

Northumberland County Council West STSS (Short Term Support Service) Hexham

Inspection report

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Ratings

Overall rating for this service

Outstanding 

Is the service safe?

Good 

Is the service well-led?

Good 

Summary of findings

Overall summary

About the service

West STSS (Short Term Support Service) Hexham is provided by Northumberland County Council. It provides three distinct services: reablement, therapeutic support (Occupational Therapy and equipment support) and a 'bridging' service, when people are awaiting longer-term care packages. Services are delivered in people's own homes. At the time of the inspection, the service was providing reablement to 9 people and bridging support to 6 people. The service was supporting over 100 people with therapeutic services. Not all the people supported by therapeutic services were actively engaged at the time of the inspection, although all had a designated staff member to contact for support.

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

People were supported by staff who delivered safe and effective care. Safeguarding matters had been reported and recorded and action taken where necessary to address any shortfalls. Assessments were undertaken to minimise risks to people and staff. Accidents and incidents were reviewed to learn lessons for the future. There were sufficient staff to support people's needs and people told us there had been no missed appointments and that staff stayed for their full allocated time. Medicines were managed effectively.

Managers maintained an overview of the service and conducted checks on care delivery and staff competencies. Staff supervision was in place and health professionals supported to access clinical support. People were supported to express their views on the service and the overall satisfaction with the service was high. Staff said they were well supported by managers.

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 outstanding (published 15 March 2018)

Why we inspected

This inspection was prompted by a review of the information we held about this service and the time that had passed since our last inspection.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

The overall rating for the service has remained outstanding based on the findings of this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for West STSS (Short Term Support Service) Hexham on our website at www.cqc.org.uk.

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 well-led?

Good ●

The service was well-led.
Details are in our well-led findings below.

West STSS (Short Term Support Service) Hexham

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

The inspection was carried out by one inspector.

Service and service type

This service is a domiciliary care agency. It provides personal care to people living in their own homes.

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 was a registered manager in post. The service also had a service manager who was in the process of applying to take over the role of registered manager. The service manager ran the service on a day-to-day basis.

Notice of inspection

We gave the service a short period of notice of the inspection. This was because it is a small service and we needed to be sure that the registered manager would be in the office to support the inspection. Inspection activity started on 25 July 2023 and ended on 7 August 2023. We visited the location's office on 31 July 2023.

What we did before the inspection

We reviewed information we already held about 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.

During the inspection

During the inspection we spoke with 9 members of staff, including the registered manager, service manager and regional manager. We also spoke with 2 occupational therapists, 3 reablement workers and a senior administration worker.

We spoke with 2 people using the service, one relative and a friend who was supporting an individual using the service. We spoke with 3 health and social care professionals.

During our visit we looked at care records, medication records, staff recruitment records, supervision and competence documentation, training records, and the policies and procedures used by the provider.

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.

Systems and processes to safeguard people from the risk of abuse

- The provider had in place a safeguarding policy and the service adhered to this.
- Where potential safeguarding issues had arisen, these were documented, and action taken to address any concerns or shortfalls.
- Staff had received training regarding safeguarding and fully understood their roles and obligations in reporting safeguarding concerns.
- People and relatives told us they felt extremely safe when being supported by staff.

Assessing risk, safety monitoring and management; Preventing and controlling infection

- The provider had in place a range of systems, policies and procedures to manage and minimise risk.
- Risk assessments were undertaken as part of the initial assessments process. These included risks related to people's home environment and risks related to care such as falls concerns or moving and handling risks.
- Staff had received training and support in relation to identifying and managing risk during their day-to-day work.
- The provider had in place appropriate policies relating to infection control. People told us staff wore personal protective equipment (PPE) when they delivered personal care.

Staffing and recruitment

- The provider had in place safe and appropriate systems to recruit staff.
- Staff recruited to the service were subject to an application and interview process. Appropriate checks were undertaken, including the taking up of 2 references and Disclosure and Barring Service (DBS) check.
- Prior to starting work staff were required to undertake a comprehensive induction process. Staff told us the induction was one of the most detailed they had been given. Staff were also subject to probationary reviews at key times during their first 6 months of work.
- Staff told us there were enough staff members to undertake the required work. People told us staff were rarely late for appointments and no appointments had been missed.

Using medicines safely

- People were supported to receive their medicines safely and appropriately.
- Staff had received additional training regarding safe management of medicines. They had also been subject to additional competency checks by senior staff within the organisation.
- Where there had been any errors or issues with medicines there were investigated and action taken to prevent further issues arising, including staff receiving refresher training.

Learning lessons when things go wrong

- The provider had in place systems to monitor care and learn lesson where issues arose.
- There had been some minor issues in relation to staff supporting people with urinary catheters. A full review of these had taken place and action taken to ensure such matters did not reoccur.
- Accidents and incidents were monitored and reviewed.

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 outstanding. At this inspection the rating has changed to good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- The service delivered care that was person centred and empowered people to develop or relearn daily living skills.
- People told us they were very happy with the service and said it met all their needs. One person told us, "They (staff) are willing and competent. They are keen for me to do things for myself. But they will help when I can't manage." A relative told us, "They (staff) are very, very empathetic. They want to go at (relative's) own pace."
- Staff talked in detail about how they supported people and encouraged them to do as much for themselves as they could. One staff member told us, "We have regular meetings and discuss what people need. We are always looking at how we can help them move forward."
- Professionals told us the service was quick to respond when people were discharged from hospital and supported their early move back into their home and community.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

- Managers and staff had a clear understanding of what the service was trying to achieve and how the service should be delivered.
- The service had a range of audits and quality checks in place, including oversight from managers outside the service. A selection of care records was audited monthly, including medication records. A range of staff meetings took place and quality, or service issues were discussed in these.
- Staff confirmed senior staff carried out observation of them delivering care and participated in regular supervision meetings. Staff understood their roles and expressed a desire to deliver high quality care. One staff member told us, "The main thing is the clients. They are the most important."
- The service had undertaken a falls prevention audit to benchmark the service against a toolkit devised by the Royal College of Occupational Therapy. Actions were noted as a result of this audit.

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.

- The registered manager and service manager understood their responsibilities in relation to the Duty of candour regulations.
- Where there had been accidents or incidents and managers consider they fell within the scope of Duty of Candour then this was noted, and action taken to respond to people or families.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- There were a range of systems in place to engage with people who used the service and staff.
- Staff involved people in day-to-day decisions about their care and encouraged them to do as much as they could.
- People were encouraged to complete a brief questionnaire called "Two minutes of your time." In the most recent survey, there had been 36 responses. Comments were overwhelmingly positive about the care they had received. 94% of respondents said they were treated with dignity and respect. 81% stated the service was very good and were likely to recommend the service to others.
- Staff told us there were regular staff meetings when they could raise issues or concerns. One staff member told us, "We are listened to. We are a vocal bunch and speak up. There may not always be a solution, but they keep us in the loop."

Working in partnership with others

- The service worked in partnership with a range of other services.
- Professionals told us the service was very responsive and that managers were accessible and keen to share information and ideas. One professional told us, "We have a good relationship with the service. They respond quickly and always attend meetings if they can. I am quite pleased with things, as it stands."