

HF Trust Limited

HF Trust - Newcastle DCA

Inspection report

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12 December 2023

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

HF Trust - Newcastle DCA provides personal care and support to people with a learning disability who live in supported living houses across Northumberland, North Tyneside and Newcastle. At the time of our inspection there were 41 people who received support with personal care.

Not everyone who used the service received personal care. CQC only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do we also consider any wider social care provided.

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

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and 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 supporting people with a learning disability and autistic people and providers must have regard to it.

Right Support

People were encouraged to be as independent as possible. People were supported to have maximum choice and control of their lives and staff assisted them in the least restrictive way possible and in their best interests; the policies and systems in the service upheld this practice.

Right Care

The service provided personalised care. The service had appropriately skilled staff to meet people's needs. The provider assessed risks and staff encouraged and enabled people to take positive risks. Staff had training on how to recognise and report abuse and they knew how to apply it.

Right Culture

The culture in the service was positive. Staff understood the organisational values they shared with their colleagues and the supportive teamwork this created. The provider had robust quality assurance systems in place.

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

Rating at last inspection

The last rating for this service was good (published 13 August 2018).

Why we inspected

We carried out this inspection due to the length of time since the last inspection.

This report only covers our findings in relation to the key questions Safe and Well-led. For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating. The overall rating for the service has remained good based on the findings of this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for HF Trust - Newcastle DCA on our website at www.cqc.org.uk.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

The five questions we ask about services and what we found

We always ask the following five questions of services.

<p>Is the service safe?</p> <p>The service was safe.</p> <p>Details are in our safe findings below.</p>	<p>Good ●</p>
<p>Is the service well-led?</p> <p>The service was well-led.</p> <p>Details are in our well-led findings below.</p>	<p>Good ●</p>

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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. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Health and Social Care Act 2008.

Inspection team

The inspection was carried out by an inspector and an Expert by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

This service provides care and support to people living in a number of 'supported living' settings, 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.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

Notice of inspection

We gave the service 48 hours' notice of the inspection. This was because we needed to be sure that the provider or registered manager would be in the office to support the inspection.

Inspection activity started on 27 November 2023 and ended on 12 December 2023. We visited the location's office on 12 December 2023.

What we did before inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with 4 people who use the service and spent time with 2 others. We spoke with 7 relatives.

We spoke with six staff including the registered manager, service managers and support staff.

We reviewed a range of records. This included 2 people's care records and medicine records. We looked at 2 staff files in relation to recruitment. We also viewed a variety of records relating to the management of the service, including audits, policies and procedures.

Is the service safe?

Our findings

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

At our last inspection we rated this key question good. The rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse; learning lessons when things go wrong

- The provider had safeguarding systems in place to protect the people who used the service. The service worked with other agencies to do so. Staff had training on how to recognise and report abuse.
- People said they felt "safe" and were comfortable in the presence of familiar staff members. The management team recently held a safeguarding information session with some of the people who used the service so they would know how to raise concerns.
- The service had recently been subject to a local authority safeguarding investigation due to events at one house. The provider had been fully involved in this process and had learnt lessons from this to minimise the risk of recurrence.

Assessing risk, safety monitoring and management

- The provider had systems to protect people from avoidable harm, including strategies to manage risk.
- Risk assessments about known risks to people, such as health needs or wellbeing, were detailed and up to date. These provided clear guidance for staff about how to support people in a consistent, safe way without compromising their independence.

Staffing and recruitment

- The provider ensured there were sufficient staff on duty to provide the individual support people needed. The management team tried hard to arrange consistent staff members worked with the same people so they were familiar with their needs.
- People who expressed a view said they liked the staff. Relatives said regular members of staff were "tip-top" and "smashing". A small number said staffing was "stretched a bit thin".
- The provider carried out safe recruitment practices to make sure new staff were suitable to work with people. Sometimes agency staff were used to make sure gaps in the rotas were covered.

Using medicines safely

- Medicines were managed in a safe way. Each person's medicines were securely stored in their own rooms so they were easily accessible.
- Staff had training and competency checks in medicines administration.
- Some minor recording anomalies were discussed with a manager at one house and addressed.

Preventing and controlling infection

- The provider's infection prevention and control (IPC) policy was up to date.
- All staff were trained in infection prevention and control. One relative said some staff would benefit from

basic training in household skills.

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 our last inspection we rated this key question good. The rating for this key question has remained good. This meant the service was managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- The provider promoted a positive, personalised culture. The provider's values included choice, promotion of independence and inclusion for people.
- People said they were encouraged to be involved in the running of their own service, for example interviewing potential new staff and designing the décor in their bedrooms.
- In shared houses, housemates held their own meetings to make group decisions, such as rotas for household tasks, and discussed fire safety.

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

- The provider offered opportunities for people, relatives and staff to give feedback about the service.
- People were supported by staff to complete monthly evaluations which asked them if they were happy with their staff and if they were getting the right support. The provider had a national self-advocacy group called 'Voices To Be Heard' and some people who used the local service had previously been involved in this group.
- Staff were involved in meetings and surveys to give their views. At the most recent staff survey in March 2023, over 90% said they understood and respected the organisation's values and ethos.

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

- The provider had robust quality assurance systems to oversee the health and safety of the service. A range of audits were carried out in each service by local managers and these were overseen by the registered manager.
- At the time of this inspection the management arrangements were undergoing a significant restructure. Instead of one registered manager and a group of 'cluster' managers, there would be 3 registered managers with 2 deputy managers each. This would provide more immediate oversight of each service.
- Some relatives said they were unaware of the new management arrangements or had not been involved in consultation about these changes. The registered manager stated this was being addressed by the provider.

Continuous learning and improving care; how the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong

- The provider held monthly managers' meetings across the region so they could share best practice and learn lessons from incidents.
- The provider understood their duty of candour and had been open, honest and apologised to people when appropriate.

Working in partnership with others

- The management and staff team worked with other health and social care professionals to support the people who used the service.