

# Together for Children Sunderland Limited

# Support services for disabled children

#### **Inspection report**

Sandhill Centre Grindon Lane Sunderland SR3 4EN

Tel: 01915613125

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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

About the service: Support services for disabled children provides care at home services for 32 children and young people living with disabilities. Four young people needed assistance with their personal care and staff supported the remaining individuals to engage in a range of activities within the community.

People's experience of using this service: Families as well as the young people stated they were very happy with the support they received. Staff worked very closely and sensitively with the young people and supported them to experience a wider range of activities as well as improve their daily living skills. People said the staff were friendly and made them feel at ease.

The children and young people were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service supported this practice.

Staffing levels met people's needs. Staff were well trained and knowledgeable about their roles and the care people needed. Staff received a wide range of training including how to work with children and young people.

Systems and processes were in place and closely monitored so the service was safe and run well. No one needed staff support to look after their medicines but staff were trained and regularly assessed to make sure they could do this if necessary. The registered manager and staff had robust risk assessments and acted appropriately to mitigate any identified risks.

Children and young people's rights were upheld. The young people's guardians made the major decisions but when interacting with the young people, staff ensured they were given choices.

Staff effectively reported any safeguarding matters. The registered manager thoroughly investigated any concerns, and resolved these matters. All incidents were critically analysed, lessons were learnt and embedded into practice.

The service was well run. Staff, guardians, children and young people's views were gathered and used to inform developments at the service. The registered manager made sure that the staff were delivering a good service.

For more details, please see the full report which is on CQC website at www.cqc.org.uk

Rating at last inspection: This was the first time the service was inspected.

Why we inspected: This was a planned inspection.

Follow up: We will continue to monitor intelligence we receive about the service until we return to visit as per our re-inspection programme. If any concerning information is received 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?	Good •
The service was safe.	
Details are in our Safe findings below.	
Is the service effective?	Good •
The service was effective.	
Details are in our Effective findings below.	
Is the service caring?	Good •
The service was caring.	
Details are in our Caring findings below.	
Is the service responsive?	Good •
The service was responsive	
Details are in our Responsive findings below.	
Is the service well-led?	Good •
The service was well-led.	
Details are in our well-led findings below.	



# Support services for disabled children

**Detailed findings** 

#### Background to this inspection

The 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 checked 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.

Inspection team: An inspector completed this inspection.

Service and service type: This service is a domiciliary care agency. It provides personal care to children and young people who are living with disabilities and are living in their own houses and flats.

Not everyone using Support services for disabled children receives a regulated activity; CQC only inspects the service being received by children and young people provided with 'personal care'; help with tasks related to personal hygiene and eating. For people the provider helps with tasks related to personal hygiene and eating, we also consider any wider social care provided.

The service had a manager registered with the Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection: We gave the service 48 hours' notice of the inspection visit because it is small and the manager is often out of the office supporting staff or providing care. We needed to be sure that they would be in.

Inspection site visit activity started on 19 February 2019 and ended on 1 March 2019. We visited the office location twice to see the manager and office staff; and to review care records and policies and procedures.

What we did: We assessed information we had received about the service, which included details about

incidents the provider must notify us about, such as abuse, feedback from the local authority and professionals who work with the service.

Providers are required to send key information about their service, what they do well and improvements they tend to make. This information helps support our inspections. The provider has not yet been asked to submit this information for this service.

During the inspection, we spoke with three parents and visited a young person and their family. Three of the young people had limited verbal communication skills and did not want us to visit.



#### Is the service safe?

#### Our findings

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

People were safe and protected from avoidable harm. Legal requirements were met.

Systems and processes to safeguard people from the risk of abuse.

- The provider had effective safeguarding systems and training in place and all staff had a good understanding of what to do to make sure people were protected from harm or abuse.
- A staff member commented, "We complete regular child safeguarding training and would not hesitate to raise a concern. The children and young people are the most important ones in this whole process so their safety is crucial."

Assessing risk, safety monitoring and management.

• Staff understood where the children and young people required support to reduce the risk of avoidable harm. Care plans contained detailed explanations of the control measures for staff to follow to keep each individual safe. The records used to monitor risks such as exploitation were well maintained.

Staffing and recruitment.

- Sufficient staff were on duty to meet people's needs. Staff worked with the four young people's guardians to assist them to attend to their personal care.
- A relative said, "I work with staff on a morning and they are absolutely fantastic. We get the same worker most of the time, other than when they are on holiday, which is great."
- The provider operated systems that ensured staff were recruited safely.

Using medicines safely.

• No one needed any support to manage their medicines however, staff were trained and regularly assessed to make sure they could do this if necessary.

Preventing and controlling infection.

• Staff had received infection control training and used aprons and gloves to prevent the spread of infection.

Learning lessons when things go wrong.

• The registered manager critically reviewed all aspects of the service and determined if improvements were needed. Action was taken where needed.



#### Is the service effective?

#### Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

People's outcomes were consistently good, and people's feedback confirmed this.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law.

• People's needs were assessed in line with current best practice. An assessment tool was used to monitor people's needs. The registered manager and staff ensured these informed the care plans.

