

Wakefield MDC

Wasdale Resource Centre

Inspection report

70 Wasdale Road
Wakefield
West Yorkshire
WF2 9EX

Tel: 01924303423

Date of inspection visit:
07 June 2023

Date of publication:
22 June 2023

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

Wasdale Resource Centre is a domiciliary care agency, providing personal care to people in their own houses and flats. At the time of the inspection there were 2 young people using the service.

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 protected from the risk of abuse. Risks to people were assessed and mitigated to enable staff to provide safe support. Where people required support to manage incidents of emotional distress, clear guidelines were in place and staff were knowledgeable about how to support people at these times. People received support from a core team of staff who knew them well. Staff were trained and attended calls at the allocated times. Staff were recruited safely, and pre-employment checks were in place. At the time of the inspection no one was receiving support with medicines, staff training was available should medicines management be required in the future.

Right Care

People's needs and choices were assessed, and care plans were person centred. Staff supported people to achieve their goals and people's equality and diversity was explored at pre assessment stages and through regular contact with relatives. People were treated with dignity and respect. Staff completed daily records which were detailed and reflected how care was individualised and provided for people. Relatives told us staff were kind and caring.

Right Culture

Quality audits were undertaken by a senior management team. Governance could be improved by ensuring all accidents and incidents were effectively monitored, with lessons learned from these. The service worked closely with external professionals to ensure support was provided in a way which was safe, individualised and in line with people's best interests. Relatives, external professionals and staff were extremely positive about how the service was managed and the staff team. The management team were open and honest and understood their roles in relation to duty of candour.

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

Rating at last inspection

This service was registered with us on 3 March 2022, and this is the first inspection.

Recommendations

We have made a recommendation that the management team review their systems for reporting, analysing and learning lessons from accidents and incidents.

Follow up

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

This was an 'inspection using remote technology'. This means we did not visit the office location and instead used technology such as electronic file sharing to gather information, and phone calls to engage with people using the service as part of this performance review and assessment.

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.

Wasdale Resource Centre

Detailed findings

Background to this inspection

The inspection

We carried out this performance review and assessment under Section 46 of the Health and Social Care Act 2008 (the Act). We checked whether the provider was meeting the legal requirements of the regulations associated with the Act and looked at the quality of the service to provide a rating.

Unlike our standard approach to assessing performance, we did not physically visit the office of the location. This is a new approach we have introduced to reviewing and assessing performance of some care at home providers. Instead of visiting the office location we use technology such as electronic file sharing and video or phone calls to engage with people using the service and staff.

Inspection team

The inspection was carried out by 1 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 is a domiciliary care agency. It provides personal care to people living in their own houses and flats.

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 24 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the provider or registered manager would be in the office to support the inspection.

What we did before the inspection

The provider was not asked to complete a Provider Information Return (PIR) prior to this inspection. A PIR is information providers send us to give some key information about the service, what the service does well and improvements they plan to make.

We used information we held about the service. We sought feedback from the local authority who work with the service. We used all this information to plan our inspection.

During the inspection

This performance review and assessment was carried out without a visit to the location's office. We used technology such as phone calls to enable us to engage with people using the service and staff, and electronic file sharing to enable us to review documentation. We spoke with 2 relatives and 4 staff, including care staff and the registered manager. We also spoke to 2 external professionals who work with the service. We looked at 2 care records and a range of records relating to the management of the service.

Is the service safe?

Our findings

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

This is the first inspection of this newly registered service. This key question has been rated good. This meant people were safe and protected from avoidable harm.

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

- People were protected from the risk of abuse.
- Staff were trained about how to safeguard people and understood their roles and responsibilities to keep people safe. One staff said, "Protecting and preventing harm, ensuring safety is everybody's responsibility."
- The management team worked closely with external agencies to safeguard people and were involved in regular meetings to ensure people were protected from the risk of unsafe harm.

