

Enable Care and Support Services Limited

Enable Care and Support Services Limited

Inspection report

Carbury House - Unit 4
Concorde Way
Stockton on Tees
Cleveland
TS18 3RA
Tel: 01642 337578
Website: www.ecass.info

Date of inspection visit: 17 October – 28 November 2014
Date of publication: 14/01/2015

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	

Overall summary

Enable Care and Support Services ethos is based on supporting people to remain as independent as possible in their own homes. It is registered to provide personal care to people living in their own homes. The service provides a domiciliary care service providing personal care and other services such as a sitting service, cleaners and people to do shopping for people living in the

Stockton, Middlesbrough and Redcar areas. Enable Care and Support Services also provides a brokerage service, to help people employ their own staff using personal budgets and direct payments.

We completed the announced inspection from 17 October to 28 November 2014 in order to have the opportunity to speak with a representative group of

Summary of findings

people who used the service and staff. From the 100 people we were provided contact details, the majority received services which we do not regulate such as cleaning and 35 people used personal care services, which form the basis of their registration. We found from the 40% of the people we spoke with, very few received personal care from Enable Care and Support Services and often the support provided was cover for when people's personal assistants were on leave. We spoke with people who received personal care as well as people who used the domestic, shopping and broker services.

We completed an inspection 28 May 2014 because of concerns that had been raised with us by members of the general public and the Local Authority. At that inspection we found that people's needs had not always been assessed, planned and delivered in a safe and consistent way. Staff personnel records contained most, but not all of the information that was required. We also found that the quality of care staff delivered varied and that the service hadn't always met their needs.

We found that Enable Care and Support Services was not meeting the requirements of regulation 9 (Care and Welfare), regulation 10 (monitoring and assessing the service), regulation 11 (Safeguarding), regulation 13 (Medicines) and regulation 22 (Staffing).

Following our last inspection the provider sent us an action plan outlining their plans to improve. We carried out this inspection to check that improvements had been made and found that action had been taken to ensure Enable Care and Support Services complied with the Health and Social Care Act 2008 regulations.

Since the last inspection the provider has opened a satellite office in the Redcar area. Staff living and working in that area can readily attend training and supervision sessions. A senior team leader goes to this office each day to provide a contact point and give staff any updated care records.

People we spoke with who received personal care felt the staff were knowledgeable, skilled and the care package met their needs. We heard how staff would respond promptly if they needed their personal care attending to earlier than scheduled and staff nearly always arrived on time. If there were delays people told us staff would always contact them to say they would be delayed.

The staff had very little to do with the management of medicines but where they undertook tasks such as prompting people to take them this was done safely and in line with expectations.

People told us when they previously raised concerns these were not listened to but since June 2014 this had improved significantly. People told us they now felt confident that should concerns be raised these would be dealt with appropriately. The majority of the people we spoke with said they had never had to make a complaint.

The service has a registered manager, who was also the company director and the service's nominated individual, who is a person that represents the company. 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.

We found the provider had reviewed the performance of the whole service and this had led them to make significant changes to the senior management team since the last inspection. The changes we found had improved the operation and delivery of the personal care services.

The registered manager and staff we spoke with told us they had attended training in the Mental Capacity Act (MCA) 2005. MCA is legislation to protect and empower people who may not be able to make their own decisions, particularly about their health care, welfare or finances.

Since coming into post the senior management team had introduced systems to ensure staff were appropriately recruited, trained and supported. They had also ensured that people who used the service were contacted on at least a two-monthly basis to check if the package of care they received met their needs.

A couple of the people and staff raised concerns about the operation of the service and we found that the management team were already aware of the issues. The management team had thoroughly investigated concerns and put measures in place to tackle them. For instance the senior team leaders had been issued with iPads and portable printers so they could issue care plans on site to relevant staff and this meant staff did not need to come into the office.

Summary of findings

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.

We found that there were effective processes in place to make sure people were protected from bullying, harassment, avoidable harm and abuse. Staff took appropriate action to raise and investigate incidents and complaints.

The provider had procedures and systems in place to ensure there were sufficient numbers of suitable staff were recruited to meet the demands of the service. Where they provided personal care the provider made sure staff had all the necessary skills. Effective recruitment procedures were in place.

