

In Out and About Limited

In Out and About Community Support Office

Inspection report

Enness Building
East Street, Bingham
Nottingham
Nottinghamshire
NG13 8DS

Tel: 01949837227

Website: www.inoutandabout.co.uk

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Ratings

Overall rating for this service	Good ●
Is the service safe?	Good ●
Is the service effective?	Good ●
Is the service caring?	Good ●
Is the service responsive?	Good ●
Is the service well-led?	Good ●

Summary of findings

Overall summary

About the service: In Out and About Community Support Office is a domiciliary care service which provides personal care and support to one person in their own home for two days a week. They also support the person to access the community.

The provider met the characteristics of 'Good' in all areas. This has improved from a rating of 'Requires Improvement' at the last inspection in 2015. More information about this is in the full report. This service has not been inspected since 2015 because the provider ceased to provide the regulated activity of personal care between 2016 and 2018.

People's experience of using this service:

- ☐ The person was protected from avoidable harm. The risks to their safety had been appropriately assessed and acted on. Environment and evacuation risk assessment were not in place at the time of the inspection. Immediate action was taken to address this. The person received support from a small and consistent team of staff. The person did not receive support from staff with their medicines. There were no infection control risks. The registered manager had the processes in place to investigate and act on any accidents and incidents. To date, there have been none.
- ☐ The person's care and support was provided in line with their assessed needs and protected the person from discrimination. Most staff training was up to date, action was being taken to address the shortfalls. Staff felt supported to carry out their role. Staff supported the person to lead a healthy and balanced lifestyle. The person was 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 support this practice.
- ☐ Staff had built a meaningful, kind and caring relationship with the person. Staff treated the person with respect and dignity and listened to and acted on their views. The person's privacy was respected. Effective processes were in place to store records safely and in line with data protection legislation.
- ☐ The person received person centred care and support that considered their choices and preferences. Staff supported the person to achieve their agreed goals. The person was supported to access the community. Efforts had been made to provide information in a format the person could understand. No complaints had been received, but there were appropriate policies and procedures in place to act if there was. End of life care was not provided.
- ☐ Improvements had been made to the overall governance of the service. An additional member of staff was in place to support the registered manager with maintaining high quality records. Records viewed were now comprehensively completed and reviewed. The views of the person were used to help improve and develop the service. Staff enjoyed working at the service and felt respected and valued. Quality assurance processes were in place to help inform the provider of the quality of the service provided.

Rating at last inspection:

At the last inspection the service was rated as Requires Improvement (Published May 2015).

Why we inspected:

This was a planned inspection.

Follow up:

We will continue to review information we receive about the service until the next scheduled inspection. If we receive any information of concern we may inspect sooner than scheduled.

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.

In Out and About Community Support Office

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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Inspection team:

The inspection was carried out by one inspector.

Service and service type:

In Out and About Community Support Office is a domiciliary care service which provides personal care and support to one person in their home. They also assist this person with accessing the community.

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

Notice of inspection:

We gave the service 48 hours' notice of the inspection visit because we needed to be sure that the registered manager would be available.

Inspection site visit activity started and ended on 29 March 2019. We visited the office location to see the registered manager and to review care records and policies and procedures.

What we did:

We reviewed information we had received about the service since the last inspection. This included checking incidents the provider must notify us about, such as serious injuries and abuse. We sought feedback from

the local authority, Healthwatch and health and social care professionals who work with the service. On this occasion, we had not asked the provider to send us a provider Information return (PIR). A PIR is a form that asks the provider to give some key information about the service. This includes what the service does well and improvements they plan to make. However, we offered the provider the opportunity to share information they felt was relevant

During the inspection, we met and spoke with the person who used the service in their own home. We spoke with two members of the support staff, senior support worker and the registered manager.

We reviewed a range of records. This included the person's care and support records and three staff files. We also viewed training and supervision records and records relating to the safety and management of the service.

After inspection, we asked the registered manager to provide us with a variety of policies and procedures. All information was sent within the required timeframe. We used all this information to help form our judgements detailed within this report.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

People were safe and protected from avoidable harm. Legal requirements were met.

Systems and processes to safeguard people from the risk of abuse

- ☐ The person supported was protected from the risks of avoidable harm. They told us they felt safe when staff supported them in their home or in the community. They also said, "I always feel supported and safe and they never do anything that hurts me."
- ☐ Two of the three staff who supported the person had received safeguarding training. The registered manager told us they would address this.
- ☐ Staff could confidently explain how they would respond if they felt the person was at risk of harm. They told us they had confidence that the registered manager would act on their concerns, but they also understood they could report any worries they had to other agencies such as the CQC. Since they started to support the person, there have been no incidents that required reporting to the local authority safeguarding team.

Assessing risk, safety monitoring and management

- ☐ The risks to the health and safety of the person had been assessed. These assessments included the support the person needed with accessing the community and mobilising. The risk assessments were reviewed to ensure they met the person's current needs. This meant the person received safe and effective care and support.
- ☐ We did note that an assessment of the person's home environment and how to evacuate them in an emergency had not been completed. Staff spend minimal time in the person's home with most of their time spent supporting the person in the community. However, there were occasions when staff supported the person with personal care in their home. The registered manager told us whilst they saw the risk to the person and staff as low, they would implement these assessments to help reduce the potential risk further. After the inspection we were forwarded copies of these new assessments.

