

Care Dorset Limited

Reablement 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

At the time of the inspection, the location did not care or support for anyone with a learning disability or an autistic person. However, we assessed the care provision under Right Support, Right Care, Right Culture, as it is registered as a specialist service for this population group.

About the service

Reablement Service provides up to 6 weeks support for people living in the community. Its primary aim is to promote independence so that people can remain living in their own home, help people recover faster from illness and to prevent unnecessary admission to hospital and long-term care facilities. The service was providing the regulated activity of personal care to 39 people at the time of inspection.

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

Right Support

People told us staff made them feel safe. Staff had a good understanding of the signs and symptoms that could indicate people were experiencing abuse or harm. They felt confident they would be listened to if they raised concerns. People had risk assessments which included control measures required to help them minimise the risks in their lives without being restrictive.

There were enough staff to support the number of people they visited. Recruitment was ongoing. Staff received regular spot checks and competency assessments. This ensured practice standards were maintained.

People had an initial assessment prior to them receiving a reablement service. This captured their goals, abilities, support network and desired outcomes.

Staff received a range of training to help them meet people's needs. People felt staff were well trained. The service liaised well with relevant professionals and took a holistic approach to supporting people to regain their optimum level of independence.

Consent was sought prior to the reablement service commencing and during each visit by care staff. People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

Right Care

People told us staff were always kind and respectful. Daily notes confirmed people's right to refuse or influence the degree of support they wished to accept. People were supported to make decisions by staff who understand the importance of choice in all aspects of the care and support they received.

People and, where appropriate, their relatives told us they felt involved in decisions about the care and support they received. People were encouraged and supported to regain as much independence as possible with staff careful not to deskill them.

People's reablement plans were detailed and person-centred. People's support was reviewed and amended to reflect the progress achieved on their reablement journey.

Right Culture

The service had a friendly and supportive culture. Staff enjoyed working for Reablement Service. People, relatives and professionals felt the service was organised and well run. The registered manager was praised by all stakeholders and felt supported by the provider.

Various audits took place which provided good oversight and helped maintain service quality. People's and relative's views were sought via surveys at the end of people's reablement service. Comments were positive.

The service had developed good working relationships with others including District Nurses, Hospital Discharge Teams and Occupational Therapists. This was helping people to achieve good outcomes during their time with the service. The service understood its vital role as a contributor to the health and social care system.

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

Rating at last inspection

The service was registered with us on 3 October 2022 and this was the first inspection.

Why we inspected

This inspection was prompted by a review of the information we held about this service.

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.

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.

Reablement 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. 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 2 inspectors and 2 Experts 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 48 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.

Inspection activity started on 9 March 2023 and ended on 14 March 2023. We visited the location's office on 9 March 2023.

What we did before the inspection

We reviewed information we had received about the service since the new provider took over. We sought feedback from the local authority and professionals who work with the service. 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 all this information to plan our inspection.

During the inspection

We spoke with 19 people who used the service and 11 relatives about their experience of the care provided. We spoke with 4 members of staff including the registered manager, deputy manager, office staff and nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

We received email feedback from 16 staff including deputy manager, reablement officers, reablement care workers and care coordinators. We received feedback from 4 health and social care professionals who work with the service. We visited 3 people in their own homes.

We reviewed a range of records. This included 6 people's care records and multiple medication records. We looked at 5 staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

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 for 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; Assessing risk, safety monitoring and management

- People told us they felt safe. Their comments included: "I feel safe. Staff are reassuring", "I felt safe with them here" and, "Oh yes, I felt absolutely safe."
- Staff had a good understanding of the signs and symptoms which may indicate they were experiencing abuse or harm. Staff knew how to raise concerns internally and to external agencies such as the local authority and CQC. Staff were confident the registered manager would take appropriate action when required. A staff member said, "I have reported concerns and they are always dealt with."
- People had up to date risk assessments which included control measures required to help them minimise the risks in their lives without being restrictive. This included risks in relation to their health and home environment. A person said, "They understand how my health affects me differently every day." A staff member told us, "Risk assessments are carried out by our field officers on each individual client, so we have all the information needed to provide support safely."
- The service had a policy to support staff for any occasion they attend a person's home for a scheduled visit and the person is not there or the staff member is unable to gain access. Staff understood how to respond in such circumstances. This helped ensure consistent and timely follow up.
- Staff told us there were regular spot checks to ensure they were supporting people safely. A staff member said, "[Reablement] officers do regular check visits and supervision checking on medication, personal protective equipment (PPE) and other areas of the job."
- Staff told us they had sufficient travel time between visits. This was regularly reviewed and helped ensure staff punctuality and safety when travelling.

