

North Lincolnshire Council

North Lincolnshire Council- Home First Community Support

Inspection report

Billet Lane
Scunthorpe
DN15 9YH

Tel: 01724298190

Website: www.northlincs.gov.uk/people-health-care/home-first/community

Date of inspection visit:
14 April 2022

Date of publication:
27 July 2022

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

North Lincolnshire Home First Community Support HSCA is a domiciliary care provider which provides time limited and short term reablement to people in their own home. The service supports people following an unexpected accident or illness or an exacerbated episode of an existing health condition which focusses on supporting people to regain or retain independence. At the time of the inspection, the provider supported 102 people in their own homes.

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.

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

People told us they received high quality, person centred care from trained and supportive staff. People using the service had full control over what support they received, and how this was delivered to them.

Staff were highly motivated and told us they felt incredibly proud of the work they do supporting people to remain in their own homes and to live independently. Staff were creative at developing support plans to help people achieve their goals.

Staff were very complimentary of the registered manager and described a culture that was inclusive and supportive.

The registered manager and provider had robust systems and processes in place to continually review and monitor people's progress through their care journey. All elements of a person's care and support was reflected within care plans and risk assessments.

Relatives of people using the service and professionals told us that the service was exceptional. They told us that the responsive and caring nature of staff and the service was excellent.

Reviews were carried out at regular intervals by supervisors to monitor people's plans of care and ensure they were happy with the service provided.

People were actively encouraged to give their views and raise concerns or complaints.

We found the provider's integrated model of care facilitated hospital discharges, helped avoid unnecessary hospital admissions and reduced the number of people requiring long term care by supporting people to regain their independence. There was a joined up approach to providing holistic care that met the needs of people. This was enabled by an integrated system of leadership to help ensure people experienced the best possible outcomes which was confirmed by people, relatives and health and social care professionals.

There was a strong emphasis on continually striving to improve the service people received. Regular checks were carried out to monitor the quality and safety of the service and ensure that people were receiving positive outcomes.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service supported this practice.

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 23 October 2020 and this is the first inspection.

Why we inspected

This was a planned comprehensive inspection based upon the date the service registered with CQC.

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.

North Lincolnshire Council- Home First Community Support

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 one inspector.

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 the service 48 hours' notice of the inspection. This was because we needed to be sure that the provider or registered manager would be in the office to support the inspection.

What we did before the 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 to 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 any improvements they plan to make. We used all of this information to plan our inspection.

During the inspection

We spoke with 6 people who used the service and one relative to gather feedback about their experience of the care provided. We spoke with the service manager, registered manager, 2 senior care staff, 4 care and support workers, and 2 health and social care professionals who work closely with the provider. We reviewed a range of records relating to the management of the service and people's care records.

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.

Systems and processes to safeguard people from the risk of abuse; Learning lessons when things go wrong

- People told us they felt safe and well supported.
- People were protected from the risk of harm or abuse. The provider had robust systems and process for reporting, recording and escalating concerns.
- Staff received safeguarding training and knew how to identify, report and record concerns.
- Staff reported concerns including accidents and incidents quickly and understood other channels available to them such as the local authority safeguarding team for advice if required.
- The registered manager held regular communication with staff teams to cascade any learning from accidents, incidents and other events.

Assessing risk, safety monitoring and management

- People had individual risk assessments relating to their care and support needs. This supported staff to meet people's needs safely and reduce risks.
- Staff were aware of risks to people and provided support in a pro-active way to reduce them. Assessments were completed of the environment to identify potential risks to people who were being supported to regain their mobility and action was taken to reduce these identified risks.
- Staff understood positive risk taking and were able to demonstrate how this was a necessary part of a person's recovery and reablement journey.

Using medicines safely

- Medicines were managed safely. Staff received training to support people with administering medicines.
- People were supported to regain skills in administering their own medicines under the supervision of trained staff.
- Assessments had been completed to determine the level of support people required. This was clearly detailed in people's care plans.
- Staff completed medication administration records accurately. Protocols were in place to guide staff when to give medicines that were prescribed for use 'as and when required'.