The staff had very little to do with the management of medicines but where they undertook tasks such as prompting people to take them this was done safely and in line with expectations.

Good



Is the service effective?

The service was effective.

We found the provider had taken measures to ensure the staff provided effective care and were able to meet people's needs. Staff were trained and supported to deliver the care and support people required.

Staff understood the importance of obtaining people's consent prior to any tasks being undertaken and knew what to do if someone lacked the capacity to make decisions about their care. Staff understood the principles of the Mental Capacity Act 2005 and how to use this in their practices.

People were supported to maintain a healthy balanced diet. Staff were adept at identifying if people appeared unwell and ensuring they sought appropriate medical care.

Good



Is the service caring?

The service was caring.

We heard the staff had developed therapeutic relationships with the people and were extremely caring and kind.

People told us they were encouraged to express their views and were actively involved in designing their care packages. Each care package was specifically designed to meet the exact requirements of the person

Good



Is the service responsive?

The service was responsive.

We found the care packages offered were tailored made to meet people's needs. Many of the packages provided by the service had limited personal care elements and primarily offered social support, cleaning and shopping components.

We found all of the packages were responsive to people's needs and allowed for people to be seen at very short notice should they need immediate assistance with their personal care.

Good



Summary of findings

We also heard how the provider's introduction of social events and walking groups had further improved people's quality of life. This was extremely innovative and unusual for a domiciliary care provider to offer.

The provider had also organised regular events such as coffee mornings, fun walk, charitable events to fund raise for other causes and support groups for the people who used the service and their carers.

We found effective processes were in place for listening and learning from people's experiences, their concerns and complaints.

Is the service well-led?

The service was well-led.

The registered manager had improved the management structure and the new team had strengthened the systems for monitoring and assessing the service.

The provider had learnt lessons from the last inspection and used this to review the provision and make changes.

Good



Enable Care and Support Services Limited

Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection checked whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

We inspected Enable Care and Support Services from 17 October until 28 November 2014. This was an announced inspection and we gave the provider two-days about the inspection. This meant that the staff and provider knew we would be reviewing the services that were provided.

The inspection team consisted of an adult social care inspector.

Before the inspection we reviewed all the information we held about the home and we contacted the local authority

to find out their views of the service. The provider completed a provider information return (PIR) which we received prior to the inspection. This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make.

During the inspection we contacted and spoke with 40% of the people who used the service. We also spoke with the registered manager who is also the owner, 12 care staff, two senior team leaders, the human resources manager and information technology manager.

We spent time talking with people who used a variety of care packages but as CQC do not regulate brokerage services, social support or domestic services we concentrated on gathering the views of people who required personal care. We looked at five of the people's care records, four recruitment records for staff providing personal care, the training chart and training records, as well as records relating to the management of the service.

Is the service safe?

Our findings

Last year the provider purchased another domiciliary service Enable U2, which operated in the Redcar area. Enable Care and Support Services Ltd was a separate and unrelated service but because they were both called Enable were often confused with each other. There were problems with the services EnableU2 provided and 37 safeguarding alerts were made, which were fully investigated. Of these 34 were not upheld. Since then the provider has chosen to close Enable U2. Some of the people who used Enable U2 transferred their care packages to Enable Care and Support Services. When we spoke with people who used the service we were very clear that the discussion was about Enable Care and Support Services.

We spoke with 20% of the people who the provider had given us contact details for and said they used personal care services. The people we spoke with use a wide variety of services and often used the services alongside the use of other care agencies and personal assistants. The people who used the personal care services told us that they felt Enable Care and Support Services staff delivered safe care.

People said, "I cannot fault the care staff as they always come on time and are really good at making sure I'm alright." And "The staff are great and I always get the same ones. I have had staff I didn't particularly get on with before and Diane [the owner] changed them straight away." And "I never have any worries as the staff know what they are doing."

Other people who did not use the personal care element of the service told us they also felt safe. One person said, "The staff come and relieve my personal assistant and keep me company and they are always very kind and pleasant."

During the inspection we spoke with 12 members of the care staff who provided personal care and social support services. All the staff we spoke with were aware of the different types of abuse and what would constitute poor practice. Staff we spoke with told us they had confidence that the registered manager would respond appropriately to any concerns. One of the staff told us about specific incidents they had raised in relation to EnableU2 and how these had been thoroughly investigated. They told us the way the owner who also owned Enable Care and Support

Services Ltd had given them confidence to work for this company. The senior team leaders and registered manager told us that abuse and safeguarding was discussed with staff during supervision and staff meetings.

