

Include 'In' Autism community interest company

Include 'In' Autism

Inspection report

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11 October 2022

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06 December 2022

Ratings

Overall rating for this service

Requires Improvement ●

Is the service safe?

Requires Improvement ●

Is the service well-led?

Requires Improvement ●

Summary of findings

Overall summary

About the service

Include in Autism is a domiciliary care agency providing personal care to people living in the community with a diagnosis of autism. At the time of the inspection the service was supporting 2 people.

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.

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

Right Support: The service did not always follow safe recruitment processes. People were not always supported by a familiar staff team. The service is recruiting to ensure people have a larger staff team which will reduce the use of agency staff. Staff supported people to take part in activities and pursue their interests in their local area. The management team supported people and their families in meetings with external healthcare professionals.

Right Care: Staff and people cooperated to assess risks people might face. Where appropriate, staff encouraged and enabled people to take positive risks. Staff had training on how to recognise and report abuse. Some staff knew and understood people well.

Right Culture: Quality assurance systems were not always effective. The provider had not identified the failings in recruitment via their quality assurance systems. Staff told us they felt supported by the management team. The registered manager was passionate about providing good care and especially enabling children to have a voice.

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 last rating for this service was requires improvement (published 8 December 2021).

Why we inspected

This inspection was prompted by a review of the information we held about this service. We undertook a focused inspection to review the key questions of safe and well-led only.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

The overall rating for the service has remained requires improvement. This is based on the findings at this

inspection.

Enforcement and Recommendations

We are mindful of the impact of the COVID-19 pandemic on our regulatory function. This meant we took account of the exceptional circumstances arising as a result of the COVID-19 pandemic when considering what enforcement action was necessary and proportionate to keep people safe as a result of this inspection. We will continue to monitor the service and will take further action if needed.

We have identified a breach in relation to the failure to follow safe recruitment procedures.

Please see the action we have told the provider to take at the end of this report.

Follow up

We will request an action plan from the provider to understand what they will do to improve the standards of quality and safety. We will work alongside the provider and local authority to monitor progress. 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 not always safe.

Details are in our safe findings below.

Requires Improvement ●

Is the service well-led?

The service was not always well-led.

Details are in our well-led findings below.

Requires Improvement ●

Include 'In' Autism

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

2 inspectors carried out this inspection.

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 service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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.

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

Notice of inspection

We gave a short period 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 11 October and ended on 25 October 2022. We visited the service on 11 October 2022.

What we did before inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. We used the information the provider

sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with 2 relatives of people who used the service. We spoke with 3 members of staff including the registered manager and two service managers. We emailed 5 staff members seeking their experience of working at the service and 2 replied.

We looked at the care records of 2 people, and other records related to the management of the home. We spoke with 1 social care professional and received written feedback from 2 social care professionals.

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 requires improvement. At this inspection the rating has remained requires improvement. This meant some aspects of the service were not always safe and there was limited assurance about safety. There was an increased risk that people could be harmed.

Staffing and recruitment

- The provider did not always use safe recruitment procedures. Disclosure and Barring Service (DBS) certificates linked to the DBS Updating Service were not reviewed by the service prior to applicants starting work. This meant the service had not completed checks to ensure applicants were suitable and were not prohibited from working with vulnerable people and children.

We found no evidence that people had been harmed. However, systems were either not in place or were not robust enough to demonstrate staff were recruited safely. This placed people at risk of harm. This was a breach of Regulation 19 (Fit and proper persons employed) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Following the inspection, the registered manager confirmed they had viewed staff members' DBS certificates.

- Applicants who were not part of the DBS Updating Service completed a new DBS check.
- People were not always supported by a regular staff team. One relative told us, "At times we don't know who is turning up, sometimes agency staff who we don't know and this can impact on [person]." The service was currently recruiting to ensure people had a larger staff team and so reduce the use of agency staff.

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

- Individual risks had been identified and managed. Risk assessments combined with care plans outlined how staff were to support people to remain safe.
- Accidents and incidents were reviewed and analysed on an individual basis.
- Systems were in place to learn when things went wrong. The registered manager reflected on all aspects of the service.

Systems and processes to safeguard people from the risk of abuse

- The service had effective systems to record and investigate safeguarding issues. Staff had completed safeguarding training.
- The registered manager liaised with the local authority and undertook appropriate investigations when allegations occurred.

Using medicines safely

- The service was not currently supporting people with medication.

Preventing and controlling infection

- Staff had completed infection prevention and control training. Signage was displayed to support staff and people.

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 requires improvement. The rating for this key question has remained requires improvement. This meant the management team did not ensure their quality monitoring systems remained effective.

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

- Systems to monitor and assess the quality of the service were not always effective. Quality assurance systems had not identified the failure within the recruitment process.

The registered manager took immediate action and amended their quality assurance systems to ensure DBS certificates were reviewed correctly.

We recommend the provider keeps their quality monitoring system under review to ensure it effectively monitors the quality and safety of the service.

- The provider understood the legal requirement to notify the CQC of certain accidents, incidents and events.

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

- The registered manager was passionate about ensuring people had good care. They were especially enthusiastic about supporting children with Autism, ensuring they had a voice. They had recently won two national awards for their work within the autistic and learning disability community.
- Staff told us they felt supported by the management team.

Working in partnership with others

- The service worked in partnership with external healthcare professionals. A social worker said, "They have demonstrated a good knowledge around [person]'s needs and commitment to developing a staff team that share this knowledge." One relative told us how the service worked in partnership with the Intensive Positive Behaviour Support Team with positive outcomes for their family member.

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 understood their responsibilities to be open with people and relatives when things went wrong.
- The provider conducted regular competency spot checks, ensuring staff remained at the required standard.

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

- The service embraced the Accessible Information Standard. A range of accessible information standard formats were available to support people to share their views.

This section is primarily information for the provider

Action we have told the provider to take

The table below shows where regulations were not being met and we have asked the provider to send us a report that says what action they are going to take. We will check that this action is taken by the provider.

Regulated activity	Regulation
Personal care	Regulation 19 HSCA RA Regulations 2014 Fit and proper persons employed The provider did not have robust processes to ensure staff were suitable and not prohibited from working with children and vulnerable adults. Regulation 19(1)(a).