. However, where

appropriate, care plans contained information about people's wishes and feelings in respect of this aspect of their care.

Is the service well-led?

Our findings

Well-led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

At our last inspection we rated this key question good. The rating for this key question has remained good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care; How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong

- There was a robust framework of governance underpinning the service. Audits and other checks were effective in identifying and driving improvements.
- Monthly reporting and monitoring systems informed the organisation of any risks to people's quality of care. Once identified these systems were effective in addressing and resolving issues.
- The management structure had recently undergone some changes, some of which were being embedded at the time of the inspection. The revised structure had been designed to strengthen the governance processes and level of oversight.
- The registered manager understood their responsibility for notifying the Care Quality Commission of events that occurred within the service. This included responsibilities under the duty of candour. Accurate records were maintained.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- People told us that the service was person centred and achieved good outcome for people. One person said, "I am aware I am susceptible to depression. Now I know I have a team I can rely on."
- People confirmed that they were encouraged to offer feedback about the service through regular contact with the management team. There were localised staff and management teams to respond to any feedback raised.
- Staff told us they felt valued, spoke positively about the registered manager and about working for the provider and told us they felt listened to. One staff member told us about the team meetings they attended and said they were, "Really encouraged to put forward their ideas."
- Other comments about the management team from staff members included, "My manager is approachable and I can talk to my colleagues" and, "[Name] is the best manager I have ever had."
- The registered managers and the staff team worked closely with other agencies and professionals to ensure good outcomes were achieved for people.