Assessing risk, safety monitoring and management. Learning lessons when things go wrong

- Accidents and incidents were recorded, and staff told us they understood how and when to report incidents. However, improvements were needed to ensure all incidents were reviewed by the management team to enable them to learn lessons from them.
- Individualised risk assessments were in place and care plans contained up to date guidance for staff about how to support people safely. For example, where people required support during incidents of emotional distress, records clearly guided staff about how to reduce this. Daily records showed staff followed this guidance to reduce incidents.
- Relatives told us the service was safe. Comments included, "I am very happy with the care my relative receives from Wasdale and I trust them to keep [name] safe" and "I feel [name] is safe with carers from Wasdale as they are ensuring there is continuity in staff."

We recommend the management team review their systems for reporting, analysing, and learning lessons from accidents and incidents.

Staffing and recruitment

- People were provided with a core team of staff, who knew them well. People received staff at their allocated times and relatives told us there were no missed calls and staff kept to time. A relative said, "We tend to have the same staff every morning. They are amazing, always on time, never late and equally important to us never early."
- Staff were recruited safely, and appropriate pre-employment checks were in place, including criminal checks with the Disclosure and Barring Service were carried out. Disclosure and Barring Service (DBS) checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.

Preventing and controlling infection

- The staff used PPE effectively and the infection prevention and control policy was up to date. Relatives told us staff wore PPE appropriately.

Using medicines safely

- At the time of our inspection the service was not supporting people with medicines. Staff had received training in medicines administration should this be required in the future.

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.

This is the first inspection for this newly registered service. This key question has been rated good. This meant 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 and recorded. Care records were person centred and provided staff with up-to-date guidance about people's needs and preferences. A relative said, "We have a care plan which is regularly reviewed as the situation changes."
- Pre assessments were in place prior to people receiving support and this involved gathering information from relatives and external professionals. The service worked with other care providers and schools to gain information about people's needs.
- Staff supported people to achieve their goals. For example, 1 person was working towards having their nails cleaned. A plan was in place and a relative said, "Staff are encouraging [name] to try and clean their nails by playing with a nail brush."

Staff support: induction, training, skills and experience

- Staff were supported in their roles and received appropriate training to provide effective support to people. New staff received an induction to the service and were provided with the opportunity to shadow more experienced staff.
- Staff were trained, and the service benefited from in house trainers, this provided staff with training required for their roles. Such as, positive behaviour support and how to care for people who have autism. The service also had an in-house Occupational Therapist (OT) who explored ways to provide more effective support to people. A relative said, "The staff understand [name] really well and with the support they are receiving, they are now able to do more and more."
- Staff received regular supervisions and appraisals and told us they felt supported. One staff said, "I have regular supervisions/appraisals. I feel comfortable to speak freely and I am supported by my management team."

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

- At the time of our inspection staff were providing a light breakfast for 1 person only. Records detailed how staff encouraged them and offered choices. A relative told us staff were encouraging and supportive as their loved one often refused to eat.

Staff working with other agencies to provide consistent, effective, timely care. Supporting people to live healthier lives, access healthcare services and support

- The service worked closely with external agencies to provide effective care and support to people.
- Where people received support from different care providers and schools, records showed the service worked closely with both, to provide continuity of care. One care provider told us, "Wasdale staff have been

very supportive of [name] transition to us, already established routines were handed over and how to support [name] with their morning routine. Wasdale staff have attended meetings to ensure consistency from both services involved with the family. Information has been excellent, and communication has been really effective and is ongoing between us and Wasdale."

- Relatives usually supported people to attend healthcare appointments. However, they told us Wasdale staff had supported people in the past to attend appointments and where a person had treatment from hospital, staff had been supportive of their changing needs.

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.

This is the first inspection for this newly registered service. This key question has been rated good. This meant 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. Respecting and promoting people's privacy, dignity and independence

- We received positive feedback about staff. Relatives told us staff were kind, caring and supported their loved ones with dignity and respect.
- Where people required support at times of emotional distress, relatives told us staff were knowledgeable about their needs. Comments included: "The staff know how to distract [name] and will sing and dance" and "The staff are good at putting in routines at home, this really helps. They have taken the time to get to know [name]."
- Staff knew people well. One staff said, "I always support people as an individual and respond to their needs using a holistic approach, being constantly aware of their needs, wishes and feelings."

