

The Next Step Trust

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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

The Next Step Trust is a registered charity established in 2006 to support adults with learning disabilities and complex health needs. The Trust was registered with the Commission in 2014 and only provides domiciliary care service to people who attend the day centre managed by the same organisation. At the time of the inspection the agency provided care and support to two people in their own homes. This was the first inspection of the service.

There was a registered manager in post. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they 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.

The registered manager told us that sufficient care staff were employed for operational purposes and all new staff shadowed a more experienced member of staff until they felt confident and competent to work alone. The staff training matrix was up to date and we saw one to one supervision meetings took place to support staff to carry out their roles effectively.

The staff we spoke with were able to describe how individual people preferred their care and support to be delivered and the importance of treating people with respect in their own homes. The relatives of people who used the service told us staff were very caring and always provided care and support in line with their agreed support plan.

The support plans we looked at were person centred and were reviewed on a regular basis to make sure they provided accurate and up to date information. The staff we spoke with told us they used the support plans as working documents and that they provided sufficient information to enable them to carry out their role effectively and in people's best interest.

There was a complaints procedure available which enabled people to raise any concerns or complaints about the care or support they received. The people we spoke with told us they were aware of the complaints procedure and would have no hesitation in making a formal complaint if they had any concerns about the standard of care provided.

There was a quality assurance monitoring system in place that was designed to continually monitor and identified shortfalls in service provision. Audit results were analysed for themes and trends and there was evidence that learning from incidents took place and appropriate changes were made to procedures or work practices if required.

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.

There was a recruitment and selection policy and procedure in place and newly appointed staff were not allowed to work until all relevant checks had been completed.

Sufficient staff were employed for operational purposes and to ensure people's needs were met.

Staff knew how to recognise and respond to allegations of possible abuse correctly and were aware of the organisation's whistleblowing policy.

Is the service effective?

Good ●

The service was effective

The initial assessment process was thorough and people said staff listened to them regarding how they wanted their care and support to be delivered.

People were supported by staff who were trained and aware of how to meet their needs.

Staff respected people's rights to make choices and decisions about the way they wanted their care and support to be delivered.

Is the service caring?

Good ●

The service was caring.

People who used the service and their relatives told us staff were very caring and always provided care and support in line with their agreed support plan.

People were treated with respect and staff had a good knowledge of people's individual needs.

Is the service responsive?

Good ●

The service was responsive.

The relatives of people who used the service told us they were involved in planning their care and support and were pleased with the standard of care they received.

Peoples support plans provided staff with the information they required to make sure people received appropriate care and support.

Is the service well-led?

Good ●

The service was well led.

There was a quality assurance monitoring system in place that continually monitored and identified shortfalls in service provision.

There was evidence that learning from incidents/investigations took place and appropriate changes were implemented.

There were clear lines of communication and accountability within the agency.

The Next Step 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.

The inspection started with a visit to the providers offices on 12 January 2016. The inspection was announced. The provider was given 48 hours' notice because the location provides a domiciliary care service and we needed to be sure that the registered manager was available. The inspection was carried out by one inspector. At the time of inspection the service was only providing care and support to two people.

During the visit to the provider's office we looked at the care records of people who used the service, staff recruitment files and training records and other records relating to the day to day running of the service. We also spoke with the relatives of one person who used the service and the registered manager.

Following the visit to the provider's offices we carried out telephone interviews with a relative of the second person who used the service and five members of staff.

Before the inspection we reviewed the information we held about the service. This included looking at information we had received about the service and statutory notifications we had received from the service.

We also asked the provider to complete a Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. The registered provider returned the PIR and we took this into account when we made judgements in this report.

Is the service safe?

Our findings

Recruitment procedures were in place to ensure only staff suitable to work in the caring profession were employed. The staff we spoke with told us the recruitment process was thorough and they had not been allowed to start work before all the relevant checks had been completed. We found minor shortfalls in the recruitment practice which were discussed with the registered manager on the day of inspection and immediately rectified.

We saw there was a staff disciplinary procedure in place to ensure if poor practice was identified it was dealt with appropriately.