One staff member we spoke with said, "If I was ever concerned about the welfare of the person I supported, I would raise this immediately." And "I found that one person who I supported, carers and personal assistant did not use appropriate moving and handling techniques so I reported it straight away and this led to them getting more support." There have not been any safeguarding concerns raised in the last 12 months in respect of the services staff practice.

Enable Care and Support Services had a safeguarding policy that had been last reviewed in October 2014. We saw that in October 2014 a full team meeting was held to discuss the recently reviewed safeguarding processes. The registered manager explained that whilst reconfiguring the service the number of supervision sessions had reduced. This was resolved and the sessions were being undertaken with all staff before Christmas and would cover safeguarding. Staff we spoke with confirmed this to be the case.

We reviewed the training plan and found that safeguarding training was provided as a part of the induction and then on an annual basis. Staff confirmed they had received safeguarding training at induction and on an annual basis. We found that the provider complete annual refresher safeguarding refresher training and during 2014 all of the staff had completed the course. We saw safeguarding training was scheduled for these staff.

The service had limited contact with the people who used the service as they visit for specific periods in the day. We found the risks staff could address around the care they provided had been assessed and records of these assessments had been reviewed. These risk assessments had been personalised to each individual and covered areas such as moving and handling. The risk assessments provided staff with the guidance they needed to help people to remain safe.

The five staff files we looked at showed us the provider operated a safe and effective recruitment system. The staff recruitment process included completion of an application form, a formal interview, previous employer reference and a Disclosure and Barring Service check (DBS) which was carried out before staff started work at the home. The DBS

Is the service safe?

helps employers make safer recruitment decisions and prevent unsuitable people from working with vulnerable groups, including children. It replaces the Criminal Records Bureau (CRB). The human resources manager and registered manager showed us the proforma they used during the interview process and provided evidence to demonstrate that all aspects of people's work history was explored.

Through discussions with people and staff members and the review of records, we found there were enough staff with the right experience and training to meet the needs of the people who used the personal care service. One person we spoke with said, "The staff arrive at the planned time and never appear rushed." Another person said, "Enable staff cover my personal assistants leave and I have never had any problems."

Of the 100 clients that used the service to provide personal care and social support we found that ten needed prompting to remember to take their medicines. A couple of these people needed staff to remove the tablets out of their blister packs. Family members obtained the medicines and re-ordered them, as and when necessary.

We found that all the staff, whether they supported people with their medicines or not, had completed recognised safe handling of medication qualifications. From the review of records and discussions with staff, we confirmed staff had undertaken refresher training and competency checks. Plans were in place to ensure competency checks were completed on an annual basis. None of the people we spoke with required support from the service to manage their medicines.

We saw there was a comprehensive policy and procedure in place for the management of medicines. The provider had reviewed and updated this policy in July 2014 and then ensured all the staff were familiar with it. The manager, senior team leaders and staff we spoke with told us in the event of a medical emergency an ambulance would be called and that staff would follow the emergency operator instructions until an ambulance arrived. Staff we spoke with told us they had undertaken training in first aid. We saw records to confirm this training was up to date. This meant that staff had the knowledge and skills to deal with foreseeable emergencies.

Is the service effective?

Our findings

The provider sent contact information for 100 people and confirmed that 35 of these people received personal care. We spoke with 20% of people who used the personal care service, all of whom told us they had confidence in the staff's abilities to provide good care. They told us the staff who came from Enable Care and Support Services the service were able to deliver the care and could readily carry out the tasks they were assigned.

We heard from a large number of the people who received personal care from the service that they used them with additional cover so that when their personal assistants went on leave they had someone to come in and provide them with support. People told us they were very happy with the arrangements and found this additional support worked well.

Other people we spoke with discussed the social support, sitting service and domestic cover the service provided as well as how the staff covered the payroll management for their direct payments. We heard these staff were always pleasant and efficiently completed the tasks.

