

Barnardo's

Barnardo's Brighton & Hove Link Plus Home Support Service

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

About the service: Barnardo's Brighton & Hove Link Plus Home Support Service is registered to provide personal care for children and young people with disabilities. At the time of the inspection, home support workers were providing a sitting service to provide parents of four children or young people a break from their caring responsibilities.

People's experience of using this service:

- Families and children and young people receiving the service continued to be supported by a tailored care package that met their specific needs and wishes.
- The needs of children and young people who received a service and any risks continued to be comprehensively assessed. Care plans were centered on the child or young person. Care plans had been compiled in collaboration with them and their parent or carer and took into consideration the child or young person's preferences likes and dislikes and the wishes of the family.
- A commissioner told us, "I have heard first-hand how vital the Home Care Support Service is and how well valued and trusted the carers are. We have received many testimonies reinforcing what impact the carers & the service has had for the family."
- The family, including the child or young person, chose the home support worker who they were matched with and received consistent support from. A parent said to us, "All the team at Barnardo's are kind, caring and approachable - understanding fully the needs of the whole family - they have supported us for many years now and have seen our child grow and thrive with their support."
- Children and young people were provided with meaningful and individualised activities and outings which they enjoyed such as horse riding, swimming and going to social groups.
- Children and young people continued to be supported by staff who had the skills and knowledge to meet their assessed needs, preferences and choices. In addition to mandatory training, home support workers received training tailored to the specific needs of the child or young person they were matched with.
- Home support workers knew the children and young people they supported well and treated them and their family members or carers with compassion and respect. A parent told us, "I've been using the service for 5 years, it has been the most constant support that I have received over this time, and the support that feels the most reliable and trustworthy." A feedback form from a parent said, "Our Home Support Worker is such a positive addition to <young person's> life and to my life. She is extremely responsible and thoughtful, she's an observant person and I trust her to meet <young person's> very complex needs. Another feedback form from a parent said, "I feel such a relief knowing <Home Support Worker> is coming for a few hours – it means I can rest if I've been up all night, can go to the supermarket or catch up on stuff that has been

worrying me."

- Parents told us that the communication between them the home support workers and staff in the office continued to be effective.
- Children and young people were protected from harm and kept safe. Home support workers were trained to recognise the signs of any potential abuse and knew what action to take if they had any concerns about people's safety or welfare.
- The service continued to employ sufficient numbers of staff to make sure children and young people's needs were met and for the service to be managed on a day to day basis.
- Quality assurance arrangements were in place to seek feedback from staff, people and parents or carers views about the service to make continuous improvements to the service.

This service met the characteristics of Good. More information is in the 'Detailed Findings' below.

Rating at last inspection: Good. The last inspection report was published on 15 July 2016.

Why we inspected: This was a planned comprehensive inspection that was scheduled to take place in line with Care Quality Commission (CQC) scheduling guidelines for adult social care services.

Follow up: We will review the service in line with our methodology for 'Good' services.

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

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

The service was safe

Details are in our Safe findings below.

Good ●

Is the service effective?

The service was effective

Details are in our Effective findings below.

Good ●

Is the service caring?

The service was caring

Details are in our Caring findings below.

Good ●

Is the service responsive?

The service was responsive

Details are in our Responsive findings below.

Good ●

Is the service well-led?

The service was well-led

Details are in our Well-Led findings below.

Good ●

Barnardo's Brighton & Hove Link Plus Home Support 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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

A comprehensive inspection took place on 20 March 2019 and was announced.

Inspection team:

One inspector carried out the inspection.

Service and service type:

Barnardo's Brighton & Hove Link Plus Home Support Service provides personal care for children and young people living with complex needs such as living with a learning disability and/or autism and/or physical disabilities.

The service aims to provide good quality care and inclusive activities for children and young people and support the families of disabled young people by enabling parents to take a regular break from their caring responsibilities.

The number of hours support that the provider had been commissioned to supply for each child or young person on a yearly basis. Parents and carers could use these hours as they wished and the times and frequency of the visits were arranged on an individual basis with their home support worker. Most parents

and carers used their allocated hours for one or two sessions per week. The duration of the sessions varied but typically lasted for two to three hours. Some parents or carers chose to use some of their hours for longer sessions during the school holidays to facilitate outings.

