

Turning Point

Turning Point - Bradford

Inspection report

Bradford Domiciliary Care West Riding House, Cheapside Bradford West Yorkshire BD1 4HR

Tel: 01274925961

Date of inspection visit: 22 January 2021

Date of publication: 02 March 2021

Ratings

Overall rating for this service	Inspected but not rated
Is the service safe?	Inspected but not rated
Is the service well-led?	Inspected but not rated

Summary of findings

Overall summary

About the service

Turning Point – Bradford provides care and support to people living in three 'supported living' settings. Due to the nature of this inspection, we visited one of the supported living settings where six people were supported at the time of the inspection.

Why we inspected

The Care Quality Commission (CQC) have introduced targeted inspections to check specific concerns. They do not look at an entire key question, only the part of the key question we are specifically concerned about. Targeted inspections do not change the rating from the previous inspection. This is because they do not assess all areas of a key question.

We undertook this targeted inspection to follow up on specific concerns which we had received about the service. The inspection was prompted in response to concerns received about safeguarding, medicines management and leadership of the service. A decision was made for us to inspect and examine those risks.

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

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

We expect health and social care providers to guarantee autistic people and people with a learning disability the choices, dignity, 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 providing support to people with a learning disability and/or autistic people.

The service was able to demonstrate how they were meeting the underpinning principles of Right support, right care, right culture. For example, we found the model of care and setting maximises people's choice, control and independence and care was person-centred and promotes people's dignity, privacy and human rights.

We observed staff to be caring and compassionate who clearly knew people well. Staff were supportive, provided positive encouragement and treated people with dignity and respect.

Staff we spoke with clearly understood their individual and collective responsibilities around safeguarding. Staff told us they felt able to speak up and challenge and report poor practice and that management would take concerns seriously.

The registered manager acknowledged there had been some historical issues within the service primarily centred around ensuring a consistent positive culture amongst some staff and maintaining quality standards. However, we were satisfied the registered manager and leadership team had acted appropriately in addressing these issues. We found no evidence of wider systemic issues within the service.

Medicines were managed safely. Systems for ordering, storage, administration and disposal were safe.

People were protected from the risk of acquiring infections as far as reasonably practicable.

Rating at last inspection

The last rating for this service was good (published 08 May 2018).

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Turning Point - Bradford on our website at www.cqc.org.uk

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our reinspection programme. If we receive any concerning information we may inspect sooner.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?	Inspected but not rated
At our last inspection we rated this key question as good. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about.	
Is the service well-led?	Incompated but wat wated
is the service wett-teu:	Inspected but not rated



Turning Point - Bradford

Detailed findings

Background to this inspection

Background

This was a targeted inspection to check on a specific concern we had about safeguarding, medicines management and leadership of the service.

As part of this inspection we also 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 two inspectors.

Service and service type

This service provides care and support to people living in a 'supported living' setting, 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.

Notice of inspection

24 hours' notice of this inspection was given. This was so we could check the Covid-19 status within the service and to ensure the registered manager would be present.

What we did before the inspection

Prior to the inspection we spoke with both the local authority commissioning and safeguarding teams. We reviewed information held about the provider, for example, notifications sent to us by the provider. We reviewed information the provider sent us in the Provider Information Return. This is information we require providers to send us at least once annually to give some key information about the service, what the service does well and improvements they plan to make.

During the inspection

We reviewed a variety of records related to quality and safety within the service. This included safeguarding records, risk assessments, care plans, medicines records policies, procedures and quality audits.

We spoke with three people who used the service and used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experience of people who could not talk with us.

We spoke with six members of staff including the registered manager, service manager, team manager, a senior support worker and two support workers.

After the inspection

We continued to analyse the information gathered during the inspection. We also asked the registered manager for additional information related to whistleblowing and operational and corporate management structures.

Is the service safe?

Our findings

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

At the last inspection this key question was rated as good. We have not changed the rating of this key question, as we have only looked at the part of the key question we had specific concerns about.

Systems and processes to safeguard people from the risk of abuse

- As far as reasonably practicable, people who used the service were protected from abuse. Staff we spoke with were aware of their responsibilities in relation to safeguarding. This was supported by the providers policies and procedures for safeguarding, whistleblowing and raising concerns.
- There were a number of communication routes within the organisation which were available to everyone to share their feedback, ideas and concerns.
- The provider had a dedicated telephone number for anyone wishing to raise a complaint or concern confidentially.
- Other forums were available to staff to raise concerns such quarterly sub-group meetings, staff one-to-ones, and team meetings.
- The registered manager maintained oversight of all reported safeguarding concerns via an electronic tracking tool. Safeguarding alerts were also raised with the relevant authorities as required.

Using medicines safely

- People's medicines were managed safely. Individual locked medicine cabinets in people's bedrooms allowed their medicines to be safely stored and accounted for.
- Staff were appropriately trained and had their competencies to administer medicines checked before they administered independently.
- Medicines were ordered in a timely way, stored safely and people received them as prescribed.
- The Medication Administration Records (MAR) we looked at were fully completed and accurate. There was clear guidance for staff on people's preferences when taking medicines; this included how they preferred staff to offer their medicines and any specific administration instructions.
- Regular medicine's audits informed the management team of any issues, so they could be rectified in a timely manner.

Preventing and controlling infection

- Measures were in place to prevent and control the risk of infection, including COVID-19.
- Staff had PPE such as masks and disposable gloves to minimise the risk of infection when providing personal care.
- Relatives and staff confirmed that staff wore appropriate PPE including masks at all times as required by current government guidance.
- Staff had completed training on infection prevention and control and COVID-19 awareness.
- The provider had a COVID-19 plan and followed government advice on how to prevent and manage any concern relating to the current COVID-19 pandemic.

Inspected but not rated

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 the last inspection this key question was rated as good. We have not changed the rating of this key question, as we have only looked at the part of the key question we had specific concerns about.

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

- The management team and support workers were knowledgeable, experienced and motivated to ensure people received good quality care. This was supported by a robust system of regular audit, quality assurance and questioning of practice, to ensure standards were maintained. Where the need for improvements were identified, action was taken.
- The registered manager had a good understanding of regulatory requirements and was well supported by the providers own internal systems around performance and risk.

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

- The registered manager acknowledged there had been some historical issues within the service primarily centred around ensuring a consistent positive culture amongst some staff and maintaining quality standards. However, we were satisfied the registered manager and leadership team had acted appropriately in addressing these issues. We found no evidence of wider systemic issues within the service.
- We observed staff to be caring and compassionate who clearly knew people well. Staff were supportive, provided positive encouragement and treated people with dignity and respect. People who used the service appeared happy as evidenced through their joyful smiles and laughter throughout the inspection.