The registered manager told us that sufficient care staff were employed for operational purposes and the relatives we spoke with told us they were supported by a regular carers. The registered manager also confirmed that all the staff employed within the home care service also worked within the day centre and therefore people received continuity of care and support.

The provider had a policy in place for safeguarding people from abuse. This policy provided guidance for staff on how to detect different types of abuse and how to report abuse. There was also a whistle blowing policy in place for staff to report matters of concern.

In addition, the registered manager told us they operated an open door policy and people who used the service, their relatives and staff were aware that they could contact them at any time if they had concerns.

The relatives we spoke with told us they felt confident that the staff were trustworthy and had no concerns about their safety. One person said, "The staff are brilliant and never let me down." Another person said, "All the staff without exception are kind and genuinely care for the people they support." They also told us they had a telephone number for the service which they could use both during and out of normal office hours if they required assistance or needed to cancel or rearrange a visit.

The staff we spoke with told us they were aware of how to detect signs of abuse and were aware of external agencies they could contact. They told us they knew how to contact the local authority Adult Protection Unit and the Care Quality Commission (CQC) if they had any concerns. They also told us they were aware of the whistle blowing policy and felt able to raise any concerns with the registered manager knowing that they would be taken seriously. These safety measures meant the likelihood of abuse occurring or going unnoticed were reduced.

The provider had policies and procedures relating to the safe administration of medication in people's own homes which gave guidance to staff on their roles and responsibilities. The registered manager told us that although staff had received medication training they did not at the present time administer medication to either of the two people they supported.

Risk assessments were in place where areas of potential risks to people's general health and welfare had

been identified. These included assessments relating to people's mobility and the environment.

The staff we spoke with told us if they noticed any areas of risk they took immediate action to minimise the risk and informed the registered manager who arranged for a risk assessment to be carried out and the care plan updated.

Is the service effective?

Our findings

The registered manager told us the majority of training courses made available to staff were provided by an external training organisation and staff were required to attend mandatory training in line with the training plan in place. We looked at the training matrix and saw staff training was up to date.

The registered manager told us that all new staff completed induction training on employment. They also told us new staff always shadowed a more experienced member of staff until they felt confident and competent to carry out their roles effectively and unsupervised. This was evidenced by the records we looked at.

We saw individual staff training and personal development needs were identified during their formal one to one supervision meetings. Supervision meetings are important as they support staff to carry out their roles effectively, plan for their future professional and personal development and give them the opportunity to discuss areas of concern.

The staff we spoke with told us the training provided by the service was very good and provided them with the skills, knowledge and understanding to carry out their roles effectively. Staff also told us they were also able to request specific training to be provided if they required it to meet a person's needs. One member of staff said, "I have worked in the caring profession for a number of years and can honestly say the training provided by is much better than in other places I have worked."

The staff we spoke with told us they respected people's rights to make choices and decisions about the way they wanted their care and support to be delivered and showed a good understanding of people's different needs and preferences.

We asked the staff what they did to make sure people were in agreement with any care and treatment they provided on a day to day basis. They told us they if people could not communicate verbally they observed their body language and other indicators which might mean they were unhappy about the way care and support was being provided. Staff also told us they always talked and reassured people while they assisted them. The staff told us they respected people's right to refuse care and support and never insisted they accepted assistance against their wishes. The relatives we spoke with confirmed this.

There was evidence within the care documentation we looked at which showed where people were unable to consent to care and treatment their preferences were discussed and reviewed at multi disciplinary team meetings which were attended by their relatives. This demonstrated to us that the provider acted in line with people's interests.

Information received in the Provider Information Return (PIR) showed the service does not currently support people in the preparation of meals. However, if this was required then an assessment of their nutritional requirements, their likes and dislikes and any other requirements such as allergens and consistency of meals would be recorded and implemented.

Is the service caring?

Our findings

The relatives we spoke with told us staff were very caring and always provided care and support in line with their support plan. They told us that the staff were always pleasant and cheerful when they visited had never failed to arrive and always stayed the correct length of time and had a flexible approach to providing care and support.

One person said, "I am extremely pleased with the care and support provided, I could not wish for better." Another person said. "All the staff are exceptionally kind and caring and the fact they also work in the day centre is an added bonus in so far as they know the people they care for so well."

