

Headway Worcestershire

# Management HQ, Headway Worcester Trust

## 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?

Outstanding ☆

Is the service responsive?

Good ●

Is the service well-led?

Good ●

# Summary of findings

## Overall summary

We undertook an announced inspection on 26 May 2016.

We gave the provider 48 hours' notice of our intention to undertake an inspection. This was because the organisation provides a domiciliary care service to people in their homes and or the family home; we needed to be sure that someone would be available at the office.

The provider registered this service with us to provide personal care and support for people with a range of varying needs including dementia, who live in their own homes. At the time of our inspection 34 people received support with personal care.

There was a registered manager for this service. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered providers and registered managers are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

Overwhelmingly, people and their relatives told us that being supported by this service made a difference to their lives. They all said the staff and management team were caring and always treated them with dignity and respect. People explained how staff regularly went the extra mile for them and how this was reflected through the management practices. Relatives told us they were involved as part of the team to support their family member.

People told us they were empowered by staff and the management team keep control over their own lives. The management team had a clear ethos that people using the service were at the heart of everything they did. This was demonstrated by people using the service being included on the board of trustees and involved in decisions about service development. People using the service were also included in their recruitment procedures. This cascaded the message to staff right from the beginning about the importance of people using the service.

People we spoke with said they had support from regular carers who knew them well. Staff we spoke with recognised the different types of abuse. There were systems in place to guide staff in reporting any concerns. Staff were knowledgeable about how to manage people's individual risks, and were able to respond to people's needs. People were supported to receive their medicines by staff that were trained and knew about the risks associated with them.

Staff had up to date knowledge and training to support people. Staff always ensured people gave their consent to the support they received. The management team regularly reviewed how people were supported to make decisions. . People were supported to eat and drink well, when identified as part of their care planning. They explained that they were supported to make their own decisions and be as independent as they could. People and their relatives told us staff would access health professionals as soon as they were

needed. We saw there was effective communication with people, staff and health care professionals which improved people's well-being.

People told us they were important to the staff and the management team. They said they were regularly asked their views about if they were happy with the support they received. People who used the service were involved with collecting feedback from other people who used the service.

People and their relatives knew how to raise complaints and the management team had arrangements in place to ensure people were listened to and appropriate action taken. Staff were involved in regular meetings, training and one to one's to share their views and concerns about the quality of the service. People and staff said the management team were accessible and supportive to them. The management team were adaptable to changes in peoples' needs and communicated changes to staff effectively.

The management team monitored the quality of the service in an inclusive way. The registered manager ensured there was a culture of openness and inclusion for people using the service and staff. The management team had systems in place to identify improvements and action them in a timely way. They involved people who used the service through-out their management systems to ensure they were at the heart of decisions made about the service.

## 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

People benefitted from support received from regular staff that knew their needs and managed their identified risks. People were supported by staff that knew how to support them in a safe way. People were supported with their medicines to ensure they had them as prescribed.

### Is the service effective?

Good ●

The service was effective

People were supported by staff who knew how to meet their needs. Staff were knowledgeable about how to support people. People received support from staff that respected people's rights to make their own decisions, where possible. People were supported to access health care when they needed to.

### Is the service caring?

Outstanding ☆

The service was caring

The service was caring

People benefitted from exceptional care from staff who were inspired by their management team to put people at the heart of everything they did. People received compassionate and caring support from a staff team that would often go the extra mile to enhance their overall well-being. Staff respected peoples' dignity and worked with people to achieve as much independence as possible.

### Is the service responsive?

Good ●

The service was responsive

People were involved in how they were supported by carers who listened and were adaptable to their needs. People benefitted from regular reviews of their support needs. People and their relatives were confident that any concerns they raised would be responded to appropriately.

## Is the service well-led?

Good 

The service was well-led.

People, relatives and staff felt supported by the management team. The culture of the service was to focus on each person as an individual and to involve them with all aspects of their care.

# Management HQ, Headway Worcester Trust

## **Detailed findings**

### Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

This was an announced inspection which took place on 26 May 2016 by one inspector. The provider was given 48 hours' notice because the organisation provides a domiciliary care service and we needed to be sure that someone would be available.

We looked at the information we held about the provider and this service, such as incidents, unexpected deaths or injuries to people receiving care, this also included any safeguarding matters. We refer to these as notifications and providers are required to notify the Care Quality Commission about these events.

