

Swindon Borough Council

# Swindon Family Breaks Service

## Inspection report

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## Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

# Summary of findings

## Overall summary

### About the service

Swindon Family Breaks Service provides short break services to people with learning disabilities, and supported living to people in specially designed bungalows and people's own accommodation in Swindon. The short break service is registered to provide accommodation and personal care for up to 14 people. There were 2 people using the short break service and 7 people using the supported living service at the time of our inspection.

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.

### 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:** People's care and support was provided in a well-maintained environment. At the time of our inspection refurbishment work was taking place. The provider had ensured this work did not impact on the safe running of the service.

People were supported to take part in activities and interests. The registered manager was exploring more resources in people's local area to widen the range of activities available.

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 were supported to take their medicines in accordance with their individual needs and preferences.

**Right Care:** People were able to communicate with staff and understand information given to them by staff who supported them consistently and understood their individual communication needs.

**Right Culture:** The registered manager and senior staff modelled good practice and led by example. People received good quality care, support and treatment from trained staff who were able to meet their needs.

The registered manager regularly evaluated the quality of support given, involving the person, their families and other professionals as appropriate.

Quality assurance processes included a variety of audits. The systems had been strengthened and the registered manager had a clear oversight of the service and how to sustain and develop ongoing improvement.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

Rating at last inspection and update

The last rating for this service was requires improvement (31 August 2022).

The provider completed an action plan after the last inspection to show what they would do and by when to improve.

At this inspection we found improvements had been made and the provider was no longer in breach of regulation 12, safe care and treatment.

At our last inspection we recommended the provider introduced appropriate systems of escalating internal and external safeguarding concerns and ensured all staff were aware of those processes. At this inspection we found the provider had made improvements.

Why we inspected

We carried out an unannounced inspection of this service on 7 July 2022. A breach of legal requirements was found. The provider completed an action plan after the last inspection to show what they would do and by when to improve safe care and treatment.

We undertook this focused inspection to check they had followed their action plan and to confirm they now met legal requirements. This report only covers our findings in relation to the Key Questions Safe and Well-led which contain those requirements.

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

We looked at infection prevention and control measures under the Safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to COVID-19 and other infection outbreaks effectively.

The overall rating for the service has changed from requires improvement to good based on the findings of this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Swindon Family Breaks Service on our website at [www.cqc.org.uk](http://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.

# Swindon Family Breaks Service

## **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.

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

#### Inspection team

This inspection was carried out by 1 inspector and an Expert by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

#### Service and service type

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.

Swindon Family Breaks Service is also a 'care home' providing a respite service. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. Swindon Family Breaks Service is a care home without nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

### 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.

### Notice of inspection

We gave the service 48 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the provider or registered manager would be available to support the inspection.

Inspection activity started on 2 February 2023 and ended on 6 February 2023. We visited the registered location on 2 February 2023.

### What we did before the inspection

We reviewed information we had received about the service since the last inspection. 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

We spoke with 3 people who used the service and gathered feedback from 4 relatives about their experience of the care provided. We spoke with 8 members of staff including the registered manager, service manager, domestic assistant, business support lead, senior lead and 3 support workers.

We reviewed a range of records. This included a sample of 4 people's care records, a variety of records relating to the management of the service, including a review of some policies and procedures.

### After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at policy and quality assurance records.

# 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 requires improvement. At this inspection the rating has changed to good. This meant people were safe and protected from avoidable harm.

At our last inspection the provider had failed to do all that was reasonably practicable to mitigate risks to people. This was a breach of Regulation 12 of the Health & Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 12.

### Assessing risk, safety monitoring and management

- People received a range of support consistent with national guidance and best practice to manage risk and ensure people's safety. Personal risk assessments were regularly reviewed and updated as required.
- There was evidence of risk assessments for the building and environment. Regular health and safety audits and environmental checks were carried out to monitor the safety of the service.
- Emergency plans and individual fire evacuation plans were in place to ensure staff could support people in the event of a fire or other emergency. Staff had a good knowledge of the action they needed to take to keep people safe if a fire was to occur.
- People's care and support was provided in a safe, clean and well-maintained environment which met their sensory and physical needs. At the time of our inspection refurbishment work was taking place. The service had ensured this work did not impact on the safe running of the home.

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 Mental Capacity Act (MCA). In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS)

- We found the service was working within the principles of the MCA. A senior lead told us, "People have usually had MCA assessments prior to coming into the service [for respite]. If we notice any changes we will document and share with care managers and social workers." A support worker said, "Capacity is clear in the care plan before people arrive here. Their care plans are always up-to-date."

Systems and processes to safeguard people from the risk of abuse

At our last inspection we recommended the provider introduced appropriate systems of escalating internal and external safeguarding concerns and ensured all staff, including agency staff, were aware of those processes. The provider had made improvements.

- The registered manager had strengthened the safeguarding procedures within the service. They told us, "Staff have learned and understood the [safeguarding action plan]. It's been embedded and staff are living and breathing the new ways of working."
- People told us they felt safe being supported by Swindon Family Breaks Service. One person said, "I can talk to staff if I have any concerns. I've spoken out before when I've not been happy and they listened."
- Staff said they felt comfortable raising any concerns with the leadership team and told us they felt confident that any safeguarding concerns would be addressed with immediate effect. One staff member said, "Management support is great. If I had a safeguarding concern, I would feel confident to speak up. I know they would listen to me and take it seriously."

