

Bolton Council

# Home Support Reablement Service

## Inspection report

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Date of inspection visit:

30 November 2023

01 December 2023

02 December 2023

08 December 2023

Date of publication:

29 December 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

Home Support Reablement Service is a domiciliary care service providing a time limited period of assessment and rehabilitation for in their own houses and flats in the community for support with personal care. At the time of our inspection there were 106 people using the service. 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. At the time of inspection, the service was providing personal care to 106 people.

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

People felt safe and staff knew what to do if they thought people were at risk. Staff managed people's medication safely. Staff recruitment processes were robust and staffing levels ensured people's needs were met by familiar staff. The provider followed current infection prevention and control guidance.

The provider had recently implemented innovative discharge planning processes to reduce the risks of people being readmitted to hospital, through joint working groups which included healthcare professionals. People's health and nutrition needs were supported, and staff were aware of their responsibility to promote people's rights. The provider had access to a range of services to support people's communication needs.

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.

People's needs were reviewed throughout their rehabilitation programme, and staff were trained to provide support whilst promoting independence and assessing for on-going support needs. Staff approaches promoted dignity & respect. People were involved in decisions about their support needs.

People were happy with their support and felt they could talk to staff if they had concerns. The provider had systems in place to learn from issues as they arose, and outcomes were communicated to staff. People had ongoing access to healthcare professionals, and guidance was shared with staff in a timely manner.

Systems were in place to monitor quality and safety. The registered manager audited support records, including accidents and incidents, to assure themselves of quality. The provider sought regular feedback from people to improve their support. Lessons were learned when concerns were raised, and these outcomes were communicated to staff. Staff worked well in partnership with other agencies to deliver effective support.

At the time of the inspection, the location did not care or support anyone with a learning disability or autistic people. 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.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk).

#### Rating at last inspection

The last rating for this service was good (published 14 November 2017).

#### Why we inspected

This inspection was a planned inspection based on the date the service was last inspected.

#### 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?

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 ●

# Home Support 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

This inspection was carried out by an inspector and 4 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

Home Support Reablement Service is a domiciliary care agency. It provides personal care to people living in their own houses and flats on a short-term basis.

#### 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 we needed to be sure the provider or registered manager would be in the office to support the inspection.

Inspection activity started on 30 November 2023 and ended on 8 December 2023. We visited the location's office on 30 November 2023.

#### What we did before the inspection

We sought feedback from the local authority and healthcare 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 this information to plan our inspection.

#### During the inspection

We spoke with the registered manager and head of service. We spoke to 4 office staff, including coordinators, resource planners, and service managers, and received feedback from 6 support staff.

We spoke with 12 people receiving support and 12 relatives. We reviewed 17 people's support records, including the administration of medicines for 4 people. We looked at staff files in relation to recruitment, training and supervision, and a variety of records relating to the management of the service, including policies and procedures, audits, and meeting minutes.

We asked the registered manager to send us documents before and after the on-site inspection. These were provided in a timely manner and this evidence was included as part of our inspection.

# 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. At this inspection 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

- People were protected from abuse. The provider had policies and procedures for safeguarding and whistleblowing to protect people from the risk of abuse.
- The registered manager fostered an open and transparent culture which encouraged people to raise any safeguarding concerns.
- Staff were aware of the different types of abuse and had been trained in their responsibilities for safeguarding adults. Staff knew what actions to take if they witnessed or suspected abuse.
- Healthcare professionals told us the service kept people safe. One healthcare professional told us, "Home Support Reablement Service is always engaging, willing to take advice, and proactive with any safeguarding enquires."

Assessing risk, safety monitoring and management

- Coordinators assessed individual risk and implemented controls to mitigate concerns.
- Risks associated with the provision of peoples' support had been assessed by coordinators as part of the provider's independence plan process. Risk assessments were detailed, and person centred.
- Staff had completed the appropriate mandatory training to keep people safe.

Staffing and recruitment

- The provider had effective recruitment processes, including effective use of the Disclosure and Baring Service (DBS). DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.
- The registered manager ensured there were enough staff, with the right training and skills, to meet people's needs. Staff told us staffing levels were good and support processes were effective in enabling them to carry out their roles.
- The service had an electronic system to enable the registered manager and service coordinators to track late calls effectively and to make alternative arrangements through consultation with people, where appropriate. Records showed no recent calls had been missed.