Staff support: induction, training, skills and experience.

- Staff had the skills and experience to support people. They received a comprehensive programme of training. Staff were able to identify additional training they would benefit from and the registered manager supported them to complete these courses.
- New staff completed the Care Certificate, as a part of their induction and completed a week's worth of training plus shadowed staff for their first few weeks.
- Staff had regular supervision and appraisals.
- The registered manager had a system to understand which staff needed their training to be refreshed and who required supervision. Staff told us they felt supported.

Supporting people to eat and drink enough to maintain a balanced diet.

• No one needed support to maintain a balanced diet.

Staff working with other agencies to provide consistent, effective, timely care.

- Staff made sure the service met the children and young people's needs.
- The staff worked closely with the children and young people's social workers and the providers systems allowed notes to be shared with the local authorities children and young people's teams.

Supporting people to live healthier lives, access healthcare services and support.

• The children and young people's guardians organised all appointments with healthcare professionals. But if an emergency occurred whilst the care staff were in sole attendance they knew what action to take.

Ensuring consent to care and treatment in line with law and guidance.

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 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 can only be deprived of their liberty to receive care and treatment with appropriate legal authority. We checked whether the service was working within the principles of the Mental Capacity Act 2005 (MCA).

• The registered manager followed all the principles and guidance related to application of the MCA, human

rights and common assessment framework for children and young people.  • Staff ensured that the young people were involved in decisions about their care and knew what they needed to do to make sure 'best interests' decisions were made.



## Is the service caring?

#### Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

People were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; equality and diversity.

- The young people were happy with the care provided. One relative said: "They tell [young person's name] what they are going to do and support her in a really dignified manner. I can't fault them."
- From our discussion we found that staff worked very closely with people and sensitively supported them to complete personal care tasks.
- The registered manager told us how they supported people's human rights and promoted equality and diversity. They actively promoted the children and young people's rights and made sure staff treated the young people in a person-centred manner.

Supporting people to express their views and be involved in making decisions about their care.

- Staff showed genuine concern for the young people's wellbeing. Staff worked in a variety of ways to ensure the young people received care and support that suited their needs and encouraged them to be as independent as possible.
- Since the service had opened a number of young people had successfully transitioned from this service to adult services.

Respecting and promoting people's privacy, dignity and independence.

- Staff explained how they maintained the privacy and dignity of the children and young people they cared for and told us that this was a fundamental part of their role.
- Young people had been adeptly supported by the staff and this had assisted them to learn the skills needed to be as independent as possible.
- Staff had developed positive relationships with the young people, their families and friends.



# Is the service responsive?

## Our findings

Responsive – this means we looked for evidence that the service met people's needs.

People's needs were met through good organisation and delivery.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control.

- The children and young people were consistently asked to express their opinions about what was on offer and given choices about all aspects of their care and treatment.
- Relatives told us that the staff were good at their job. Comments included, "They are invaluable to me, as I need help to care for [young person's name]. They have been using the service for over nine years and we find they are great."
- Staff engaged the children and young people in meaningful activities and the staff had tailored these to stimulate each young person and entertain individuals.
- Staff spent time researching activities that the children and young people might enjoy and gave them the opportunity to find out if they liked them in a gradual manner. This had led to the young people trying new things and finding different activities that they liked.
- Care plans contained good personalised information about how to support the young people to attend to their personal care.
- People's needs were identified, including those related to equality, their choices and preferences. The service identified, recorded and shared information about the communication needs of people, as required by the Accessible Information Standard.

Improving care quality in response to complaints or concerns.

- People had access to information on how to make a complaint.
- Systems were in place to ensure complaints were acknowledged, investigated and responded to by the registered manager. No concerns or complaints had been raised.

End of life care and support.

• No one using the service was receiving end of life care.



#### 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.

The service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Planning and promoting person-centred, high-quality care and support; and how the provider understands and acts on duty of candour responsibility.

- The provider understood their responsibilities and the legal requirements of relevant regulations.
- The provider had a senior management team who critically reviewed the service and determined what improvements could be made.
- The registered manager and staff consistently strived to deliver an excellent service.

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

- The registered manager had created a culture that effectively supported the staff to deliver high-quality, person-centred care.
- Staff told us they felt listened to and that the registered manager was approachable.
- Relatives and the young people felt the registered manager closely listened to their views, took their comments on board and then, if appropriate implemented their suggested changes.
- The service was well-run. People understood their roles, responsibilities and their accountability.

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

• The provider and registered manager encouraged feedback and acted on it to continuously improve the service. For example, by looking at how to work with young people to support them to learn the skills they would need when moving into adulthood.

Continuous learning and improving care.

• The provider's quality assurance system included a variety of checks carried out by the registered manager to assist them to identify areas for improvement. The registered manager fully implemented these checks. Additionally their registered manager routinely checked that the service operated in line with regulations and best practice.

Working in partnership with others.

• The children and young people and their guardians regularly completed surveys of their views. The registered manager regularly rang and met them in person to gain their feedback about the service, which the registered manager used to make decisions about how effectively the service met individual's needs.