

Home Group Limited

Newcastle Learning Disabilities Service.

Inspection report

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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

Newcastle Learning Disabilities Service provides personal care for adults with learning disabilities, or who have needs relating to their mental health, either in their own home or within supported tenancies. Supported tenancies enable people with physical or learning disabilities, or who have other care and support needs, to live in their own home. The service operates from an office in Newcastle upon Tyne. At the time of the inspection there were 23 people in receipt of a service.

Newcastle Learning Disabilities Service is not regulated to provide accommodation which meant we did not inspect people's premises.

This inspection took place on 18 August 2020, with further phone calls with relatives and external professionals on 19 and 20 August 2020.

The service had two registered managers in place. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

The registered managers had suitable experience relevant to the needs of people who used the service.

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

At the last inspection we found improvements were required with regard to documentation and strategies regarding people's medicinal needs and risk assessments. These were specific to an area of the service which is now registered under a separate location with CQC. We will inspect this service separately. Newcastle Learning Disabilities Service demonstrated a strong focus on adhering to best practice regarding medicines and using positive, non-medicinal strategies to support people. The provider was therefore no longer in breach of regulations.

At the last inspection there were also concerns about the lack of governance in place. This was again specific to an area of the service which is now registered under a separate location with CQC. We will inspect this service separately. Newcastle Learning Disabilities Service was well-led, with clear accountability and governance systems in place. The provider was therefore no longer in breach of regulations.

People were respected, their individualities celebrated and goals achieved through a collaborative and inclusive approach to care and support. The service had worked flexibly and innovatively to ensure people's wellbeing through access to regular activities and pursuits. This was during a time of social restrictions due to the coronavirus pandemic.

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

Rating at last inspection and update

The service was rated requires improvement at the last inspection (published 30 April 2019). Following the inspection, the provider submitted an action plan to show what they would do and by when they would improve. At this inspection we found the provider was no longer in breach of regulations.

Why we inspected

We completed this focused inspection to make sure they had followed their action plan and to confirm they now met legal requirements. This report covers our findings in relation to those two key domains: safe and well-led.

The ratings from the previous comprehensive inspection for those key domains not looked at during this inspection were used in calculating the overall rating for this inspection. The overall rating for the service therefore has improved to good based on the findings at this inspection.

You can read the report from our last comprehensive inspection by selecting the 'all reports' link for Newcastle Learning Disabilities Service on our website at www.cqc.org.uk

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our inspection programme. If we receive any concerning information we may inspect sooner.

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 well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

Newcastle Learning Disabilities 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 Care Act 2014.

Inspection team

One inspector carried out this inspection.

Service and service type

Newcastle Learning Disabilities Service provides personal care for adults with learning disabilities, or who have needs relating to their mental health, either in their own home or within supported tenancies. The service had two managers registered with the Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided. One registered manager assisted us with the inspection; the other was on annual leave.

Notice of inspection

This inspection was announced. We gave a short notice period that the inspection would be taking place. This ensured we were able to work alongside the registered manager to identify any potential risks associated with the coronavirus pandemic and put measures in place to manage them.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. This included information about incidents the provider must notify us about. We sought feedback from the local authority professionals who work with the service. The provider was not asked to submit a provider information return prior to our inspection. This is information providers are required to send us with key information about

their service, what they do well, and improvements they plan to make or have made since the last inspection. We accounted for this when we inspected the service and made the judgements identified in this report. We used all of this information to plan our inspection.

During the inspection

We spoke with a registered manager and a service manager on the inspection.

We reviewed a range of records. This included three people's care records, activities planning, medicines management and outcomes. We reviewed a variety of records related to the management and quality assurance of the service, including policies, audits, quality assurance support by the provider.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We spoke with two people who used the service and their support staff by telephone, and three relatives. We contacted three health and social care professionals for their feedback via email.

Is the service safe?

Our findings

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

At the last inspection this key question was rated as requires improvement. At this inspection this key question has now improved to good. This meant people were safe and protected from avoidable harm.