#### Staffing and recruitment

- During our inspection we identified a shortfall within the recruitment process which limited the providers oversight and opportunity for staff recruitment histories and references to be adequately scrutinised. The provider responded immediately during and after the inspection and put measures in place to improve the auditing and oversight in this area.
- Disclosure and Barring Service (DBS) checks had been made before new staff started at the service. The checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.
- The staff rota had been developed in accordance with people's needs. The service manager told us, "We introduced dependency levels to ensure we have the right levels of staffing for people on respite. It's very individual. We are continually looking at dependency levels and understanding what levels are needed."
- Agency staff had been used to ensure safe staffing levels had been maintained. The registered manager told us they always strived to use consistent agency staff. The senior lead said, "We do use agency and stick with [the same] agency so we have continuity and the same staff coming in."
- The provider actively promoted equality and diversity in the workplace and had ensured recruitment was reflective of this.

#### Using medicines safely

- People were supported to take their medicines in accordance with their individual needs and preferences.
- The provider had strengthened their process around the booking in of medication for people using the respite service. The senior lead said, "We can't accept homely remedies without a GP letter. We get patient summaries from the GP surgeries before people come to Swindon Family Breaks Service. Staff do a check with the family members to check medication for 15 mins before the start of the stay. We now find that things are running smoothly."
- Staff completed appropriate training and had their competencies assessed routinely to make sure their practice was safe. Where concerns were identified, there was a process in place to ensure practice was challenged and improved. A senior lead told us, "If someone makes a medication error, we would review their competency via a recorded conversation. We look at what went wrong and any [required] learning. If the medication error was significant, we might redo their competency and perform 3 observations [to assure ourselves of their ability to safely administer medicines]."

#### Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was supporting people living at the service to minimise the spread of



infection.

- We were assured that the provider was admitting people safely to the service.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was responding effectively to risks and signs of infection.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.

The provider understood the current guidance relating to visiting and was able to apply it within the respite and supported living context.

Learning lessons when things go wrong

- Staff were aware of the incident reporting process. We saw that incidents were reported and reviewed by the registered manager. This included ensuring appropriate action was taken to ensure the safety of the person involved as well as updating any risk assessments or care plans. We saw evidence of action taken after someone had experienced a fall, to minimise any further risk.
- The registered manager was open to feedback from people, relatives, staff and professionals. We saw evidence of a strong learning culture to maximise the quality of care that people received.

# 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 requires improvement. 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 registered manager worked hard to instill a culture of care in which staff valued and promoted people's individuality, respected their personal characteristics and enabled them to develop and flourish.
- The registered manager told us they were improving opportunities for people to engage in meaningful activity as they recognised this was an area for development. They said, "The model of the service [makes it more challenging to offer an extensive activity schedule] for people on respite... we have now increased in house activities with our sensory room and magic tables... and next we want to maximise community links."
- During our inspection people provided examples of the activities they had recently enjoyed with the support of staff. These activities included ice skating, cycling, swimming, trampolining and tennis.
- The provider had created a brochure welcoming people to the home when they arrived for respite. The brochure was in an easy read format and clearly set out expectations for their stay and who to contact if they had any concerns.
- The registered manager set a culture that valued reflection, learning and improvement and they were receptive to change and welcoming of fresh perspectives. A support worker said, "I feel I would be listened to if I made suggestions. Some staff recently suggested implementing theme nights and that's been started as a result. One of my colleagues is doing a Jamaican meal tomorrow."
- People who had individual ways of communicating were able to interact comfortably with staff and others involved in their care and support. We saw examples of this throughout our inspection.

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 service apologised to people, and those important to them, when things went wrong.
- Staff gave honest information and suitable support, and applied duty of candour where appropriate.
- The registered manager understood requirements in relation to duty of candour and had an open and honest approach.
- The service had notified CQC of key incidents as required. Effective action had been taken following incidents, and the registered manager had shared information with all relevant parties.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- Governance processes were now effective and helped to keep people safe and provide good quality care and support. The service manager told us, "The registered manager is very thorough. When [they submitted

a recent notification to the Care Quality Commission they] spent a lot of time with the staff team to look at upskilling."

- The registered manager had the skills, knowledge and experience to perform their role and had a clear understanding of people's needs and the oversight of the service.
- Staff were committed to reviewing people's care and support on an ongoing basis within the supported living service, and upon each admission within the respite service. This meant that care remained appropriate as people's needs and wishes changed over time.

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

- The service sought feedback from people after each respite visit and routinely within the supported living service. The registered manager used this feedback to develop the service.
- Staff meetings and supervision were taking place routinely so staff could share their experience and the improvements needed. One staff member said, "We have team meetings every 4 weeks as well as monthly supervision. Team meetings are great, especially when you get positive feedback. It's lovely."
- Relatives and professionals were encouraged to share their voice and experience via a range of different channels. Recent feedback had generally been positive. We saw that feedback had been scrutinised to highlight good practice and any areas of development.

Continuous learning and improving care; Working in partnership with others

- Quality assurance processes included a variety of audits. The systems had now been strengthened and we saw the registered manager had a clear oversight of the service and how to sustain and develop ongoing improvement.
- The provider engaged in local and national quality improvement activities to improve care outcomes, where possible, for people using the service and the wider system. The service manager told us, "Our vision is always health and social care working [better] together. We are exploring a new electronic system [to improve the way we communicate]."
- Staff had formed positive relationships with health and social care professionals. Staff had sought advice and worked in partnership with others such as commissioners and social workers to ensure the best possible support for people. One visiting healthcare professional commented, "The team as a whole have exceeded my expectations...Swindon Family Breaks Service make [person centred care] look easy and for them it is simply second nature."