

City of York Council

Community Short Breaks

Inspection report

22 Ascot Way
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29 July 2022

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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

About the service

Community Short Breaks is a domiciliary care service providing care and support to children and young people with a physical disability, sensory impairment, learning disability or autistic spectrum disorder.

The service specialises in providing 'short breaks'. This includes looking after children and young people within their own home or taking them out into the community to provide a break for their families or carers from their caring responsibilities.

Not everyone who used the service received personal care. The Care Quality Commission (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 our inspection, there were 10 children and young people receiving support with personal care.

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

We expect health and social care providers to guarantee autistic people and people with a learning disability the choices, dignity, independence and good access to local communities that most people take for granted. Right support, right care, right culture is the statutory guidance which supports CQC to make assessments and judgements about services providing support to people with a learning disability and/or autistic people. We considered this guidance as there were people using the service who have a learning disability and/or who are autistic.

Right Support: People received individualised support from care workers who understood their needs and were committed to promoting choice and independence. 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 assessed and regularly reviewed. Detailed care plans and risk assessments provided guidance for care workers on how to safely and effectively meet people's needs.

Right Care: People received person-centred care, which promoted their wellbeing and maintained their dignity. Care workers were kind and caring and had developed important and meaningful relationships with the people they supported.

Right Culture: The service was well-led. There was a person-centred culture and systems and processes were in place to help make sure people received safe and effective care. For example, staff were safely recruited and received appropriate training and support to help make sure they could meet people's needs. Staff worked closely with people's families and healthcare professionals to meet people's health needs.

Audits and checks were used to monitor the service and identify where improvements could be made.

Management were responsive to feedback about ways they could continue to develop and improve the service. For example, we recommended the provider develop contingencies should people's named care worker(s) be unavailable.

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 27 November 2020 and this is 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.

Community Short Breaks

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 completed by one inspector, a Specialist Adviser and an Expert by Experience. A Specialist Adviser provides specialist advice to ensure CQC's judgements are informed by up-to-date and credible professional knowledge and 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 service is required to have a registered manager. A registered manager is a person who has registered with the CQC 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

This inspection was announced. We gave a short notice period of the inspection because it is a small service and we needed to be sure the provider or registered manager would be in the office to support the inspection.

Inspection activity started on 21 July 2022 and ended on 29 July 2022. We visited the location's office on 21 July 2022.

What we did before the inspection

We reviewed information we received about the service since it was registered. We sought feedback from professionals who work with the service. We used all this information to plan our 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.

During the inspection

We spoke with the relatives of nine children who used the service and received feedback from two professionals.

We spoke with six members of staff including the registered manager, the deputy manager, a senior care worker, care workers, and the provider's nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

We reviewed four children's care records and two files in relation to the recruitment, training and supervision of care workers. A variety of other records relating to the management of the service, including policies and procedures were also 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 of this newly registered service. This key question has been rated good. This meant people were safe and protected from avoidable harm.

Staffing and recruitment

- People were matched with a named care worker who provided all of their support. This meant people received individualised care from someone who understood how to safely support them.
- Support was flexible with each person allocated hours to use across the year. People's relatives agreed with their care worker how and when to use the hours.
- Whilst this arrangement had clear benefits, some sessions had been cancelled if a person's care worker was not available; for example, due to annual leave or sickness absences.
- The activities and level of support provided to some people was limited as there was not always a second care worker available when needed.
- The registered manager told us recruitment was ongoing to find and match people with suitable care workers.

We recommend the provider develop contingencies around staffing levels to reduce the impact of planned and unplanned absences on people and their families.

- People were supported by safely recruited care workers. Appropriate checks had been completed to help make sure suitable care workers were employed.

Systems and processes to safeguard people from the risk of abuse

- People were protected from the risk of abuse and neglect.
- The provider had a policy and procedure in place and care workers completed training on safeguarding children to support them identify and respond to any safeguarding concerns.
- There had been no safeguarding concerns since the service was registered.

Assessing risk, safety monitoring and management

- People's relatives felt their children were safe with the support their care worker provided. They told us, "I trust the workers to keep [Name] safe. They have the right equipment and they know their needs well."
- Detailed plans were in place to support and guide care workers on how to safely meet people's needs. For example, in relation to the management of epilepsy or the support provided with moving and positioning.
- Care workers worked closely with the children they supported and their families. These relationships helped staff develop a good understanding of people's needs, risks and how to safely support them.

Learning lessons when things go wrong

- People received appropriate care and support if they were involved in an accident or incident.

- Care workers recorded and reported concerns, and these were monitored by management to help make sure appropriate action had been taken and to help prevent a reoccurrence.
- We spoke with the registered manager about developing their approach to monitoring the emergence of behaviour that challenges, to help understand the function of this behaviour and in developing strategies to prevent further escalation.

Using medicines safely

- People did not need regular support to take prescribed medicines at the time of our inspection.
- Nonetheless care workers had completed training where necessary and detailed plans were in place to make sure they understood how and when to administer medicines prescribed to be taken only when needed.

Preventing and controlling infection

- People were supported in a way which minimised the risks of them catching infections.
- Care workers completed infection prevention and control training and were provided with appropriate personal protective equipment.
- Staff participated in regular COVID-19 testing to minimise the risks to the people they supported.

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 before they started using the service. Relatives and healthcare professionals were involved in this process to help ensure staff had a comprehensive understanding of the child's needs.
- Detailed care plans and risk assessments set out the support people needed and provided guidance for care workers on how best to meet those needs.
- Regular reviews helped make sure the care and support remained effective. A person's relative explained, "The last care plan was reviewed and came back to me for signing. This happens on a regular basis."

