

The Wirral Autistic Society

Rainbow Resource Centre

Inspection report

Wirral Autistic Society 120 Chester Street Birkenhead Merseyside CH41 5DL

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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

We visited Rainbow Resource Centre on 05 July 2016. Rainbow Resource Centre provides care and support to young people living in their own homes on the Wirral. At the time of our visit, the service was providing support for six people, all of whom were in receipt of personal care. There were four staff employed by the service including two support workers, an outreach support manager and the registered manager.

The service had a registered manager. 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. The registered manager and outreach support manager were in attendance at the time of the inspection.

We saw that information was kept in different locations. This meant that there was a risk of important information regarding a young person being overlooked. The service had recognised this and were taking steps to improve this.

The provider had systems in place to ensure that young people were protected from the risk of harm or abuse. We saw there were policies and procedures and guidance for staff in relation to safeguarding adults.

We found that recruitment practices were in place which included the completion of pre-employment checks prior to a new member of staff working at the service. Staff received regular training to enable them to work safely and effectively and the service actively sought out new training for staff.

The staff employed by Rainbow Resource Centre knew the young people they were supporting. People who used the domiciliary service and staff told us that Rainbow Resource Centre was well led and staff told us that they felt well supported in their roles. We were told that the registered manager was accessible and approachable.

The care records we looked at contained good information about the support young people required and recognised their needs including their communication needs. All records we saw were complete, up to date and regularly audited. We found that families were involved in decisions about their children's support.

Relatives we spoke with said they would know how to make a complaint, we were made aware of one complaint that had been made and this had been resolved satisfactorily, no one else we spoke with had any complaints. We were also told by professionals that communication with the service was good.

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

People were supported by staff were being recruited correctly and supported appropriately.

Safeguarding policies and procedures were in place and staff had received training about safeguarding young people and adults.

Each young person had risk assessments that were personalised.

Is the service effective?

Good



The service was effective.

The staff received an appropriate induction and had received continuous training according to the needs of the young people they supported.

Staff received frequent supervision and annual appraisal.

Staff understood and applied the Mental Capacity Act (2005).

Good



The service was caring

Is the service caring?

Relatives we spoke with said staff were kind, very supportive and helpful.

Young people were encouraged to be independent as possible.

Is the service responsive?

Good



The service was responsive

Documentation containing support and monitoring information was kept in different places and not easily followed and the service was taking steps to improve this.

A range of social activities was accessed with support from staff.

The service and staff took time to build positive relationships with young people and families.

Families of the young people who used the service told us they were involved in their plan of support.

Is the service well-led?

Good



The service was well-led

The service had a manager who was registered with the Care Quality Commission.

The quality of the service was monitored continuously by visits to young people who used the service giving them opportunities to express their views and with the use of quality questionnaires.

Staff said that they felt very supported in their role.



Rainbow Resource Centre

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 was planned to check 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.

This inspection took place on 05 July 2016. We gave 24 hours' notice to make sure that someone would be available. The inspection was carried out by one adult social care inspector.

Before our inspection, we looked at information the Care Quality Commission (CQC) had received about the service including notifications received from the registered manager. We checked that we had received these in a timely manner. We also looked at safeguarding referrals, complaints and any other information from members of the public.

Before the inspection, the provider completed a Provider Information Return (PIR). 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.

We visited the office on 05 July 2016 and looked at records, which included all six people's care records and other records relating to the management of the service. We also visited the headquarters of Wirral Autistic Society at Oak House and viewed the main files for staff.

Following this visit we made phone calls to staff, relatives of the young people who used the service and social workers.



Is the service safe?

Our findings

People we spoke to felt the service was safe. We saw that staff had received training in safeguarding children, adults at risk and specific training in safeguarding children with autism and updates were undertaken regularly. The staff were able to tell us what to do to both prevent abuse and to report it should it occur. One relative told us "[Name] is happy to go out with [staff]".

Rainbow Resource Centre had developed and trained their staff to understand and use appropriate policies and procedures to follow local safeguarding protocols, as well as their own in house safeguarding policy. This new protocol included contact information for the local authority, and child protection. One staff member told us that they had a file in their car with this contact information readily available. One relative told us, "[name] just loves the lady who comes to him".