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 we needed to be sure that they would be in. We visited the office location on 20 March 2019 to see records and policies and procedures.

What we did:

Before the inspection: We reviewed information available to us about this service. We checked the information that we held about the service and the service provider. This included previous inspection reports and statutory notifications sent to us by the provider about incidents and events that had occurred at the service. A notification is information about important events, which the service is required to send to us by law. We used all this information to decide which areas to focus on during our inspection.

The registered provider had completed a Provider Information Return (PIR). 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.

We received feedback from three professionals; a specialist children's nurse, a local authority commissioner and a social worker. They gave us permission to quote them in this report.

During the inspection we looked at:

- Notifications we received from the service
- Three children and young people's care records, risk assessments and medication records
- Records of complaints and audits
- Records of feedback collected from parents and carers
- Other documents relating to the management of the service.

During the inspection we spoke to the coordinator who carries out the day to day running of the service.

After the inspection:

- We received feedback on the service from two parents by email, they gave us permission to quote them in this report.
- We spoke to two home support workers and the registered manager by telephone.

Is the service safe?

Our findings

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

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

Systems and processes to safeguard people from the risk of abuse

- Systems continued to be effective in identifying and reducing the risks to children and young people.
- Home support workers and office staff continued to demonstrate a good knowledge of safeguarding procedures for both children and adults. Staff were supported by safeguarding policies from the provider and quick reference guides made locally.
- A social worker commented to us, "I feel the service is safe, they are responsive to any concerns and if they feel for example behaviour of a young person in placement is at risk then they have been able to put strategies in place either by offering additional respite or having someone go into the home to support foster carers to think through appropriate strategies. Workers are able to raise any safeguarding concerns with professionalism."
- A parent told us, "It is so important that all relevant checks are made to ensure our child is cared for safely and appropriate training is given to deal with our son's medical protocol in case of emergency etc. Barnardo's are extremely thorough in ensuring all safeguarding and relevant training is carried out before the carer begins work with the family."
- Another parent said to us, "The Barnardo's name is the quality assurance and safeguarding assurance that I need, to entrust my most vulnerable child into the care of their Support Worker."
- The registered manager understood how to notify the local authority and the CQC about any safeguarding concerns. Notifications were completed as required.

Assessing risk, safety monitoring and management

- Risks were assessed and managed to support children and young people to be safe. Risks had been assessed based on children and young people's care and support needs.
- Children and young people's needs and risks were assessed before using the service and were reviewed annually and in response to when an individual's needs changed.
- Risks for home support workers as lone workers were mitigated by home risk assessments and ways to contact the provider in an emergency or out of hours.
- Risks for children and young people in doing activities they wanted to do were assessed. Home support workers were then guided to enable the individual to do activities they enjoyed safely. For example, an individual had guidance about how to support them when they went swimming, the plan described known risks and how to support them for example by using buoyancy aids. The plan was centered around the individual and how much they loved swimming.
- Home support workers agreed what to do in an emergency with each family meeting their individual wishes, one home support worker commented to us, "They are always nearby so I can call them, especially if there's an emergency." A parent told us, "When she (home support worker) accompanies him on a weekend, she knows that there is more scope for fun and antics and he loves going out with her. At the same time, she

is very aware of his unpredictability and always keeps him safe either in his wheelchair, or using his backpack with a safety rein, or holding his hand. She chooses routes that are safer and we agree activities where he can feel unrestrained, but recognising that to/from the park beside busy roads, for example, her primary focus is keeping him safe and learning his own road safety." The parent also told us, "On our home support worker's own initiative, she created a small info label for me that included my details, so that in the event of anything happening to her when they were out, a member of the public would be able to get in contact with me - something I hadn't considered."

Staffing and recruitment

- The service was staffed by a small committed group of individual home support workers who are matched with children, young people and their families. Records confirmed that the provider assessed individual's and their family's needs to ensure that their needs could be safely met by sufficient levels of staffing. Allocations and schedules were bespoke, families were able to use these hours as they wish. Records showed that the home support worker and family recorded the number of hours used and annual allocations were updated in the office.
- Staff recruitment practices were safe. Staff were only able to start working following satisfactory references, including checks with previous employers. Staff held a current Disclosure and Barring Service (DBS) check. Recruitment checks helped to ensure that suitable staff of good character were supporting people safely. The coordinator, team lead and registered manager were supported by a central human resources team who supported with recruitment processes.
- A commissioner told us, "I am assured that the processes and policies for recruiting carers & the on-going support that they receive is robust and safe." A parent said to us, "When <coordinator> recruits for us, she knows exactly the type of person that will work for my son's needs, but also for us as a whole family."