Staffing and recruitment

- There were enough trained staff to safely meet people's needs.
- The provider and registered manager followed a robust recruitment process to ensure they only recruited suitable people.
- People received care and support from a consistent and reliable team of care staff.

Preventing and controlling infection

- We were assured the service was taking appropriate action to prevent people and staff from catching and spreading infections.
- Staff were trained in and followed national guidance in place at the time of the inspection around the safe and appropriate use of personal protective equipment (PPE).
- People and staff had individual risk assessments to reduce the risks of COVID19 for those that were considered most vulnerable.

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 received care and support in line with standards, guidance and the law. Assessments were used to detail people's individual needs within their care plan and included details of the type of support they required to meet their reablement goals. Staff continually reviewed people's needs and tailored support accordingly.
- Care plans were very detailed and clearly identified people's needs and the choices they had made about the care and support they received.
- Best practice guidance was used to support staff to provide the correct care in line with people's routines.

Staff support: induction, training, skills and experience

- Staff received a full induction before providing care and support to people. Staff were able to benefit from ongoing support and training.
- Staff were encouraged and supported to further their own learning and development. One person told us "They're helping me do my level 3 in health and social care so I can progress".
- Regular supervisions and competency assessments were used to monitor staff's performance and focus on their wellbeing.
- Staff felt supported and empowered by the registered manager and management team. One staff member told us, "I love my job, everyone is so approachable, and my team leader is always at the end of the phone and always gives me the support I need." Other comments included "My team leader makes a real effort to make us feel valued."

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

- Staff ensured people were supported to have good levels of hydration and nutrition, this was recorded within their care plan.
- Care plans contained information of people's food preferences and specific instructions around their diet and cultural requirements.
- Staff encouraged people to take an active role in meal planning and preparation as part of their reablement and recovery journey. For example, one person was supported with their mobility, which enabled them to get into the kitchen to prepare their own meals.

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

- The service offered flexibility around the time and type of support and made each visit count.

- Staff worked closely with health and social care professionals to make sure the care and support they provided was effective and supported people to re- establish daily living skills.
- People were supported to access health care professionals as and when needed. Referrals were made to a range of professionals, to support people's rehabilitation needs. A health professional told us, "The service is excellent. All staff have a good understanding of re-enablement."
- People, relatives and health professionals highly commended the responsiveness of the service and staff. Staff were trained in the use of specialist equipment to aid people who had fallen in their own home, this prevented hospital admission and reduced pressure on emergency services.

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.

- Staff followed the principles of the MCA, and records were in place to evidence this.
- Staff sought people's consent before delivering support, they respected people's decisions and assessed people's capacity to consent to their care.

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

- The service promoted a strong culture of person-centred care and people received high quality care from staff who knew them well. Staff demonstrated a real empathy for people they worked with and often went above and beyond people's expectations including providing practical and emotional support.
- There was a strong focus on making each interaction positive, the consistency and reliability of the service meant staff were able to build positive, trusting relationships with people. Staff were particularly considerate to people's holistic needs.
- People and their relatives spoke highly of staff. Comments included "I got the feeling and sense that the staff didn't just see their role as a job. They genuinely cared about the outcome I wanted and fulfilled their roles in my rehabilitation to the best of their ability."

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

- Staff were skilled at helping people to express their views and respecting their wishes, preferences and choices.
- We received consistently positive feedback that showed care staff were highly responsive to people's requests, and made sure people got the support they wanted. One person told us, "I felt staff was extremely caring and thoughtful I feel I gained a friend in a few this has helped me immensely, an outstanding service and staff."
- People were fully involved in decisions about their care, such as in their regular care review meetings and day to day decisions about the support they wanted. The provider responded promptly to feedback, suggestions and requests from people and staff.
- Staff knew people well and supported them to make choices around their preferred routines, likes, dislikes and what mattered to them.