People said, "The staff are always really helpful and put me at ease." And "I find the staff really understand my needs and do everything so well that I have always felt confident that they'll do the best for me." And "It works out brilliantly, as they come when my assistant isn't available and just get on with it. I always get the same person so that really makes it easier."

From our discussions with staff and review of staff files we found people had obtained suitable qualifications and experience to meet the requirements of their posts. All of the staff we spoke with provided personal care and told us they had received a range of training that was relevant to their role and this training was up to date. We found staff had completed mandatory training such as first aid, safe handling of medicines, moving and handling training as well as role specific training such as working with people who had Parkinson's disease. We saw induction processes were in place to support newly recruited staff. Staff completed this prior to commencing work. This included reviewing the service's policies and procedures and shadowing more experienced staff.

Staff we spoke with during the inspection told us that for a number of months they had not received supervision.

Supervision is a process, usually a meeting, by which an organisation provides guidance and support to staff. All of the staff we spoke with told us they had completed an annual appraisal and our review of records confirmed staff were receiving appraisals. One staff member we spoke with said, "I only have to ring if I have an issue and one of the team will get right back to me. I find all the management staff are helpful."

The manager told us there had been issues earlier in the year with ensuring all the staff undertook supervision on a regular basis. She explained that this had been due to changes in the management team but this was resolved. We saw from staff records, the staff had received at least three supervision sessions this year and a further two were planned. We saw the provider had introduced a computerised programme that identified when people needed training and supervision sessions and then flagged this up to the senior staff.

The manager and staff we spoke with told us they had attended training in the Mental Capacity Act (MCA) 2005. MCA is legislation to protect and empower people who may not be able to make their own decisions, particularly about their health care, welfare or finances. The registered manager and staff we spoke with had an understanding of the principles and their responsibilities in accordance with the MCA. Most of the people they supported had capacity to make decisions but where they did not, action had been taken to ensure relevant parties were involved in making best interest decisions. Staff working at the service were not lead agencies for this work.

Enable Care and Support Services provided a small proportion of care packages that required staff to ensure people were supported to eat. Where this did occur the support tended to be around preparing either a microwave meal or snack the person had chosen. The staff were not responsible for monitoring people's weight or deciding upon what meal would be offered. Some of the staff assisted with shopping but this was to obtain items the person had listed not to design the shopping list. Most of the people we spoke with who received personal care employed personal assistants to deliver the majority of their care. We found that it was the responsibility of the personal assistants to ensure people had a nutritious and healthy meal. In other situations it was the person's relative or carer who ensured they had an adequate diet.

Is the service effective?

We saw records to confirm staff liaised with visiting healthcare professionals such as the district nurses and took instruction from these staff. For some of the care they delivered such as applying creams this was completed following the district nurse leaving clear instructions about how and where to apply them. We found the staff reviewed care records regularly and included any new district nurse instructions in the care records. This meant that people who used the service were supported to obtain the health care that they needed.

People we spoke with told us the staff were considerate and really interested in ensuring they remained well, so encouraged them to have regular health checks. One person told us, "I have found the staff genuinely do care about me and if I'm not looking so grand they will suggest I call the doctor or let my carer know, so people can make sure I'm alright".

Is the service caring?

Our findings

People we spoke with who received personal care said they were happy with the care and support provided. We were told by people about how they had spent time with the registered manager deciding exactly what type of support they needed. We found a wide range of support could be offered, which could mean staff went and stayed overnight so carers could sleep; popped in several times a day to assist with personal care tasks; or covered personal assistants annual leave.

People said, "I find the staff are always very caring and kind. I have never had any concerns." And "They always turn up on time and really are interested in how I am. The staff do genuinely seem to care and do go the extra mile." Another person said, "Well I rang them this morning because I needed a bit of help unexpectedly and they came round straightway to check I was ok. You can't get more caring than that".

We reviewed five sets of care records and saw people had signed to say they agreed with the care packages. The people we spoke with were readily able to discuss what type of support they received and how they had gone through with staff exactly what their needs were and how these were best supported. Two of the people discussed how when their plans were first returned they were not quite happy, so asked for these to be tweaked and found this happened.

One person said "Diane [registered manager] comes to visit and does the care jobs every now and again so she can check how much help I need and if I'm getting the right support."

