

## Include 'In' Autism community interest company

# Include 'In' Autism

### Inspection report

Plains Farm Youth and Community Centre  
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25 May 2021

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### Ratings

Overall rating for this service

Inspected but not rated

Is the service safe?

**Inspected but not rated**

Is the service well-led?

**Inspected but not rated**

# 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. The service was responsible for supporting one adult at the time of the inspection.

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

The provider and the management team had taken steps to improve the service. An action plan had been created to address issues recognised in the warning notices issued by CQC. Some of the requirements of the warning notice had been met, but not all.

Risk assessments were in place to support people and staff to remain safe during the COVID -19 pandemic. People were supported and encouraged to wear face masks. Staff with a higher risk from COVID-19 were supported to work safely. Tools had been created to support children to give feedback about their care and support.

Quality assurance systems to measure the effectiveness of the service had improved, but further improvements were still needed. Whilst the management team had a better oversight of the service, we identified additional areas for improvement.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

### Rating at last inspection

The last rating for this service was inadequate (published 15 March 2021) and there were four breaches of regulation. We served two warning notices on the provider. We required them to be compliant with Regulation 12 (safe care and treatment) and Regulation 17 (good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 by 12 February 2021.

### Why we inspected

We undertook this targeted inspection to check whether the warning notices we previously served in relation to Regulation 12 and Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 had been met. The overall rating for the service has not changed following this targeted inspection and remains inadequate.

CQC have introduced targeted inspections to follow up on warning notices or to check specific concerns. They do not look at an entire key question, only the part of the key question we are specifically concerned about. Targeted inspections do not change the rating from the previous inspection. This is because they do not assess all areas of a key question.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Include

In Autism on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

#### Follow up

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

The overall rating for this service is 'Inadequate' and the service is therefore in 'special measures'. This means we will keep the service under review and, if we do not propose to cancel the provider's registration, we will re-inspect within six months to check for significant improvements.

If the provider has not made enough improvement within this timeframe, and there is still a rating of inadequate for any key question or overall rating, we will take action in line with our enforcement procedures. This will mean we will begin the process of preventing the provider from operating this service. This will usually lead to cancellation of their registration or to varying the conditions the registration.

For adult social care services, the maximum time for being in special measures will usually be no more than 12 months. If the service has demonstrated improvements when we inspect it, and it is no longer rated as inadequate for any of the five key questions it will no longer be in special measures.

## The five questions we ask about services and what we found

We always ask the following five questions of services.

### **Is the service safe?**

At our last inspection we rated this key question inadequate. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about.

**Inspected but not rated**

### **Is the service well-led?**

At our last inspection we rated this key question inadequate. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about.

**Inspected but not rated**

# Include 'In' Autism

## Detailed findings

### Background to this inspection

#### The inspection

This was a targeted inspection to check whether the provider had met the requirements of the warning notices in relation to Regulation 12 (safe care and treatment) and Regulation 17 (good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

#### 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.

The registered manager had recently left the service. The nominated individual had started the process of also becoming the registered manager with the Care Quality Commission. This means that they will become legally responsible for how the service is run, and for the quality and safety of the care provided.

#### Notice of inspection

We gave the service 24 hours' notice of the inspection. This was because the service is small and we wanted to be sure that the provider would be in the office to support the inspection. Inspection activity started on 24 May 2021 and ended on 3 June 2021. We visited the office location on 25 May 2021.

#### 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. The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report. We used all of this information to plan our inspection.

#### During the inspection

We spoke with the nominated individual, deputy manager, service manager and administrator. The nominated individual is responsible for supervising the management of the service on behalf of the provider. We reviewed risk assessments, recruitment files and quality assurance documents.

After the inspection

We continued to seek clarification from the provider to validate evidence found.

# Is the service safe?

## Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm. At the previous inspection this key question was rated as inadequate. We have not changed the rating of this key question, as we have only looked at the part of the key question we had specific concerns about.

The purpose of this inspection was to check if the provider had met the requirements of the warning notices. Some improvements were noted, but further improvements were needed. We will assess all of the key question at the next comprehensive inspection of the service.

### Assessing risk, safety monitoring and management

At the previous inspection, we found the provider failed to have robust systems in place to assess the risk of infections. Risks to people had not always been suitably assessed and mitigated. COVID-19 risk assessments were generic and were not individual. Risks to staff during the COVID-19 pandemic had not been fully recognised. This meant people and staff were not protected as much as possible from the risk of COVID-19.

- At this inspection we found individuals' needs were assessed to reduce risk as much as possible. Individual and person-specific risk assessments had been created to support people with face masks. Detailed information outlined how best staff could support people to remain safe during the pandemic.
- A new COVID-19 risk assessment for staff at greater risk from COVID-19 was in place. The service used this information to deploy staff safely. The service was proactive in changing to meet new government guidelines. The requirements of the warning notice have been met.

### Learning lessons when things go wrong

At the previous inspection the provider failed to ensure measures were in place to enable staff to evaluate and improve their practice.

- The management team had developed new documentation to support the capture and analysis of information. Whilst several improvements were noted on this inspection, these need to be sustained and further developments were still needed. The requirements of the warning notice have been partially met.

# Is the service well-led?

## Our findings

Well-Led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

At the previous inspection this key question was rated as inadequate. We have not changed the rating of this key question, as we have only looked at the part of the key question we had specific concerns about.

The purpose of this inspection was to check if the provider had met the requirements of the warning notices. Some improvements were noted, but further improvements were needed. We will assess all of the key question at the next comprehensive inspection of the service.

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

At the previous inspection, we found the provider failed to maintain accurate, complete and contemporaneous records and have effective systems to assess, monitor and improve the quality and safety of the service.

- Improvements had been made to the quality monitoring of the service. However, medicine audits were not routinely completed and discrepancies we found in recruitment files had not been identified. The provider recognised further developments were still needed. The requirements of the warning notice have been partially met.

- The provider had introduced a new system for monitoring of documentation to ensure it was up to date and accurate. They had introduced additional methods of communication with families. These systems were not established within the service and we will check during our next inspection that these systems and practices become embedded. The requirements of the warning notice have been partially met.

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

At the previous inspection we found the provider failed to seek feedback from children about their care and support, and how the service was run.

- The provider had designed a range of tools to capture children's voices. Whilst some improvements were noted on this inspection, these need to be sustained and further developments were still needed. The requirements of the warning notice have been partially met.