Respecting and promoting people's privacy, dignity and independence

- Staff promoted people's recovery, by supporting them to learn or re-learn the skills necessary for independent daily living. Staff understood and recognised when people needed assistance.
- Staff were committed and passionate about treating people as individuals and responded quickly to people's changing needs. This ensured people received the right care and support to enhance their wellbeing.
- People's privacy and dignity was maintained. Staff described the importance of respecting people's privacy and dignity. One person told us "The staff always displayed complete respect for me and my dignity. I was made to feel comfortable in situations that could have been embarrassing."

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; 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 care and support that was personalised to build self-esteem and wellbeing. Individual needs, preferences, future wishes and expectations were evidenced in care plans and risk assessments. One person told us, "I am able to ask for the support I want, they've helped me get back to doing my own meals and housework again."
- People's hobbies and interests were used to promote their reablement. Staff were proactive in identifying and incorporating them into the support provided. One person described how their support had enabled them to visit their relatives home again and go out in their car.
- Staff were committed to working with people and continually looked for creative ways to engage them, overcoming challenges and obstacles. This included being open and honest with people and working closely with other agencies.
- The service invested in and trained staff in operating a Raizer Chair. This is a specific piece of equipment which can safely assist a person to a sitting or standing position following a fall. The registered manager told us this has reduced the amount of time people have been on the floor, improving outcomes and reducing the risk of hospital admission and pressure injuries.

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 provider sought to ensure that accessible information standards were complied with at all times. People's initial assessments considered the format in which information should be provided, this included in other languages, braille or large print.
- Staff had received training to develop good communication skills so that people could express their views and be involved in their care.

Improving care quality in response to complaints or concerns

- The provider had a complaints process in place. People received a written response of acknowledgement and were kept informed whilst complaints or concerns were investigated.
- The registered manager considered complaints a necessary part of driving improvements within the

service. People were encouraged to raise concerns or complaints where standards fell below people's expectations.

End of life care and support

- People were supported to express their wishes and feelings about advanced care planning.
- Staff received very positive feedback from families and other health care professionals about the care and compassion showed to people receiving end of life care. They were committed to promoting dignity and offered comfort and support to families.

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

- The service had a clear vision and credible strategies to deliver high-quality care and support, and promote a positive culture that was person-centred, open, inclusive and empowering which achieved good outcomes for people.
- People were at the heart of the service and received extremely person-centred care. The registered manager was clear about the values of the service which was embedded by committed, loyal and well-trained staff.
- The provider and registered manager worked collectively with all staff to promote person-centred reablement support. The reablement plans used contained bespoke information about people's support needs and timescales which had been agreed with people. These were reviewed continuously and detailed any progress made resulting in support being reduced as people progressed.
- Effective governance was embedded into the running of the service with a strong framework of accountability to monitor performance and risk leading to the delivery of a high-quality service.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Continuous learning and improving care

- Staff were positive about the service. Staff told us they had not worked for an organisation as good. One member of staff told us "It's a different world from my last employer, everyone cares here, it's fantastic to be part of a team who love what they do."
- The provider continually reviewed people's experiences and used the information to drive improvements within the service. People told us that staff asked daily if there was anything, they wanted changing.
- The registered manager valued all staff and frequently wrote to them to highlight their excellent work. Staff continually received praise and recognition for their hard work, care and compassion.
- People, their relatives and health care professionals regularly made contact with the manager to share positive outcomes and experiences.
- There was evidence of lessons learned to improve the service people received following quality assurance surveys.

Working in partnership with others

- The management team had good links with other community-based health services.
- The provider was proactive in working in partnership with others to build seamless experiences for people.

This included working with other agencies when taking on new packages of care and supporting transition with new providers. One social care professional shared an example of how the service supported a person transitioning from a secure unit into their own residency as part of their recovery and reablement.

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 provider and registered manager were aware of their duty of candour responsibility. They had been open and transparent with people when incidents occurred. A family member said, "They always let me know if there's anything wrong."
- Notifiable events had been reported to CQC as required and the provider was aware of their responsibilities around this.