People told us that staff never discussed confidential information about other people who used the service with them and were professional in their approach to providing care and support. They said that maintaining confidentiality at all times was very important part of establishing a trusting relationship with staff.

The registered manager told that to ensure calls were not missed staff were required to contact the office before or after every visit to confirm they had attended. The registered manager told us there had been no missed calls since the service became operational.

The staff we spoke with were able to describe how individual people preferred their care and support to be delivered and the importance of treating people with respect in their own homes. They told us they encouraged people to remain as independent as possible and always provided care and support in line with the agreed care plan.

One member of staff made the following comment; "It is very important that people who use the service and their relatives feel comfortable with how their care and support is delivered and as a staff team we try hard to provide a quality service."

Is the service responsive?

Our findings

The registered manager told us when a person was initially referred to the service they were always visited by the registered manager or a senior member of the management team before a service started. During this visit a full assessment of their needs was carried out. They told the process took into account any cultural, religious, physical or complex needs the person had.

People who used the service and/or their relatives told us the assessment process was thorough and the registered manager listened to them regarding how they wanted their care and support to be delivered. People told us they were encouraged to ask questions during the initial assessment visit and were provided with information about the service.

The relatives of people who used the service told us they were involved in planning their care and support and were pleased with the standard of care they received. One person said, "I am fully involved with the care planning process and always invited to review meetings." This demonstrated to us that the service was providing care and support in line with people's needs and preferences.

We looked at two support plans and found they were person centred and provided staff with the information they required to make sure people received appropriate care and support. We saw support plans were initially reviewed six weeks after the service had started and then at least annually. The registered manager told a copy of the support plan was kept both in the home of the person who used the service and agency's main office. The staff we spoke with confirmed this and told us they used the support plans as working documents and had sufficient time to read them during their visit.

Staff told us they completed and read the daily reports at each visit and if they had any issues or concerns, these were reported to the registered manager or a member of the senior management team. Staff felt any issues were responded to quickly by the registered manager and said a member of the management team was always on call outside of normal office hours to provide support in case of any unforeseeable events or emergencies. People who used the service and/or their relatives confirmed that staff always read the care documentation when they visited and completed the daily report sheets.

However, we found some daily reports completed by staff were very brief and did not indicate the level of care and support provided. This was discussed with the registered manager and following the inspection we received written confirmation that this matter had been discussed with the staff and would be monitored through the quality assurance systems in place.

The provider had a complaints procedure in place although the registered manager told us no complaints had been received since the service had been registered. However, they confirmed that if a complaint was received it would be acknowledged and responded to within set timescales and a thorough investigation would always be carried out. The registered manager told us they had a proactive approach to managing complaints and they were always available to talk to people and deal with any concerns as soon as they arose.

Is the service well-led?

Our findings

The relatives we spoke with told us the registered manager was very approachable and because the service only provided care and support to people who attended the day centre they were clear lines of communication.

We saw there was a quality assurance monitoring system in place that continually monitored and identified shortfalls in service provision. We saw the registered manager audited people's support plans and risk assessments, the complaints register and the accident and incident log on a regular basis so that action could be taken quickly to address any areas of concern. We saw the registered manager also audited the staff files and checked the staff training matrix on a routine basis to make sure they provided accurate and up to date information.

The registered manager told us the audit results were reviewed and analysed for themes and trends which might lead to changes in established procedures or work practices. There was evidence that learning from incidents/investigations took place and appropriate changes were implemented.

The registered manager told us as part of the quality assurance monitoring process the service sought the views and opinions of the people who used the service to ensure the support provided was appropriate to their needs. This was confirmed by the relatives we spoke with who told us they were contacted by the registered manager or a senior member of staff on a regular basis and were kept fully informed of any events that might impact on service delivery.

The registered manager also told us senior staff also carried out random spot checks on staff as they worked in people's homes to make sure care and support was being delivered in line with their agreed support plan.

We saw that staff meetings were held so staff were kept up to date with any changes in policies and procedures and any issues that might affect the running of the service or the care and support people received. The staff we spoke with told us there were clear lines of communication and accountability within the agency and they were supported through a planned programme of supervision and training.