Staff support: induction, training, skills and experience

- People gave positive feedback about the effective support their care worker provided. Comments included, "They take excellent care of [Name]" and "They have the right skills and experience. They've come for a number of years. They have experiences with [Name's] behaviour and their medical needs."
- Care workers completed a range of training appropriate to the needs of the people they supported. This equipped them with the knowledge and skills to provide effective care.
- Staff gave positive feedback about the training, supervision and support they received. One member of staff explained, "We get a lot of support and training and any problems, they [management] are always there on the end of the phone."

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

- People received effective support where necessary to help make sure they ate and drank enough during the short break sessions.
- Care plans and risk assessments contained person-centred information about the level of support people needed with eating and drinking as well as guidance for care workers on their likes and dislikes.

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

- Care workers and management worked closely with healthcare professionals including school nurses, occupational therapists and other healthcare professionals to ensure people received effective and joined-up care. A healthcare professional told us, "The communication is excellent with the management or through the keyworkers."
- Each person had detailed management plans relating to their health needs, setting out how their care worker could effectively and safely support them to promote their health and wellbeing.

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 MCA did not apply to the support provided at the time of our inspection, as no one using the service was over the age of 16 years.
- People's wishes and views were considered in planning the care and support provided. Clear information was recorded about who had parental responsibility for each child and consent was sought from those with the legal authority to make decisions on the child's behalf.
- The provider was in the process of implementing a new MCA policy and procedure and some care workers had completed training on the MCA in case people over the age of 16 years used the service in the future.

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

- People received kind and caring support from their named care worker. Feedback included, "They are very caring. The care worker talks to [Name] a lot. They are very loving."
- A process was in place to match care workers to each child based on similar hobbies and interests. This helped people to bond with their care worker.
- People shared meaningful and caring relationships with their care workers. Relatives told us, "[Name] gets excited when the carers arrive, and they are singing when they come home after they've taken them out", "They see the carers as their friends" and, "As soon as the carer arrives, they are straight down to their level. Nobody else can make them smile like that."

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

- Care workers understood people's needs and how they communicated. This helped ensure people were supported to express their views and be actively involved in making decisions about their care and support.
- People's relatives gave positive feedback about the support care workers provided to help their child be involved in decisions. They explained, "Through giggles and cuddles [Name] can express how they're feeling. Our care worker listens to what my child enjoys" and "The carer asks [Name] what they want to do, and they'll nod their head. It's a unique arrangement."

Respecting and promoting people's privacy, dignity and independence

- Care workers provided dignified and respectful support to meet people's personal care needs. A professional explained, "They [care workers] treat people with the utmost respect."
- Care workers spoke with people's relatives to help ensure they provided a consistent approach in supporting people to achieve their goals.
- Having a named care worker helped children to feel comfortable and confident spending time away from their family. This helped promote their independence.

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 received person-centred support to meet their individual needs.
- Care workers knew people well and understood their individual needs and preferences. One person's relative explained, "At Short Breaks the staff have an amazing understanding of [Name's] needs."
- People were matched to a named care worker. This consistency helped care workers to develop close working relationships with the people they supported and to develop an in-depth knowledge of how best to meet their needs. One relative said, "They take the time to get to know them."
- We spoke with the registered manager about recording more information about how short break sessions were planned and organised to help if a new care worker needed to take over the support provided.

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 care plans contained information about their communication needs to support and guide care workers on how best to share information in an accessible way.
- Information was available in accessible formats to meet people's communication needs. For example, 'easy-read' information was available to help people understand the support provided and decide what activities they would like to do.

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

- People received person-centred support to access their local communities, pursue activities and visit places they enjoyed. A relative explained, "They'll take them to meet up with a friend. They'll always do things [Name] enjoys. It's all about what [Name] wants to do. It's all tailored and geared around them."
- Care workers explained how they planned activities the children they supported would enjoy. They recorded information about the activities they did and places they visited during each short-break session.

Improving care quality in response to complaints or concerns

- The registered manager told us there had not been any formal complaints about the service at the time of our inspection.
- The provider had a policy and procedure in place setting out how they would manage and respond to any

complaints about the service.

- People's relatives felt able to speak with care workers or management if they were unhappy about the service or did need to complain. One person explained, "[The deputy manager] and [registered manager] are open to contact and give reassurances, which is what I need."

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 service was well-led. Professionals told us, "As leaders [the registered manager and deputy manager] are very approachable and supportive" and "They provide such an essential service and they will go out of their way to make sure something happens."
- Relative's gave positive feedback about the impact and benefits of using the service. Comments included, "It gives everyone a break. You feel rejuvenated and rested" and "The service provides a fundamental difference both mentally and physically to [Name] and to family life. They are a complete godsend to our family."
- Care workers and management were caring in their approach and committed to providing a service to benefit both the people they supported and their families.
- Staff felt supported and told us the service was well-led. A member of staff explained, "The service is well-led, you know that they are there for you if needed. They keep in touch and are really supportive."
- Management were responsive to feedback during the inspection about ways they could continue to develop and improve the service.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care; 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

- Regular audits and checks were used to help monitor the quality and safety of the service.
- Management collated information about the service and how it was run. They used this to monitor and identify where action was needed. For example, to address any gaps in paperwork needed to be reviewed and updated.
- The registered manager understood their responsibility to be open and honest with people and apologise if something went wrong.

Working in partnership with others; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- Care workers worked closely with children, their families and other professionals to provide coordinated and joined up care. A relative said, "The short breaks worker will ask us how best to support [Name]." A professional explained, "All members of staff communicate well with the child's social worker and discuss any matters promptly. There's close links and if there are any problems it is followed-up."

- People gave generally positive feedback about the communication between care workers and the families of the people they supported. A relative told us, "There is very good communication with the Short Breaks staff."