Using medicines safely

- Home support workers were trained to give medicines but at the time of the inspection home support workers were not regularly administering medicines to children or young people they supported as their parents gave the medicines. Home support workers had records of the child or young person's current medicines and allergies so they could support with medicines when needed, these records were up to date.
- Some children and young people using the service lived with epilepsy. Home support workers were provided with comprehensive epilepsy care plans and specific training in any emergency epilepsy medication from a specialist children's nurse who knew the child or young person well. Home support workers and records confirmed this. Records showed when a home support worker had needed to give any emergency medicine and what action they took.

Preventing and controlling infection

- Home support workers told us they used protective personal equipment such as gloves to protect people from the risk of infection. The provider delivered protective personal equipment to home support workers and one home support worker told us they use equipment provided by the parents.

Learning lessons when things go wrong

- The registered manager carried out a range of audits to improve the quality of the service. The registered manager carried out care plan and staff file audits, where gaps were identified the registered manager and coordinator took steps to resolve.
- The registered manager coordinator understood their duty of candour, the coordinator told us that they encourage home support workers and office staff to be open and honest. The provider had an online system where concerns could be reported if staff wished to outside of their local service processes.
- Since the last inspection no accidents or incidents had been reported.

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

Good: 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

- 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.

- We checked whether the service was working within the principles of the MCA; we found the service was compliant. Home support workers showed an understanding of the MCA principles, for example a home support worker told us they asked for consent before carrying out any tasks and talk through what they are doing while giving any care or doing any tasks. All home support workers were trained in MCA.

Staff support: induction, training, skills and experience

- Staff had the knowledge, skills and experience to support individual's effectively and meet their current needs.

- Training had been identified that was considered essential for home support workers to complete. Training for each home support worker was arranged according to the needs of the child or young person they worked with through the service. This included positive behaviour support, mental capacity, medication, Makaton, paediatric first aid, moving and handling and safeguarding. Home support workers told us they completed their induction and completed mandatory training and any additional training needed.

- Home support workers have access to additional training to support them meet the needs of the individual they work with, records showed additional training in for example epilepsy medication administration, level 3 diploma in end of life care and autism and anxiety. Many home support workers had additional qualifications, for example a home support worker had level 3 diploma in early years.

- A specialist children's nurse told us, "The carers access training through me as required for specific health needs for the children and Barnardo's are always very good at ensuring that the training is completed and that paperwork is up to date."

- A parent said to us that if the home support worker needed any additional training this would be arranged with the coordinator, they told us, "I know that if there were any additional training requirements, the 3 of us would sit down and work out the most appropriate way for her to skill up." Another parent told us, "<Home support worker> recognises that whilst she had a good grounding in Special Educational Needs and Disability, every child is unique and she took time to learn about my son (and siblings) and she continues to ask questions, share her perspectives, in order to grow her understanding and therefore her capabilities, in order to enable him to be as empowered as he can be and for him to feel safe and happy."

- A home support worker said to us that positive behaviour support training and training in autism and

anxiety gave them tools they implemented when caring for the young person they were allocated to, they told us, "It helped me to understand some behaviours, I learnt about positive behaviour support and redirecting."

- Records showed and home support works said to us that staff had supervision as frequently as they needed or dependant on the number of hours they worked.
- A home support worker commented, "I feel supported by the coordinator, I have quarterly supervision with her." Another home support worker told us that when their allocated working hours increased they were given more supervision to ensure they were supported.
- A parent said to us, "The rigorous vetting procedures and training that Barnardo's Support Workers undergo, is second to none, and the fact that they are supported and offered supervision is also something that everyone who works in this capacity should be receiving."
- Staff had access to an employer assistance provider who would provide impartial and independent support.

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

- Individual care plans included dietary needs, what support an individual may need for eating and any allergies and preferences. At the time of the inspection parents prepared food at home and made a packed lunch for outings. Home support workers supported individuals to eat and drink.