We spoke with four people, and two relatives. We spoke with nine staff and the registered manager and the chief executive. We also spoke with a speech and language therapist and an occupational health therapist who had supported people using this service.

We looked at the care records for four people including medicine records, three staff recruitment files, training records and other records relevant to the quality monitoring of the service.

# Is the service safe?

## Our findings

People we spoke with said they felt safe because they had regular support from staff who knew them well. One person said about the staff, "They are all good and help me stay safe." Another person told us, "I have good support; I would be lost without them." A relative said, "They (staff) feel like they are part of the family, we all work together to keep (family member) safe." Relatives told us their family member received care that supported their needs safely. They said staff supported their family member's well-being.

The registered manager and staff explained their responsibilities to identify and report potential abuse under the local safeguarding procedures. All the staff we spoke with had a clear understanding of their responsibility to report any potential abuse and who they could report it to. They told us training on potential abuse and safeguarding concerns formed part of their induction and was regularly updated. This was also reviewed in team meetings to support staff knowledge.

People told us they had discussed their care needs with the management team. This included identified risks to their safety and welfare. For example, supporting with administering medicines and supporting people to mobilise. Staff explained how they managed risks to people while maintaining people's independence as much as possible. For example, one person needed support with their medicines and it was clearly documented on their care plan with a risk assessment to ensure the risks were mitigated. Staff we spoke with said they read people's care plans and looked at their daily notes so they were aware of what support the person needed and what support people received. One member of staff said, "I always check the daily notes before I start a call." Staff were aware of how to manage people's risks and how they were reflected in the risk assessments for each person.

People told us that staff arrived when they were meant to and always let them know if there were any delays. One person told us they had several different members of staff but liked them all and was happy for any of their team of staff to support them. Staff and the registered manager said they had enough staff to meet the needs of people using the service. People told us they were consistently supported by staff who knew them well. Staff told us they met people they were supporting before they visited them to provide their care. This was confirmed by the people we spoke with, one person said, "I know all the carers (staff) and they know me well, it doesn't matter which one comes to help they are all good." Staff told us they visited people on a regular basis to provide continuity for people using the service. They knew how important it was to people that they knew the staff coming to their home.

We saw records of checks completed by the registered manager to ensure staff were suitable to support people before they started work at the service. Staff told us they completed application forms and were interviewed to check their suitability before they were employed. The registered manager checked with staff members' previous employers and with the Disclosure and Barring Service (DBS). The DBS is a national service that keeps records of criminal convictions. This information supported the registered manager to ensure suitable people were employed, so people using the service were not placed at risk through recruitment practices.

Some people needed support with their medicines. The registered manager said this was discussed with people using the service and they were included in decisions about how they were supported. We saw people's plans guided staff in how to support people with their medicines. Staff told us that these plans were updated when needed and they were aware of any changes. Staff said they had received training about administering medicines and their competency was assessed. Staff told us they felt confident when administering medicines to people. They said they received regular spot checks by the management team to observe their administration practices. The registered manager told us they regularly reviewed people's medicine records to ensure that they were completed correctly and that people received their medicines as prescribed.



## Is the service effective?

### Our findings

People we spoke with said staff knew how to support them. One person told us about staff, "They really know how to help me and always listen to me." A relative said, "They [staff] are really knowledgeable and well trained."

Staff told us that they had received an induction before working independently with people. This included training, reading people's care plans, as well as shadowing with experienced staff. Staff said they met all the people they were supporting and had experienced staff share their best practice so people had their needs fully met. They said the management team checked when they were ready to support people on their own. Staff told us they were confident with how they provided support for people using the service. Staff said they felt prepared and had received training in all areas of care delivery. They explained how they received additional training about acquired brain injuries and strokes. One member of staff said this training had improved their understanding and practice when supporting people using the service. Staff told us they felt well supported and had regular supervisions and an opportunity to review their training needs. They were encouraged to complete training to improve their skills on a regular basis. This training included Mental Capacity Act 2005 (MCA), staff were able to explain what this meant for people they supported. The registered manager was arranging updates for staff to ensure their knowledge remained current.