We asked staff about their knowledge surrounding whistle blowing and their responsibilities. Staff were able to tell us that there was a specific whistleblowing policy and that the organisation encouraged open communication meaning staff would feel they could whistle blow if they felt the need and that it would be acted on.

We saw that staff were recruited appropriately. The staff files we looked at had two references and employment, qualifications and health checks made, plus criminal records checks. All the staff had been confirmed as eligible to work in UK.

There were sufficient staff to meet the needs of people and we were told staff were regular and known to the young person they were supporting and that consistency was maintained.

Staff had received appropriate medication training including the use of epi-pens, this is a device used for the autoinjection of medications for people with various health needs. This meant that staff were adequately trained to meet the medication needs of the young people that they were supporting.

Risk assessments had been completed and we saw they were recorded in young people's care files. These included risks associated with hazards in the environment, for example road safety, stranger danger, trip hazards and sharp objects There was also comprehensive information regarding actions to be taken in specific medical emergencies.

We also looked at the records for accidents and incidents and saw that there was a process in place that also recorded "near misses". This was implemented by the provider, Wirral Autistic Society.

We saw that staff had received training regarding infection control and the Rainbow Resource Centre had an infection control policy in place that was also implemented by the provider, Wirral Autistic Society.



Is the service effective?

Our findings

The people we spoke to thought that the staff were well trained and knowledgeable. One relative told us "Oh definitely, yes". All thought that the support workers knowledge about the needs of the young people was excellent. Another relative told us "It's a shame there's not more services like this for people like my son".

We looked the two staff files that showed all had attended and successfully completed the provider's induction schedule and had to complete a six month probationary period. Records showed that a range of training was undertaken by the staff team and this was confirmed by the staff we spoke with. Subjects that had been covered during 2015/2016 included health and safety, management of actual or potential aggression, basic first aid, paediatric first aid, epilepsy, moving and handling and medication.

The training was provided by the providers internal training department. We were told by staff that if a new young person was accessing the service and had either a health condition or other need that wasn't already being provided for then the management actively looked for and provided training surrounding these subjects. We were told "[Manager] is very open to finding new training".

The service had encouraged staff to use the care certificate self assessment tool to gauge their own knowledge and practice and to feedback their findings to the manager, we saw that this was in progress.

We saw that there were recorded two monthly supervisions and annual appraisals. Supervision provides staff and their manager with a formal opportunity to discuss their performance, any concerns they have and to plan future training needs. The service also had a weekly meeting with individual staff where there was the opportunity to review daily occurrences in the delivery of the service.

We noted that the service was following the Mental Capacity Act 2005 (MCA) code of practice and making sure that the rights of people who may lack mental capacity to take particular decisions were protected. This included decisions about depriving people of their liberty so that they get the care and treatment they needed where there is no less restrictive way of achieving this. We saw that there were policies and procedures in place and that staff had been scheduled to be trained in these areas.

We saw that staff had received training surrounding the Mental Capacity Act and were able to tell us that they had found the training helpful as there had previously been some confusion regarding the law as the service was for young people. Everyone we spoke to told us their choices were respected, one relative said "They do whatever [name] wants to do on the day, it depends on their mood".

We were able to see throughout the care flies that care delivery had been agreed to and this was supported by those we spoke to through the course of the inspection.

The initial assessments that had been completed with the families included the young person's communication needs and strategies. We were able to see communication tools that were available for staff

to aid effective communication with the young person. We were told by one relative how the service supported the young person in cookery and accessing food. The relative shared how happy they were with the support that was received.	



Is the service caring?

Our findings

Staff told us they considered that they and their colleagues really cared for the young people they supported. A relative told us, "[Staff] makes a difference in [name's] life", another relative told us that young person who used the service "Just loves the lady who comes out".

We saw that young people were supported to be as independent as possible. We observed the manager having a conversation with a young person where they encouraged them to make decisions about how to spend their time which demonstrated this.