Using medicines safely

- The provider had processes in place to support people with prescribed medicines.
- The registered manager ensured staff received medicines training and had processes in place to assess their competency to ensure they could administer medicines safely.
- People's medication records confirmed they received their medicines as required.

### Preventing and controlling infection

- The provider used effective infection, prevention, and control measures to keep people safe, and had processes in place to ensure staff followed them.
- The registered manager had plans in place to alert other agencies to infection control concerns affecting people's health and wellbeing.

### Learning lessons when things go wrong

- The provider had systems in place to support staff reporting and recording any accidents and incidents.
- Complaints, concerns, and incidents were recorded and followed up by the provider.
- The registered manager ensured lessons were learned and practices changed if any trends, for example errors in the administration of medicines, were identified.

# 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.

At our last inspection we rated this key question good. At this inspection the rating for this key question has remained 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 by the provider's coordinators before support commenced. People were involved in the assessment and relatives were included where appropriate.
- People's support plans were personalised, strengths-based, and reflected their rehabilitation needs. People, those important to them, and staff reviewed plans regularly together throughout their rehabilitation process.
- Staff understood people's rights, relevant legislation, and best practice.

Staff support: induction, training, skills, and experience

- The provider had systems in place to ensure staff received an effective induction, training, and supervisions, and were skilled and competent to carry out their roles.
- Ongoing training was completed by all staff as required. Staff were supported with job progression and professional development. For example, the provider arranged 'away days' where staff could focus on the needs of their role and help design processes to ensure people received effective support.
- Staff told us they felt confident in supporting people's needs and received a comprehensive induction, including shadowing other staff before supporting people on their own and had access to the Care Certificate programme. The Care Certificate is an agreed set of standards which 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 which should form part of a robust induction programme.

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

- The registered manager and service managers recorded people's cultural and religious needs and ensured staff respected people's needs and wishes when supporting them at mealtimes.
- The provider ensured people's support plans included information about their needs regarding fluids and nutrition, and assessments identified where there was a need to refer for further healthcare professional support.

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

- The provider worked closely with a range of healthcare professionals and partner agencies to ensure people received effective support.
- The provider had recently introduced an innovative new 'Hospital to Home' referrals team which enabled timely, joint working with healthcare professionals to improve discharge waiting times (from hospital) and

to ensure complete packages of care were in place from the point of discharge. This had been shown to effectively reduce the risks of readmission to hospital and improved rehabilitation outcomes for people, with data on both issues showing significant service improvements since implementation.

- The registered manager ensured people had regular access to healthcare professionals throughout their rehabilitation process. Staff support was in place to enable assessments of longer-term needs where appropriate.
- The provider ensured people were encouraged by staff to make healthy lifestyle choices which promoted their recovery and reduced the risk of future concerns.
- Support records showed advice given by healthcare professionals was acted upon by staff, and people's health concerns were promptly raised and addressed with the appropriate service. For example, staff worked closely with the admissions avoidance team.

#### 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.

- The provider had processes in place to ensure the service worked within the legal requirements of the MCA. Assessments of people's needs included people's capacity to choose and make decisions.
- Staff demonstrated an awareness of supporting people to make decisions and understood the principles of the MCA.

# 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.

At our last inspection we rated this key question good. At this inspection the rating for this key question has remained 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

- People received kind and compassionate support from staff who used positive, respectful language which people understood and responded well to.
- The registered manager ensured people's equality and diversity was considered and people were treated fairly, regardless of their age, sex, race, disability, or religious beliefs.
- The provider empowered staff to have a good understanding of people's needs and kept them informed of any changes to people's support to foster a culture of respect and understanding.
- Relatives felt staff were good at responding to people's needs. One relative said, "I think they do a really good job. [My relative] would still be in hospital, or in a care home if it wasn't for them."

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

- The provider ensured people were fully involved in decisions about their support.
- Staff supported people to make decisions about their support, including decisions involving independence promotion and assessments of the need for potential ongoing support services at the end of their reablement programme.
- People said they were asked regularly by the service if they wanted to make any changes to their support plans, and the plans were changed accordingly.
- Relatives told us staff were not rushed and would spend time talking to people. One relative said, "Staff will sit and chat with [my relative] about events, world news, and their interests as part of the visit. It really helps, and shows staff treat people with respect."