Using medicines safely

At our last inspection, the provider had failed to ensure records, particularly in relation to medicines, were accurate. This was a breach of Regulation 17 (Good Governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of Regulation 17.

- The management of medicines was safe. Staff followed clear policies and procedures correctly to ensure the safe ordering, storage, administration, recording and disposal of medicines.
- There were clear non-medicinal strategies in place to help people minimise anxiety and encourage positive behaviour. One external professional said, "Whilst managing medication appropriately as prescribed, they are also very supportive of non-pharmacological interventions, in line with national guidance."
- The issues identified at the last inspection were in relation to a location now registered separately. Record keeping and working practices at Newcastle Learning Disabilities Service were to a high standard.

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

- Risk assessments were in place to cover a range of scenarios. They supported positive risk taking and ensured staff and people knew how best to keep themselves safe. The provider had employed a national advisor on Positive Behaviour Support (PBS). They had contributed to reviews of people's care and support. PBS is a person centred framework for providing long-term support to people with a learning disability, and/or autism, including those with mental health conditions, who have, or may be at risk of developing, behaviours that challenge.
- The registered manager investigated any safeguarding incidents and ensured the best outcomes were achieved for people involved.
- Learning from incidents was part of the culture and embedded into day to day practice.

Systems and processes to safeguard people from the risk of abuse

- People were protected from the risk of abuse. They told us staff made them feel safe and cared for.
- Staff understood safeguarding and whistleblowing processes. They were confident in how to raise concerns, and that any concerns would be listened to and dealt with openly.
- Relatives expressed confidence in the ability of staff to keep people safe and praised them for their efforts

during the coronavirus pandemic.

Staffing and recruitment

- There were sufficient staff to safely meet people's needs. Staffing had regard to continuity, staff skill mix and people's preferences.
- The provider had sound contingency plans and recruitment processes in place.

Preventing and controlling infection

- The provider ensured staff were equipped with personal protective equipment.
- Staff were trained in infection control and prevention and had increased their knowledge in relation to the coronavirus pandemic. People were aware of the need for social distancing and additional hand washing and were well supported by staff.

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 the last inspection this key question was rated as requires improvement. At this inspection this key question has now improved to good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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 issues identified at the last inspection were in relation to a location now registered separately. Newcastle Learning Disabilities Service was well-led, with two registered managers and an experienced staff team.
- The registered manager acted openly and transparently with people and their families. One relative told us, "It's been a tough time with the pandemic but they have involved us all the time. I have the upmost confidence in the team."
- Audits were up to date and any identified issues were documented and actioned. Additional checks were in place to support people and staff during the coronavirus pandemic.

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

- The ethos of the service was focussed on supporting people's independence and empowering them to be their best. People and staff worked together and celebrated in their achievements.
- Staff felt empowered and trusted by the management team, who were proud of the team's recent achievements.

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

- Staff understood people's individualities. They respected and valued them.
- People were encouraged to play as full a part as possible in planning their own care and support and also in the running of the service. One person had attended board meetings and was keen to reprise their role as a customer assessor, supporting the management team's oversight of the service.
- Surveys of people, relatives and staff took place regularly, as did ongoing meetings where possible.
- Staff felt involved in the running of the service.

Continuous learning and improving care; working in partnership with others

- The registered managers and staff ensured people were a part of their community as much as was practicable during the coronavirus pandemic. They worked flexibly and creatively with people to ensure

they maintained a full and active life.

- Governance and accountability structures were clear, with staff at all levels receiving regular support and information. Additional webinars and information sharing work had ensured staff were well equipped to deal with the recent coronavirus pandemic.
- The culture was open and supportive. Staff training and supervisions were up to date; staff had confidence in their management team and vice versa.
- The registered managers and staff worked closely with other health and social care professionals. All provided positive feedback about how the service was run and how people were helped to achieve positive outcomes.