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

- People were involved in day-to-day choices about their support. As the service supported young people, relatives were regularly consulted about decisions, this also involved external professionals where required.
- Staff used different communication methods to gain people's wishes and promote choice. Relatives told us staff continuously spoke with their loved ones and explained what they were doing. A relative said, "Staff give [name] choices about what they want to wear that day. Slowly [name] is indicating what they want to wear."

Is the service responsive?

Our findings

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

This is the first inspection for this newly registered service. This key question has been rated good. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- Relatives and external professionals were extremely positive about the service and how people received person centred care. A professional said, "One staff manages [name] with a calm approach, observing queues as to when to offer support. They approach [name] in a person-centred way and seem to recognise which approach will best suit based on how they are presenting. Staff clearly know [name] needs."
- Peoples needs and wishes were considered and included in their up-to-date care plans. Relatives told us they were involved in regular reviews and staff had taken the time to really get to know their loved ones. Comments included; "[Name] would not go out with other people before, but the staff are building a relationship with them, and this is changing" and "The staff judge it well when [name] needs some time alone."
- Staff told us care records provided guidance for them and that these were regularly reviewed. One staff said, "Care plans and risk assessments are put together by staff who have been and done home visits and observations, we speak to parents/carers and other professionals to gain as much information as possible to complete these, they are written by staff and updated regularly by key workers to each young person."

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- The management and staff team understood their roles in relation to meeting people's communication needs. People's different communication needs were assessed and included in care records.
- Information was available in different formats, such as pictorial easy to read documents, to enable people to understand.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- The service provided support for people to access school and were working towards supporting people to access community activities.
- Relatives told us staff had been positive and encouraging in supporting their loved ones to access community services. A relative told us staff had been supporting 1 person to become more involved in the community without parental support and were hopeful staff could provide more support with community

activities in the future.

Improving care quality in response to complaints or concerns

- The service had not received any complaints at the time of our inspection. The service had policies and procedures in place to deal with concerns or complaints if required.
- Staff and relatives were aware of how to make a complaint if required. One relative said, "I know who to go to if I had any concerns. I have no concerns about the service."

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.

This is the first inspection for this newly registered service. This key question has been rated good. This meant the service was consistently 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 registered manager promoted a positive and person-centred culture, which achieved good outcomes for people. People received care in line with their needs and preferences.
- Relatives and professionals were positive about the service and how support was provided. One relative said, "I would definitely recommend this service. The only thing that could improve is having the staff for more hours." A professional said, "Overall, Wasdale are an amazing service who have gone above and beyond to support [name]. There have been times where immediate support has been required, specialist support and they have had brilliant communication and flexibility throughout."
- The staff team were positive about the service and told us there was a positive culture within the team. Comments included; "I am extremely proud of this service," "We are lucky to have a very good staff team, and everyone here supports everyone else" and "I am part of an amazing staff team who support each other to be the best they can be."

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements. 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 registered manager and staff team understood their roles and responsibilities. The service understood their roles in relation to providing the right care and support for people who have autism.
- The senior management team completed regular audits to ensure the service was working in line with regulatory requirements.
- Staff told us they felt supported by the management team. The registered manager completed staff spot checks and staff attended regular meetings, to enable them to raise any suggestions or concerns.
- The service had an open and honest culture, and the registered manager understood their roles in relation to duty of candour.

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

- The service could improve how they reviewed accidents and incidents and we have made a recommendation about this, please see the safe section of this report.
- Feedback was sought from relatives and staff about the service and any improvements that could be made. Records showed positive feedback and we found comments such as, 'Staff are invaluable'.
- Improvement plans were in place to ensure the service continuously improved the quality of care people

received.

Working in partnership with others

- Staff worked closely with external professionals to ensure people received high quality, safe and effective support.
- Staff attended regular meetings with external professionals to provide people with continuity of care, which met their needs and achieved good outcomes for them.