The 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 Act 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 told us staff always asked for their consent before supporting them. Staff we spoke with told us they were aware of a person's right to refuse their support and they explained how they would report this when they needed to. They had an understanding of the MCA, and had received relevant training about this. Staff told us they always ensured that people consented to their care. Staff were aware of who needed support with decision making and who would be included in any best interest decisions for people. The registered manager had an understanding of the MCA and was aware of her responsibility to ensure decisions were made within this legislation. For example, we saw a best interest meeting had been arranged for one person who needed support with a particular decision.

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. We checked whether the service was working within the principles of the MCA. Any applications to deprive someone of their liberty for this service must be made through the court of protection.

The registered provider had not made any applications to the Court of Protection for approval to restrict the freedom of people who used the service. They were aware of this legislation and were happy to seek advice if they needed to.

Some people we spoke had help with shopping, cooking and meal preparation as part of their care needs. They told us they were offered choice and encouraged to maintain a healthy diet. One person told us, "I always choose, they [staff] listen to me and we work together." Staff knew what level of support each person needed.

People told us they received support with their all aspects of their health care when they needed it. One person said, "They [staff] come to appointments with me, it helps me stay calm." Staff had involved other health agencies as they were needed in response to the person's needs. For example, we spoke with an occupational therapist who regularly supported people who used the service. They told us their relationship was really good with the staff and management team and they were able to support people effectively when they needed to. We also spoke with a therapist from the speech and language team. They said that they worked with staff when there were concerns about communication or eating and drinking, and there was effective team working which supported people to improve their wellbeing. The registered manager explained they held regular monthly meetings with other health agencies to ensure people were supported in a holistic way.

## Is the service caring?

### Our findings

Overwhelmingly, people and their relatives told us that the staff and management team were caring and that being supported by this service had made a difference to their lives. One person said about the staff, "They are all lovely and do more than they should, I would be lost without them." Another person told us, "They are all different personalities; it's so nice to have a variation. Different carers [staff] bring different things to our relationship and it keeps it interesting. They are all absolutely brilliant." People told us they valued their relationships with staff and that many staff went 'the extra mile for them'. One person said about the staff, "They are a bunch of angels." They went on to explain how one member of staff had supported them with a concern not related to their care and how they had felt cared for and that they really mattered.

Relatives told us that staff went above and beyond what they were expected to do. For example, one relative explained that staff had visited their family member when they were recently in hospital. Their family member had really appreciated this and the relative told us how much it helped their family member's wellbeing to see their regular staff during what was a stressful time for them.

People we spoke with told us they were supported in a way that focussed on their views and wishes. One person said, "They [staff] all have wonderful natures and will do anything for you." Relatives explained that their family member was the focus for the support they received. One relative said about staff, "We are friends more than anything else; we work as a family with my [family member] in the centre of everything."

Staff we spoke with explained how important it was for them that people who used the service were listened to and had influence over how their care was provided. The registered manager explained how they listened to people using the service and inspired staff through their practice to keep people who used the service at the heart of everything they did. For example they routinely involved the speech and language teams where there were any difficulties with communication. This was to ensure staff were sufficiently informed to enable them to use effective communication with everyone using the service.

People we spoke with explained how well staff understood them and supported their needs. For example, staff explained knowing one person really well helped them to communicate effectively with them. They went on to say they were able to communicate with them using facial expressions and body language to understand the person's wishes. We spoke with a speech and language therapist who worked with people who used the service. They explained that staff often were involved during assessments so they could work together to improve communication with people. They went on to say that staff would then continue to work with the therapist and feedback improvements so there was effective progress made. They also said that staff and the management team would respect what people using the service said and support them to achieve the goals that people had set for themselves.

People said staff respected their dignity. One person told us, "I am always comfortable with staff; they always knock on doors and ask before they do anything, they take their lead from me." Relatives said staff always treated them and their family member with dignity and respect. One relative told us, "My [family

member] was really shy to start with, they [staff] took time and encouraged [family member] to have confidence with them " Staff we spoke with showed a good awareness of people's human rights, explaining how they treat people as individuals and support people to have as much choice as possible.

One member of staff explained how they had over a period of time encouraged one person to improve their environment which was impacting on the person's well-being. This had involved constant discussions with the person to gradually reassure them that changes would improve their ability to be more independent. They explained how they had gone at the person's own pace and understanding and overcome many obstacles during this process. They told us how the person's well-being had improved with the changes in their environment. The staff member said that they had worked as a team with their manager and other members of staff to gradually bring about the improvements.