Staffing and recruitment

- There were enough staff to support the number of people they visited. People told us staff turned up on time and stayed for the full visit duration.
- The service assessed people's level of need to enable them to prioritise visits in the event of emergencies or unplanned staff shortages.
- The service had robust recruitment and selection procedures. Checks had been done to reduce the risk staff were unsuitable to support vulnerable people. This included verified references and Disclosure and Barring Service (DBS) checks. DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.

Using medicines safely

- Where people required support with their medicines, these were managed safely by staff who had received the relevant training and competency assessments.
- People's medicines administration records contained sufficient detail to support staff with this task.
- Medicines records were regularly audited. Where any issues were identified there was timely follow up.

Preventing and controlling infection

- We were assured the provider was using PPE effectively and safely. Staff competency checks included this.
- We were assured that the provider was promoting safety through good hand hygiene. This also formed part of staff competency checks.
- We were assured that the provider's infection prevention and control policy was up to date.
- Staff had received training in food hygiene.

Learning lessons when things go wrong

- Staff completed accident and incident reporting forms. These were reviewed and signed off by management. The process included reflection on what had happened, impacts for people and/or staff and what steps were required to prevent a recurrence.
- Monthly trends analysis took place with learning shared with reablement staff and the provider's other services, where appropriate.

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 had an initial assessment prior to them receiving a service. This included detailed discussion about the support people needed and how they wished to be helped to achieve their reablement goals. A staff member said, "Our initial visits are where we gain the main information as the person is in their home and we can ask the client and look at the environment to see how we can work with the person, and family if applicable, by looking at their abilities and facilities to achieve their goals."
- People were unanimous in their praise of the service they had received. They told us, "They did a wonderful job. I hadn't been able to shower myself for 6 months. They let me do what I could do and observed what I couldn't do, then assisted me" and, "The support I have has decreased over the weeks as I have improved." A staff member told us, "One person said it's worth going into hospital to know [they] could have us back."

Staff support: induction, training, skills and experience

- New staff had an induction which included shadow shifts with more experienced staff and practical competency checks in line with the Care Certificate. The Care Certificate is an agreed set of standards that define the knowledge, skills and behaviours expected of specific job roles in the health and social care sectors. It is made up of the 15 minimum standards that should form part of a robust induction programme.
- Staff completed a range of training to help provide them with the necessary skills and knowledge to support people. This included: management of diabetes, end of life care, dementia and safe handling of medicines.
- Staff commented: "Training is very good. If we need any additional training or equipment we only have to report and ask our [reablement] officers", "New training opportunities are regularly offered, we are also asked at supervision if there is any training we would like to do" and, "We do get lots of training with regular updates, more online now since COVID-19. Did get back in the classroom recently, which was good."
- People were complimentary about the skills and knowledge of staff. Their comments included: "The experience of staff showed with the way staff handled me. Trained very well", "They have helped me cope with a situation that is completely alien to me. They made things bearable. I would definitely recommend them" and, "All know what they are doing."

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

- People were encouraged to eat and drink sufficiently to maintain their well-being and support was given where this was required. Records and people confirmed this. A relative said, "They started doing [family member's] lunch but have stopped this now as [family member] now manages to do this."
- The service liaised with appropriate professionals, such as speech and language therapists, if concerns

were identified with people's dietary intake.

- People's dietary needs were known and met. This included their likes, dislikes and any known food intolerances or allergies.

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

- The service took a holistic approach when supporting people to reach their reablement goals. This included a good understanding of the benefits to people of timely referral and partnership working with health and social care professionals such as occupational therapists, social workers, district nurses and GPs. Reablement officers were embedded in multi-disciplinary teams which supported timely access to advice. A person said, "They've been very good in providing me with other contacts I can use."
- Professionals commented positively about the service including: "They are really proactive with equipment provision ideas and recommendations. The service is very adept at ensuring they are providing a holistic package of support for those they are supporting in the community", "They are really good at grading activities, recognising when people have their strengths and have rebuilt their confidence" and, "I have found them to be extremely professional and helpful. They engage with our advice; this means often their staff support the client by practicing techniques shown by us during our sessions."