The registered manager and staff discussed the newsletters they sent to people and the IT administrator showed us examples of the newsletters Enable Care and Support Services had created. We saw that these included invites to coffee mornings, support groups, fun walks and events to raise money for local charities. The registered manager told us their ethos was to support people to be as independent as possible and live ordinary lives and in order to achieve this, did not just look at meeting people's personal care needs but also their social needs. One of the main issues they had identified as a team had been the negative impact social isolation had upon the people they supported. To

address this they had started to provide opportunities for people who used the service and carers to get together. The service had provided space in their main office and satellite in Redcar for these social sessions. We saw the feedback from the people coming to the sessions was extremely positive.

During our visit we saw each person had an assessment, which highlighted their needs. We found that following assessment, the team leaders had developed support plans which covered in detail the services provided for each person's care package. We found these were updated as and when people's needs changed.

The people we spoke with told us staff always treated them with dignity and respect. People found staff were attentive, showed compassion, were patient and had developed good working relationships with them. People told us they had set goals about what they wanted to achieve.

The registered manager and staff we spoke with showed concern for people's wellbeing and discussed how they ensured people got the best support from all of the people who worked with them whether they were employed by the service or not. It was evident from discussion that all staff knew people well, including their personal history preferences, likes and dislikes. This helped to ensure that people received care and support in the way that they wanted. We found that the registered manager took an active interest in how people were supported and knew without referring to any documents the needs of all the people we discussed and could discuss at length these individuals.

The staff we spoke with during the inspection demonstrated they had a good understanding of the meaning of dignity and how this encompassed all of the care for a person. Staff described how they ensured privacy when supporting people with personal hygiene. The people we spoke with confirmed staff always maintained their privacy. Senior team leaders showed us the rotas and told us how they looked at skill mix and made sure people had staff they preferred. We found where appropriate only male staff supported people who used the service who were male and only female staff supported people who used the service who were female. This meant the staff team was committed to delivering a service that respected people wishes.

Is the service responsive?

Our findings

People told us that Enable Care and Support Services staff always turned up as planned and that if, on odd occasions, they had been delayed by ten minutes the staff rang them to say why this had happened. People told us it was very rare for staff not to turn up on time. One person told us they could call the office if they needed urgent personal care and staff would turn up in less than fifteen minutes. They found this knowledge very comforting, as they could be assured there was always someone at hand to help them.

People said “I have never had a problem with staff not turning up and in fact I can quite easily change the times I need assistance and push it back to later or earlier in the day, which is excellent for me.” And, “The manager fits the service around my needs so I can pre-book slots for when my personal assistant is on holiday or if she calls in sick can just ring Enable up and someone will come and replace her.”

Staff told us they encouraged and supported people to remain as independent as possible. Staff told us they were not rushed from one call to the next so they could spend that little extra time speaking with people. Staff did raise that they did not get paid for the travel they completed and this could be from Stockton to Redcar. We discussed this with the registered manager, who we found had already identified it as a reason why they might not retain staff, so was in the process of introducing a way to pay staff for their travel. People we spoke with discussed the social activities packages and respite hours they purchased, which meant carers could take a break and they could pick places of interest to visit.

The senior team leaders outlined the assessment process and we confirmed from the review of care records that this mirrored what had been outlined to us. We found that people’s needs were assessed upon referral to establish if the service were able to meet the person’s needs. Information was provided about person’s care and support needs by, either the person, carer or referring agency. This enabled staff to produce an initial care and support plan as to how they were to support a person during their first few days.

The team leaders told us that following the assessment they wrote the care and support plan which described how people wished to be supported and what goals they

wished to achieve. We found that care plans were reviewed and updated on a regular basis. The registered manager and team leaders discussed how they made sure staff had the most recent plans by taking portable printers with them to meetings so they could give care staff the new plans. We saw that the access to iPads and portable printers meant that the team leaders could provide care staff with up to date plans, which they could use to replace existing ones in files. We found that systems were in place to monitor people’s needs and ensure the care records were accurate.

Risk assessments had also been completed in relation to people’s needs and the care packages they received, for instance one person’s file included risk assessment around moving and handling; falls, pressure area care and support offered by their personal assistant and carer. Risk assessments provided information on specific measures to reduce or prevent the highlighted risk from occurring.