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

- External professionals spoke positively about working with staff from the service.
- Links had been established with health, social care and education professionals. Care plans showed records of contact with professionals such as social workers or schools. For example, for one child who mainly used sounds and vocalisations to communicate a home support worker was working with a speech and language therapist and a specialist school nurse to record what each vocalisation means.

Adapting service, design, decoration to meet people's needs

- Children and young people were cared for in their own homes. Some children and young people used moving and handling equipment such as hoists and track hoists. Home support workers received training in the individuals home from an occupational therapist to learn how to use any specific equipment.
- Care plans in the office and in the individual's home had evacuation risk assessments and plans so that home support workers knew how to support an individual in an emergency such as a fire.

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

- The coordinator and home support worker supported families as they needed and in accordance with their wishes. Records showed that staff from the service had helped families with understanding how to meet their child's needs, supported with making any referrals or engaging with schools where helpful. The coordinator told us about one example where a parent had gained confidence in setting boundaries with their child by having the home support worker to help implement new boundaries.

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

- Records showed that the coordinator was involved as a professional stakeholder in meetings about an individual's care or school for example in a review of an individual's educational care plan.
- Care plans were developed with input from family's and had recorded consent from parents, carers and where possible the young person involved in developing their care plan. Health and medical assessments completed before a family start using the service set out the responsibility on the parent for medicines management.
- The coordinator used guidance from the charities, Scope and the Autistic Society, about the Mental

Capacity Act to support parents and carers of young people who are reaching the age of 16 years. The provider has a policy on the Mental Capacity Act.

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

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

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

- Home support workers and office staff talked about children, young people and their families in a friendly, warm and compassionate way that showed genuine affection. A parent told us, "They have built up a clear understanding over time of my family and our changing needs. They understand us when we are 'ticking over' (and they underpin that) and they also know that we go through periods of intense crisis. I certainly count the coordinator as a vital member of the team that I have built up around my son, and in fact, our whole family."
- Positive, caring relationships had been developed between individuals, their family's and staff. Parents commented to us that staff were kind and caring and made a positive impact on the lives of the child or young person and the family. A parent told us, "Coming home after a couple of hours of break so I can go to our local Book Club and being greeted with a happily sleeping boy AND a plate of freshly made biscuits is utterly heart-warming!" A home support worker said, "I worked in a different job with <young person> for four years before working with this service so I know them and their family really well."
- Formal feedback forms completed by parents and carers showed how the service achieves its goal for children, young people and the families. Feedback seen had comments such as, "Home support service makes a huge difference to our family, it allows us to catch up on daily tasks or down time for us to recharge and better able to cope throughout the rest of the week." Another parents' feedback form said, "Home Support Worker has become a key trusted adult within our family...she slips right in which means I can have a couple of time outs during the week"
- A goal of the service was to give holistic support to the whole family, a home support worker told us that they had felt welcomed in to the family and that they will spend time with the siblings of the child they support when they have gone to bed, the home support worker said to us, "Often we'll cook together or watch TV or a film." A parent also commented to us, "our current Support Worker has worked really hard (but in a natural style) to find connecting points with my other two children and once my son is asleep, if his older siblings are interested, she will happily engage in relevant activities with them, whilst checking on my son at regular intervals."
- The service listened to feedback about involving siblings of the children and young people and looked at ways to increase activities for siblings and involving them further. The service accessed a grant to hold a siblings group for 10 weeks to do theatre, arts and crafts. The service has continued to extend invites to social events to siblings to include them in activities such as summer disco's and bowling.
- Home support workers were trained in cultural competence and equality and diversity as part of their induction. Where an individual had cultural or religious needs these were accommodated. The coordinator gave examples of where it was important religiously to not have pork in the house or where it was important culturally to take shoes off outside before entering the home for families they have previously supported. The coordinator showed that the needs were informed by the family.