All the staff we spoke with had examples where they had worked with people using the service to achieve their goals and were really proud that people were able to achieve the improvements to the way they lived their lives. Another member of staff told us about how they spent time listening to people and their relatives talk about their concerns and worries. They explained that they felt this helped people feel valued and listened to. All staff we spoke with were passionate about how important the people they supported were and how the management team supported them to focus on each person as an individual.

The registered manager explained that people who used the service were at the heart of everything they did. This was the ethos for the service and was reflected through their systems and practices which lead and inspired staff to always focus on the people using the service. For example, all new staff were interviewed by people using the service as part of their recruitment procedure. A new member of staff explained that this was really good as it showed how important people using the service right from the beginning. They went on to say how this inspired them from the beginning to see how important people using the service were in all aspects of their service delivery. This was reflected in the comments from people who used the service.

All the people we spoke with said they felt listened to and their views were important with all aspects of their support from the service. The management team also explained that there were two people who used the service on their board of trustees. These people were involved in decisions about the service on a regular basis. Staff we spoke with said they always went the extra mile. They explained that the ethos of the service inspired them to support people to the best of their ability. Staff told us they always received feedback from their management team about how well they supported people, and they felt appreciated by the management team.

People said they were happy with the support they received. The management team told us they always checked to see if the people receiving the service were happy with the support from staff. One person told us they always had support from staff they were comfortable with. They explained that there was one member of staff they had not felt comfortable with. They had discussed with the management team, who listened to the person and they no longer saw that particular member of staff. The management team understood that people needed to build relationships with staff; therefore they took every effort to ensure people were confident with the staff that supported them.

People said staff supported them to make their own decisions about their daily lives. One person told us, "We work together and I do as much as I can. They don't take over, it's still my life." Relatives said they were involved with their family member's care planning, with their family member's agreement and they felt listened to.

People told us they received support from regular staff who knew them and their needs well. This reassured

people that staff knew their needs and were familiar to them. One person explained they always knew who was coming because staff were aware this relieved their anxiety. They did not mind who was coming they just needed to know who it was. One relative said their family member was supported by regular staff and they had built a good rapport with them. They told us, "We both get on so well with all the staff, they are all different but we are all like family." Staff told us they were not rushed and had the time to provide the support people needed.

## Is the service responsive?

### Our findings

People we spoke with said they were involved in decisions about their care. They told us they were consulted and involved from the start of receiving a service. One person said, "I am included with everything, they asked me from the beginning what I wanted help with and we have gone on from there." Another person told us, "They have always listened to me." Relatives told us they had been involved in sharing information about their family member from the start. They also said staff kept them involved and one relative told us they felt very much 'part of the team' to support their family member. We saw staff had captured people's wishes and outcomes from the beginning of their assessment, showing the focus of the assessment was on what people wanted to achieve with the service's support. For example, one person explained they had wanted to feel confident whilst having a shower. They explained that staff had gone from closely monitoring them to now just being within calling distance as their confidence had improved.

Staff we spoke with told us they focussed on enabling people to remain as independent as possible. The registered manager explained they involved other agencies such as, occupational therapists, speech therapists, neuron-psychology, counselling, specialist nurses as they were needed. One person we spoke with explained how staff had worked with them and arranged for another service to telephone prompt them to remind them to take their medicines as their doctor prescribed them. They explained how this promoted their independence and enabled them to live their life as they wished.

Staff told us about one person who had wanted to go to an activity in the community as part of their goals to improved independence. The staff member explained how they went with them to start with and then gradually withdrew as the person's confidence increased.

Staff knew about each person's needs, they said they knew people really well and from the beginning they were given all the information they needed to support people. They could describe what support people needed and we saw this was reflected in people's care plans along with people's desired outcomes. We looked at care records and could see people's likes and dislikes were recorded for staff to be aware of. People we spoke with confirmed that their individual needs were met. Where more complex needs were identified, staff were aware of how to support the person. There were clear plans in place and staff could describe how they supported people. One person told us how they had planned with staff how to improve their fitness as part of their support needs. Staff said they were guided how to achieve this with the person, for example counting parked cars to increase the distance walked over time. We saw this was captured within the care plan for this person, the person told us this was reviewed regularly.