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 MCA 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 when this is in their best interests and legally authorised under the MCA.

When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty.

We checked whether the service was working within the principles of the MCA.

- People's mental capacity had been considered as part of the initial assessment process.
- Staff demonstrated a good understanding of the principles of the MCA and took this approach when supporting people.
- Staff understood the importance of seeking consent before supporting people. One staff member commented: "It is important that people consent to care, it shows respect to the clients being supported and keeps them in control of what their needs are and what support they require."

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

- People told us staff were kind and respectful. People's comments included: "They are so lovely. They really are", "It was lovely to get to know them. They couldn't be more considerate than what they are", "Staff were kind and courteous" and, "They may give me a little cuddle if I need it." A staff member said, "It is a privilege to visit people in their own homes. This should be respected." Another expressed, "I look forward to my visits this job is so very rewarding, and it gives me so much pleasure to help the people I visit."

- Daily notes confirmed people's right to refuse or influence the degree of support they wished to accept.

- The service kept a record of compliments from people and relatives which were shared with staff.

Comments included: "All the carers were helpful, kind and non-judgemental. Each one of them is a credit to the team and were invaluable to me", "They went above and beyond to look after [family member], and I can't speak highly enough of them all" and, "The care I received from the team of carers who visited me each day was exemplary. I was amazed and impressed by the level of care given to me."

- People and, where appropriate, their relatives told us they felt involved in decisions about the care and support they received. A staff member said, "We work closely with the clients to allow them to make the choices about what they would like to achieve." A person confirmed, "They ask me what I want them to do."

Respecting and promoting people's privacy, dignity and independence

- People told us staff supported them in a way that maintained their privacy and dignity. This included when helping them with personal care. People's comments included: "They respect my privacy and my home", "I don't feel embarrassed one little bit. They're all very kind and compassionate" and, "None of them have made me feel uncomfortable. They've made me feel good about myself."

- People confirmed they were supported to regain as much of their independence as possible. A person said, "I'm a frightfully independent person. If I want help I ask for it. They don't do what I can do." Another told us, "They are supportive of me, and encourage me to do things."

- Staff encouraged people to be partners in their reablement. A staff member described their approach, "Encourage, at their own pace, explain different ways to do things, talking to them, let them take the lead, give them time and not taking over." Another told us, "From the initial visit it is about explaining what reablement is about. Asking what the person wants to achieve. Enabling the person to do as much for themselves as possible but with the reassurance that we are there to support if required until they are feeling more confident or fully independent."

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

- People's reablement plans were detailed and person-centred. They included people's abilities, support network, goals, desired outcomes and progress. Progress was regularly reviewed with the person and, where appropriate, their relatives and relevant professionals. A professional told us, "They give regular progress reports. They are really good at turning things around for people." Another said, "Staff have the ability to reable and identify ongoing care required in a timely manner."
- People were supported to make decisions by staff who understand the importance of choice in all aspects of the care and support they received. A staff member said, "It's so important to encourage and support our clients to make their own decisions however small a decision, to make them feel empowered and in control."

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.

- People's communication needs were assessed and detailed in their care plans. This included the person's preferred method of communication, any impairments that could affect their communication, and guided staff on the best ways to communicate with them.

Improving care quality in response to complaints or concerns

- The service had a complaints policy which was included as part of people's welcome pack which was held in their homes. People and relatives told us they would know how to complain and felt confident they would be listened to.
- No formal complaints had been received since Care Dorset Limited took over Reablement Service.

End of life care and support

- Staff had been trained to support people at the end of their life. This included how to provide emotional and practical support to people's families at this difficult time.
- The service had received positive feedback for end of life care they had provided. A person's family had fed back, "I wanted to say the biggest, most giant thank you for all you all did for my [family member] in [their] last months, without you all, always putting [family member] first, there is no way [they] would have had those last bonus months. Thank you will never be enough."