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

- Home support workers communicated with children and young people in a way that suited them and their needs. How to support each person with communicating was in line with guidance in their care plans. Home support workers and office staff knew individual's communication needs well. As home support workers were allocated to one family they would learn the individual's communication needs and receive relevant training if needed.
- Home support workers were trained in accordance with the individual's needs, for example, to use Makaton. Makaton uses symbols and signs, either as a main method of communication or to support speech. Home support workers and the coordinator knew individual's gestures and vocalisations well and knew what tools the individual used to communicate, for example some children and young people used signs, Picture Exchange Communication System (PECS) communication cards and tablet computer devices. The home support worker was able to visit the child or young person's school to learn about the communication tools they were using at school, this helped the family to reflect what is happening at school at home.
- A parent told us, "I am very grateful to Barnardo's for their commitment to me and my precious children. I have used them as a sounding board for big decisions around my son, and it has been very useful to be able to talk through certain aspects of Special Educational Needs and Disability (SEND) admin with <Coordinator>. She is reassuring, and always helps me to explore fully and reconsider my thinking where needed. I know that I can talk in confidence and without feeling judged. I am extremely thankful to have been allocated to the Barnardo's Service."

Respecting and promoting people's privacy, dignity and independence

- Home support workers understood how to treat children and young people with dignity whilst encouraging their independence. Home support workers supported individuals only when needed or wanted and encouraged them to express their views in the way appropriate to them. A parent told us, "<Young person> loves his home support worker and he has increased independence, confidence and gained more opportunities to socialise with her support. <Home support worker> provides the chance for our child to relax and have fun and let off steam."
- A home support worker commented to us how they promoted the independence of the young person they spend time with, they said to us, "It's something we're working on, he's eating finger food independently, when he's eating with cutlery we're doing less hand over hand support."
- Another home support worker said to us how they upheld a young person's dignity by, "closing doors when appropriate, making sure their environment is safe and private."
- The service followed data protection law. The information we saw about people was kept confidentially. This meant that people's private information was kept securely.

Is the service responsive?

Our findings

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

Good: 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

- Children, young people and their families received personalised care and bespoke support specific to their needs, aims and preferences.
- Each individual had a care plan which provided information for their home support worker about their care and support needs in a person-centred way. Care plans described the support each child or young person needed in relation to their day at home and outdoors and night-time routines.
- A social worker told us, "All families that I work with are positive about the support they get from Barnardo's. The service feels personal both for the families they work with."
- Home support workers learnt from the individual and their family what they like doing and what they would like to do in the future. For example, one care plan showed that a person liked going swimming and trampolining and records showed that their home support worker supported the child to access both activities. Records showed that home support workers supported individuals to do activities they would like to do, for example one individual wanted to have more social outings outside of school and their home support worker helped them to access a social group. Another individual wanted to play table tennis and the coordinator was working to arrange this at the time of the inspection.
- Care plan had outcome assessments, these were goals for what the individual and family wishes to achieve from using the service, for example for an individual their outcomes were to reduce parental stress, encourage activities and short breaks. When the service requests formal feedback from parents or carers it asked how the service had helped them to achieve their goals, the feedback was positive and had comments from parents such as, "Our home support worker has helped our son to access leisure activities outside the home and he is now regularly attending a social after school club to give the opportunity to socialise with peers outside of school." Another parents comment said, "<Child> loves the home support worker and is always happy to see her knowing he will have fun with someone who understands his needs and support him to achieve his goals."
- Care plans were reviewed annually involving the social worker where appropriate and parent or carer.
- Where a child or young person had behaviours that challenge, there was personalised guidance for home support workers about why individuals might become upset or anxious and how to support them. For example, an individual's behaviour support plan showed what can make the person sad or frightened, strategies to support the individual such as how to give positive praise by giving compression in hand holding, playing ball games, signing and giving verbal praise and explaining what happened. The plan explained what to do if the individuals behaviours progress where they were self-injurious or throwing things. Positive Behaviour Support (PBS) is a holistic, person-centred approach to supporting people with a learning disability and/or autism and supporting people who may display or be at risk of displaying behaviours that challenge. PBS promotes preventative and positive interventions from staff to help avoid the need for using reactive and restrictive practices. This enables people to enhance their quality of life and learn new skills to replace the challenging behaviour.

- A parent told us, "<Home support worker> has a clear understanding of his needs, his thresholds, knows how to use redirection from 'fizzy moments' where he is more likely to throw objects around or other potential harmful to self/other behaviours. She forward thinks and always aims to promote an atmosphere of calm warmth, which is what she knows is most beneficial to him as he is in the 'pre bedtime zone' when she comes for a midweek contact."