The services staff visited people at defined times during the day or week and we heard that should someone appear unwell when they visited staff take prompt action to deal with this concern. Staff and the manager told us this would not necessarily be involved making an appointment with the GP but be more likely to involve calling for paramedics. We found that staff had received emergency first aid training and training around signs and symptoms of illness.

During the inspection we spoke with staff who were extremely knowledgeable about the care that people received. Staff and people who used the service told us about their experience of the care being delivered and how this was very person centred. We found each person’s care record we reviewed showed the care package was tailored to meet their specific requirements.

Care staff told us they tended to be allocated the same people, which meant they could build very good working relationships. The senior team leaders showed us how they matched staff to the people who used the service. They found this had improved people’s confidence in the service.

The people who used the service we spoke with told us they were given a copy of the complaints procedure when they first started to receive the service. We saw that the newsletters Enable Care and Support Services sent to people regularly described the complaints procedure. We looked at the complaints procedure and saw it informed people how and who to make a complaint to. The procedure gave people timescales for action. We spoke

Is the service responsive?

with people who used the service who told us, if they were unhappy they would not hesitate in speaking with the registered manager. We reviewed the investigations the registered manager had completed and found these were thorough, addressed the issues raised; and provided a detailed response to the complainant. People said, "I'd tell the manager if I was unhappy, Diane [Registered manager] is very approachable but so far I have not had any concerns." Another person said, "I can tell them anything and they if they can sort it out they will."

People told us that in the last few months they had been called to see if they were happy with the care package. The senior team leaders discussed the process they used for checking if people were happy with the service and showed us the system. We saw they programmed in monthly review slots for each person and this flagged up on their calendars to prompt them to call the person. Once they had called the person they recorded their views and then every six months completed a full review with the person to check the package was still appropriate for them.

Is the service well-led?

Our findings

People who used the personal care services spoke very highly of the registered manager and told us she often called them to see if they were alright. We heard how she would come and work alongside staff or as the person's carer and people were impressed that she would complete their care tasks. They told us they thought the service was well led. One person said, "She is very kind and caring." A staff member we spoke with said, "I've never had a problem. Even if she is busy she talks to you and will always respond to my phone calls." Staff told us the registered manager was open, accessible and approachable. Staff told us they felt confident in whistleblowing (telling someone) if they had any worries. They said they felt comfortable raising concerns with them and found them to be responsive in dealing with any concerns raised.

The service had a clear management structure in place led by a registered manager who was also the owner. She had very detailed knowledge of people's needs and explained how they continually aimed to provide people with good quality care that was responsive to their needs. She discussed the vision of the service as being a means to empower people to take control of their lives and to enable people to remain as independent as possible.

The registered manager told us about their values which were clearly communicated to staff. They discussed how at the last inspection there had been issues so they reviewed the provision and found the senior staff were not following the ethos of the company. This they felt had led to the culture becoming more about getting the job done rather than empowering people. In response to this they had recruited a new management team. This new team had been in post since July 2014 and they had taken action to improve the whole service. We found the team were very effective at assessing the performance of the staff and if care packages met people's needs.

We found that the registered manager had a good understanding of the principles of good quality assurance. The registered manager recognised best practice and developed the service to improve outcomes for people. The management team had identified areas for improvement such as ensuring reviews were completed on a regular basis and staff received adequate supervision. In response they had introduced IT systems that assisted them to track whether reviews and supervision had been undertaken. We saw that these were now taking place on a regular basis and the feedback was used to improve each person's care package; assist staff with achieving their learning and development goals; and to evaluate the success of the service in meeting their aims and goals.

The registered manager told us that staff morale needed to be improved and had taken steps to ensure staff felt better supported. The team had completed a piece of work looking at ways to improve staff retention and career opportunities. They had a programme for full team meetings and we saw how the minutes were shared with everyone including people who could not attend. They had rented an office in Redcar so that staff who lived in that area had a place to complete supervision sessions and training. This was staffed on a part-time basis by senior team leads and meant the staff could easily obtain updated care plans and ensure they were kept informed about matters that affected the service. Staff told us they were encouraged to share their views.

The registered manager told us of various audits and checks that were carried out on medication systems, the environment, health and safety and infection control. Any accidents and incidents that involved the services staff were monitored to ensure any trends were identified. We saw records of audits undertaken and the action plans that had been generated from them. We confirmed that actions had been completed.