Relatives told us that there was good communication between them and the service and they felt they were kept informed of any issues. All relatives told us how the Rainbow Resource Centre came out and explained the processes and services to them on initial meetings and that they were kept up to date with any relevant information. Comments included "Its brilliant" and "It's really good". We were told that the service regularly visited families to review the care being delivered and the people we spoke to felt that they were involved in the processes.

We spoke with professionals and we were told by one social worker that there was always good communication and that "We've always found them quite helpful".

We observed that confidential information was kept secure either in locked in the main office. This included paper based records such as care plans, risk assessment, communication books and electronic information was also secured appropriately.



Is the service responsive?

Our findings

All the people who we spoke with told us that the management came and did an initial meeting where they found out all about the young person. They then went out on an introduction with a support worker. Everyone we spoke to was satisfied with the way care was provided and felt listened to. We were able to see the initial visit documentation and this included information that was important to the young person this included nicknames, likes, dislikes, medical information and communication needs. One relative told us "They hit the ground running". A staff member said "This is targeted specific services for families".

Everyone we spoke to told us that they would certainly be comfortable with expressing concerns about the service if they had any. During our telephone conversations we identified that one relative had expressed a complaint and this had been dealt with appropriately and to the person's satisfaction. We were told that the management had been approachable and that they were now more than happy with the service.

The service had a clear written complaints policy and this was included in the information pack that was available from the initial meeting when people started using the service. The complaints procedure advised people to contact the manager if they wished to raise any concerns and gave contact details for the ombudsman service and for the CQC. One person told us that they would certainly be comfortable with expressing concerns about the service if they had any. One relative told us "I know I can email and phone at anytime", another person said "Oh absolutely, if there's anything I need to raise I can contact them directly".

We saw that information was kept in different locations. These included the lockable cabinet in the office, on a password protected database and in weekly meeting with the staff. The service had already identified the need for this information to be managed differently and that it needed to be centralised. This meant that there was a risk of important information regarding a young person being overlooked.

Plans were in place for the care the young people required. The documentation was clear, simple, had been completed in full and had been agreed by families. All plans had been reviewed on a six monthly basis. Relatives we spoke to and staff told us that they had all been involved in the reviews. The reviews included checks on risk assessments, aims and objectives identified next steps. One relative told us how controls had been put into place and that the last review had no problems identified.

We saw that activities had been planned and that this was person centred. One relative told us how the service worked with the young person's mood and that the staff member supported the young person with accessing leisure activities. The relative told us how the support worker was sensitive to the young person's needs and that the support delivered was "Very person centred".



Is the service well-led?

Our findings

The service had a registered manager who had been in post since August 2015. He was supported by an outreach support manager. The staff who spoke with us said the service was well led and that they felt supported. One person told us "They're very approachable", another staff member said "I just know that [registered manager] and [outreach support manager] will support me". We saw records of supervision which evidenced the support and relationship that staff received .

When speaking to families it was obvious that the registered manager was well known to the families supported by Rainbow Resource Centre and we were told that communication was always open with the management.

The services policies and procedures had been reviewed by the provider and these included health and safety, confidentiality, whistle blowing, safeguarding, recruitment and lone working. We saw that if any changes had been made to any policies or procedures then this was cascaded to staff through the weekly mandatory individual meetings.

The service had an on-going auditing system in place and we saw that the provider had a continuous improvement policy that was up to date. We asked relatives if they had been asked their opinions on the service and were told that satisfaction surveys had been received and returned, we were also told of the six monthly review meetings that were held with each family, giving opportunities for issues to be identified and resolved. Through this process the service had identified that the young person's voice and opinions needed to be highlighted and had started a new process to encourage the young person to communicate their opinions effectively. This showed that there was an on-going process of the service acting on issues and comments made.

At the time of our inspection the service was holding a family support group meeting. This was a regular group that the service had made available where it supported those family members who cared for a young person with autism. The service also held 'activities clubs' for the young people where they could access computers, meet new friends or develop social skills.

People's care files were stored securely to protect their confidential information.

We were able to see how the service worked alongside other professionals such as the local authority and social workers, we were also told by relatives how the registered manager had chaired meetings that had included other professionals. One social worker we spoke to told us "They have a good range of workshops, we've referred them to others".