- Another parent told us, "<Home support worker> brings energy and fun to the house, she understands our child's unique communication style and is able to engage with fun activities or just hang out at home ensuring he is safe and his needs are met. She is very experienced and knows him and his abilities very well. She copes calmly and appropriately if my child displays challenging behaviour."

- When a new family joins the service, they will be matched with a Home support worker. The coordinator visits as many times as needed to assess needs. The family and child or young person will look at home support workers profiles. The potential home support worker meets the individual with the parents present and visit the individual at school if appropriate. This is then followed by trial sessions before the link between the family and home support worker is finalised.

Improving care quality in response to complaints or concerns

- The provider had a complaints policy which was available to families.

- Records showed that where a complaint had been received this was fully investigated, followed up and that any complaints were listened to.

- A social worker told us, "they have been quick to respond to any concerns or queries about what else the service can offer to support...any issues are quickly dealt with."

End of life care and support

- At the time of our visit no-one receiving the service needed end of life care.

- Records showed that home support workers can access end of life care training and some had been trained in end of life care.

- The provider said to us they can support a child or young person and their families at the end of their life if they can meet the needs of the person and have done this previously working closely in partnership with community nurses.

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

Good: 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 with openness; and how the provider understands and acts on their duty of candour responsibility

- The service had a clear vision and aim, this was reflected when talking to all staff. These aims were achieved for the families the service supported. A parent told us, "The home support service makes a huge difference to our family, <young person> requires constant 1-1 supervision and assistance which can make the daily routine very tiring when juggling with work and basic household duties. Many basic tasks have to be left until <young person> has gone to bed by which time we are often exhausted. He is a loving and strong willed active child who needs help to access most tasks and activities. The support we get from <Home support worker> allows us to catch up on daily tasks or just have some down time leaving us all recharged and better able to cope throughout the rest of the week."

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

- Office staff understood the regulatory requirements that needed to be met to achieve compliance. The rating achieved at the last inspection was on display in the office. Notifications that the registered manager was required to send to CQC by law had been completed.
- Staff were supported with their continual, professional development by the provider.
- Staff were protected from discrimination through an unbiased and impartial recruitment process, staff were supported by the provider's equality and diversity policy and recruitment and selection process.
- A specialist children's nurse told us, "The service seems to me to be extremely well managed and has provided a valuable service to many of our families. The carers access training through me as required for specific health needs for the children and Barnardo's are always very good at ensuring that the training is completed and that paperwork is up to date."

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

- Records showed that suggestions or concerns from staff or parents or carers were listened to and acted on. Feedback was sought from parents and carers through visits, contact and formal feedback forms. A parent said to us, "We have very good communication in place. <Coordinator> and I mostly communicate through email, but also phone calls if there are any changes to arrangements. The Home Support Worker and I use messages in between contacts, but also always have a check in and a check out each time she comes for a contact. We discuss any concerns and I share with her how his day has been at school, for context, and we discuss his changing needs, always with a view to enabling him to develop his wishes, feelings, choices as much as possible."

- Another parent commented to us, "They <the service> regularly organise participation events and opportunities for families to meet socialise and share their experiences, it is clear to see how the wellbeing of our children, families and carers is at the heart of everything they do."
- Home support workers said to us they felt supported by the coordinator and able to contact senior staff, a home support worker told us, "There's a good level of support, if I have any issues I know I can speak to them." Another home support worker commented to us, "It's great service to work for, it's great to help out the parents."
- Office staff team meetings were held fortnightly, minutes showed that new policies or procedures were shared and followed with an email to all staff to ensure learning and awareness of new policies was shared. Staff had recently completed the NHS Information Governance toolkit and staff were trained on this.

Continuous learning and improving care

- A range of audits continued to measure and monitor the service overall. The quality assurance framework was tailored to the service by the Registered Manager, team leader and coordinator. Audits, such as care plan and staff records audits, had recommendations and plans that showed when actions were completed.
- A commissioner told us, "Barnardo's have been responsive & supportive to our commissioning discussions, bringing together families and carers so that we can hear their views and experiences."
- Records showed feedback sought from parents and carers between July to November 2018, all feedback received was positive.

Working in partnership with others

- Records showed that staff worked in partnership with other professionals to achieve good outcomes for children, young people and their family. A social worker told us, "There are always representatives at meetings and when I have needed to speak with management they have always been approachable and available."