Respecting and promoting people's privacy, dignity and independence

- Staff promoted people's independence using 'Independence Plans' as part of their reablement support.
- Staff understood the importance of respecting people's privacy and supporting them to be as independent as possible in their own home.
- The provider ensured people's dignity and rehabilitation needs were understood by recording them in their support plans; they checked staff were meeting them by carrying out regular observations and speaking with people.
- People felt staff were good at promoting independence. One person said, "Staff have supported me to discover what I can and can't do (since coming out of hospital); I feel safe, and they always help me at first if it is something new."

# Is the service responsive?

## Our findings

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

At our last inspection we rated this key question good. At this inspection the rating for this key question has remained 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

- The provider ensured people had clear support plans in place detailing their needs and preferences in a personalised, responsive way.
- People's support plans described their reablement and independence promotion needs and were reviewed regularly by staff as part of a joint working process with healthcare professionals, the person receiving care, and their relatives where appropriate.
- Staff had a good understanding of people's needs and told us the registered manager and service managers kept them informed of any changes to people's support.
- People and relatives told us they were regularly contacted for feedback. One relative said, "I have been called a couple of times (by the service); I think the whole family feel supported and would have struggled without the service being so responsive."

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 registered manager ensured people had their communication needs assessed as part of their initial assessment.
- The provider enabled people to access information in different languages, easy read versions and in large print if needed.
- The provider ensured people had access to staff who could meet people's individual communication needs, including interpreters and those trained in other forms of communication used by other people, such as deaf people or people who are hard of hearing.

Improving care quality in response to complaints or concerns

- The provider had processes in place to allow people to raise concerns and complaints easily.
- The registered manager ensured complaints were tracked and analysed to ensure lessons were learned, and improvements were made to people's quality of support. For example, changes were made to monitoring processes to reduce the risk of admission to hospital.
- People and their relatives told us they knew how to make a complaint and felt confident any issues raised would be dealt with appropriately by managers. As part of the inspection process, we observed managers to

be responsive and effective in dealing with people's concerns and changes in need.

#### End of life care and support

- Processes were in place to support people with end-of-life decisions.
- Staff knew how to support people and how to access the appropriate health professionals to ensure end of life needs were met.
- At the time of our inspection there were no people receiving support who were at the end of their life.

# 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. At this inspection the rating for this key question has remained 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; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- The registered manager, resource planners, service managers, and coordinators led by example, and demonstrated an open and transparent approach.
- The registered manager and service managers worked closely with people to ensure staff understood their support needs and could deliver quality outcomes.
- The provider recruited staff who were passionate about promoting a person centred, inclusive service to reflect people's rights and in maintaining equality standards.
- People told us managers and staff were approachable and supportive. One person said, "I'm really happy with the support I get; I would recommend them. They are brilliant."

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; Continuous learning and improving care

- The registered manager had a clear vision for the direction of the service which demonstrated ambition and a desire for people to achieve the best outcomes possible.
- The registered manager fully understood their responsibilities around duty of candour. This was underpinned by an open and honest culture, and by appropriate policies and procedures.
- The provider had robust processes in place for receiving feedback and suggestions on how to improve the quality of support.
- The provider had a series of audits and surveys in place to monitor, support, and highlight areas for improvement. Any improvements were actioned promptly to improve outcomes for people receiving support.
- People felt the communication with the service was good. One person told us, "I speak to the staff regularly about my support and I helped create my independence plan. I have no complaints; the support is very good, and I'm never rushed."

Managers and staff being clear about their roles, and understanding quality performance, risks, and regulatory requirements; Working in partnership with others

- The registered manager had the skills, knowledge, and experience to perform their role. They demonstrated a clear understanding of people's needs and had good oversight of the services they managed.
- Governance processes and auditing systems were effective and helped to keep people safe, protect

people's rights, and provide good quality care and support.

- Staff were clear about their roles and responsibilities and felt supported by the management team.
- The provider had systems in place to ensure communication with other agencies was effective and led to positive outcomes for people. The registered manager explained examples of joint working which mitigated people's reablement risks and effectively promoted their independence.
- Relatives told us the management team were approachable and effective. One relative said, "The service always answers promptly; there's an out-of-hours contact if you need support, and they always answer straight away and deal with any concerns."