People told us their support was regularly reviewed and where changes were needed they were implemented. People we spoke with said they felt able to say if anything around the support they received needed changing or could be improved. One person said, "I can alter times, increase calls when I need them to. They [staff] will do extra things and go out of their way to listen and adapt to what I need help with. " All the people we spoke with felt nothing needed improving. Relatives said they could contact the management team at any time and they would listen and support them. For example, one relative said when they needed an extra few hours support for their family member, the staff at the office would always support them as they

required. Another relative told us, "They [staff] are really flexible and accommodating, they listen." Staff told us that plans were updated quickly if there were any changes.

People said they were asked to share their views about their experience of the service and the quality of their care through satisfaction questionnaires. We saw the results of these questionnaires for 2015 were positive. The management team told us that this year they were using a different method to capture people's views. They were gathering feedback via face to face meetings with support from the trustees, volunteers, including where possible people who used the service. This was to collect people's views as independently as possible to encourage honest and open feedback. The response was overall positive, with guidance for the management team around areas for service development. For example, some people had commented that they wanted more involvement with the community. The provider had listened to this and was looking into how this could be supported within their current service.

The people we spoke with said they felt comfortable to raise any concerns, and knew who to speak to. One person said, "I am happy to speak to the manager about any concerns, but I have none at this time." People explained they were confident to discuss any concerns about all aspects of their care provision with the management team. Relatives said they were confident to speak to the management team if they had any concerns. The registered manager investigated any concerns raised and actioned them appropriately. For example, we saw one complaint had been investigated and a meeting held to discuss and agree the outcome. There were clear arrangements in place for recording complaints and any actions taken.

## Is the service well-led?

### Our findings

People who used the service and their relatives felt the service was well managed. They said they could always speak with the management team at any time, and they would always take the appropriate action. People we spoke with told us they felt valued and listened to by the management team and the staff supporting them.

The management team knew all of the people who used the service and their relatives well. They were able to tell us about each individual and what their needs were. The registered manager told us it was important that the service supported each person as an individual and looked at how they could support people holistically. For example, the registered manager explained how they were supporting one person who also had housing needs. They said they had supported the person to find different accommodation which was in addition to meeting their care needs.

Staff told us the culture of the service was about the importance of each person who was supported by the service. They explained how this was emphasised through the ethos of their managers through team meetings and one to one's. All the staff we spoke with were passionate about supporting people with all their needs and being responsive and adaptable to people in how care was provided. One member of staff said, "We support people to do what they want to do, it's brilliant." Staff said they all communicated well and worked together to support people with the involvement of the person using the service and their families.

Staff said they were supported by the management team. They told us they could always speak to someone if they had any concerns about a person using the service. For example, one member of staff said their manager would visit the person with them if they had a concern. This was to support the staff member and resolve any concerns. One member of staff said about the management team, "We share ideas and they listen to us." Another member of staff said, "I always enjoy coming to work." Staff told us they had regular one to ones and they were able to share information and ideas, they said they felt well supported and listened to. For example, one member of staff told us how they were supported by the management team with a person with whom they had difficulty communicating. They explained how they worked with their manager and the rest of their team to improve how they communicated with this person. Staff told us how any compliments were always passed on so they felt valued and appreciated. Another member of staff said, "It works well, we really communicate with each other with good results."

The management team completed regular checks to ensure they provided quality care. For example the registered manager said they had identified where improvements were necessary, and completed an action plan to ensure these improvements were completed in a timely way. We could see that the management team regularly reviewed their plan to ensure actions were completed. For example, we saw in one geographical area staff training was not as up to date as the registered manager wanted. This had been identified and action taken, training places booked and a change in the governance for this area to ensure this was monitored effectively. The registered manager said she used any feedback from people using the service to improve and evolve the service. For example feedback from recent questionnaires showed that



people using the service wanted more social engagement. The management team were looking at ways that this could be developed as part of their service delivery.

Staff told us they always reported accidents and incidents. We saw that there was documentation available for staff to complete. The management team investigated the accidents to ensure any actions that were needed were made in a timely way. The registered manager explained how they would review through a practice discussion with staff and resolve any on- going actions when needed.

The registered manager told us people who used the service were included in how the business was managed. She explained how there were representatives on their board of trustees and involved where possible, for example in supporting with the satisfaction questionnaires.