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 culture of the service was positive and supportive. Staff commented: "A great working atmosphere", "People are at the heart of what we do. Whether it be the safety of clients or staff. We are a team. We are professional, open, honest and want to enable clients to achieve their goals, be safe and independent in their homes", "I feel our service is very professional, kind and caring. We provide a great service", "Caring, professional, we all support one another, extended family" and, "I would say hard working and supportive."
- Staff told us they felt proud to work for the Reablement Service. Their comments included: "I feel passionate about what I do, and I know that the team I work with does to", "It's such a rewarding team to work for", "I am passionate about the service. The compliments we receive make what we do worthwhile and show we are a vital part of the Dorset community" and, "Working for reablement is the best job in the world, I get real job satisfaction watching people progress and get better with our support, to be part of their recovery is a privilege."
- Staff told us they got on well with colleagues and felt supported. Their comments included: "We do work well as a team with great communication between staff", "I do feel very supported by my colleagues and higher management, no matter how trivial, someone always helps or gives support", "Every member of the team is hardworking and supportive" and "We are a team who look out and after each other, work well under pressure but can laugh together."
- The registered manager held the team in high regard. They told us, "I'm extremely lucky to have such a large group of hardworking and dedicated staff that put the clients at the heart of what they do. I'm so fortunate."

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

- Managers and staff had a good understanding of their roles, particularly the emphasis on supporting people to regain their optimum level of independence within a time limited reablement care package.
- The registered manager and other management staff were well respected by staff. They commented: "Management seem very engaged in supporting staff and clients to a high standard", "[Registered manager] is caring, honest and incredibly knowledgeable in what they do. I learn from [registered manager] every day", "[Registered manager] is one of the most supportive managers I have worked with, so approachable, and nothing is too much trouble. [Deputy manager] is equally as amazing, always there when support needed" and, "I respect a manager who earns it and [name of registered manager] does earn it."

- People and their relatives felt the service was well led. Their comments included: "I would say the service is well managed", "I think it all works well, no hiccups" and, "I think they are very well organised, there is nothing to change."
- There was a robust audit process covering the whole of the service. Various monthly managerial checks and audits took place which included: care plans and outcomes, survey feedback, training and medicines. In addition to senior management auditing, the nine reablement officers provided additional practice oversight across the service.
- The registered manager felt supported by the provider. They said, "I feel more supported than [ever]. They are supporting me to attend some national conferences. They are happy for me to go on strategic management courses. I can't feel any more invested in than I am."
- The registered manager understood CQC requirements, in particular, to notify us, and where appropriate the local safeguarding team, of incidents including potential safeguarding issues, neglect and serious injury. This is a legal requirement.
- The registered manager had a good understanding of the duty of candour. They told us, "It's about having absolute integrity and honesty at all times even if we have caused harm. Being honest and learning from that and putting actions in place where we have identified improvements."

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

- People's and relatives views were sought at the end of the reablement care package. Feedback was positive. Comments included: "Very helpful and encouraging service to help one find one's feet following a stay in hospital", "They gave me confidence and advice" and, "Staff were excellent. I couldn't wish for better treatment."
- The provider had engaged with staff from the outset of taking over the service. One staff member told us, "Since becoming Care Dorset Reablement, [director's name] and the team have kept us up to date with what is happening and their vision for the future making the team feel valued as they encourage us to be part of that vision by updating us each week with a newsletter and asking us for our feedback and participation about the future." Another said, "Care Dorset have made me feel more valued. It feels that we are being listened to."
- Staff told us they felt appreciated. Staff comments included: "I am often thanked for what I do", "We do get thanked for covering extra work and showing good work practices", "Managers show verbal appreciation and there are catch up meetings over a cup of tea, 1:1 where appreciation is made clear" and, "I feel very appreciated for everything that I do, [deputy manager] and [registered manager] are always there for me in and out of work hours if needed. I am always praised for my work."

Continuous learning and improving care; Working in partnership with others

- Staff were supported to improve their skills and knowledge. A staff member said, "I feel with Care Dorset we are being allowed to empower staff and skills. I recently went on a 'challenging conversations' course. I found the style of training different, and it has given me the skills to have difficult conversations whether it be with colleagues, clients, families, or other agencies."
- The provider had commissioned an external review of the service to help inform a service improvement plan. Progress had been made and included streamlined processes and improved communication.
- The service worked in partnership with others to provide good care, treatment and advice to people. This included developing and maintaining good working relationships with community nurses, local authority commissioners, hospital discharge teams and GP surgeries.
- Management and staff recognised the vital contribution the service made to the health and social care system. A professional said, "[The service] has undoubtedly prevented many admissions, readmissions and improved the capability of clients back to independent living."