Staffing and recruitment

- ☐ The person spoke positively about the staff who supported them. They liked having a small team of staff who understood their needs. They also said, "They understand what I need and know me really well. They are here when I need them."
- ☐ The person was supported by a small team of staff who understood the person's needs. Staff attended twice a week to support the person with personal care if required and to access the community. The times the person required support from staff were flexible and were changed if the person requested it.
- ☐ Robust recruitment checks were carried out before staff commenced their role. This included checks on each staff member's identity, references and criminal record. This helped to ensure they had the right skills and character to work with the person. These checks meant the person continued to be supported safely by staff.

Using medicines safely

- ☐ Staff did not support the person with medicines.

Preventing and controlling infection

- ☐ The person told us staff did not support them with any domestic tasks other than occasionally helping them prepare a meal. They had no concerns in relation to the control of the spread of infection.

Learning lessons when things go wrong

- ☐ The provider had processes in place to investigate and act on any accidents or incidents that could affect the person's safety. To date there had been no accidents or incidents.

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

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.

- ☐ The person received support from staff that reflected their needs and personal choices. The person was happy with the care and support they received and felt staff acted on their views.
- ☐ The person received their care in line with the protected characteristics of the Equality Act 2010 which protected them from discrimination. Their needs had been assessed to ensure that staff could provide the appropriate care in line with current best practice guidelines and legislation.

Staff support: induction, training, skills and experience.

- ☐ The person felt staff were well trained and had the skills and experience needed to support them in the way they wanted. The person said, "They know what they are doing, they seem good at their job."
- ☐ Staff had received training in a number of areas deemed mandatory by the provider for them to carry out their role effectively. Records showed training for two of the three staff who supported the person was fully up to date. One member of staff had a small number of courses to complete, which the registered manager told us they would address with the staff member. Staff felt supported and received supervision of their practice. This meant the person continued to be cared for and supported by experienced and skilled staff.

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

- ☐ The person could support themselves with eating with and drinking. They could also prepare their own meals, although occasionally staff did support them with this. Records showed the person did not have any risks associated with nutrition.
- ☐ Staff have worked with the person to expand their cooking skills and to develop a healthy eating regime. They have done this by supporting the person to source on-line recipes.

Ensuring consent to care and treatment in line with law and guidance.

- ☐ The Mental Capacity Act 2005 (MCA) provides a legal framework for making decisions on behalf of people who may lack the mental capacity to do so for themselves. The Act 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.
- ☐ The person could make decisions for themselves. They told us staff respected their views and acted on their behalf with their consent. The person said, "They [staff] never tell me what to do."

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

- ☐ The person received support from another care provider for the majority of their care needs. Currently this

service did not have the need to communicate with the other provider. The registered manager told us if they felt the person was at risk then they would discuss this with the other provider, but this was not currently needed. Each care provider had clearly defined roles which did not affect the other.

- ☐ The person took responsibility for arranging their own healthcare appointments themselves or with the other care provider.

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.

People were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; equality and diversity

- ☐ The person liked the staff. They felt comfortable with them and found they were always treated with respect. They said, "They talk nicely to me. I get on really well with them."
- ☐ The person did not currently have any diverse needs; however, staff spoke confidently about how they would support the person if they did.
- ☐ The person's care records were informative and gave staff important information about the person, their background, their hobbies and interests. Staff had a good understanding of the person's care and support needs. They had used this information to help them to form a friendly, meaningful and compassionate relationship with the person.

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

- ☐ The person could make their own decisions about their care and support needs. They felt staff listened to them, respected their decisions and never forced them to do anything they did not want to do.
- ☐ The person's care was reviewed with them and any changes requested were acted on. The person told us they were happy with the way the staff had supported them since they started to use the service.

Respecting and promoting people's privacy, dignity and independence

- ☐ The person felt their independence was always encouraged by staff. The person said, "I can do a lot of things for myself. Staff always ask me first before doing anything for me."
- ☐ The person's care records had clearly defined roles for staff. When supporting with personal care, the person had made it clear what support they needed and what they could do for themselves. Staff understood and respected this.
- ☐ The person felt they were treated with dignity and respect by staff at all times.
- ☐ Records were treated appropriately to ensure the person's confidentiality and privacy. The registered manager told us they had the processes in place that ensured all records were managed in line with the Data Protection Act and The General Data Protection Regulation. This is a legal framework that sets guidelines for the collection and processing of personal information of individuals within the European Union.

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs

People's needs were met through good organisation and delivery.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control

- ☐ The person's needs were assessed prior to them starting to use the service. Once it had been agreed that care would be provided, care and support plans were put in place to inform staff how the person wished to be cared for. The plans included personal choices about the support the person wanted with personal care.
- ☐ The plans included reference to the person's personal interests, hobbies, likes and dislikes. The person told us staff understood their choices and cared for and supported them in their preferred way. The person had agreed goals with the staff and had clear objectives they wanted to achieve with the support of staff. This included maintaining a healthier lifestyle and support with paying their own bills. 'Achievement logs' were in place to chart the person's progress towards these goals. This meant the person was supported to make choices and to take control of their own lives.
- ☐ The registered manager understood the Accessible Information Standard (AIS). The AIS is a law that requires that provisions be made for people with a learning disability or sensory impairment to have access to the same information about their care as others, but in a way, that they can understand. Adherence to this standard is important to ensure that people are empowered, treated fairly and without discrimination. We saw examples of easy read policies and procedures were in place.

Improving care quality in response to complaints or concerns

- ☐ The provider had the processes in place to act on any complaints made by the person. To date none had been received.

End of life care and support

- ☐ End of life care was not provided by this service.

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.

The service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- ☐ During our inspection on 21 and 22 May 2015 we identified a breach of regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. This was in relation to the overall governance of the service. We found issues with care planning records not being fully completed nor reviewed, incomplete risk assessments and a failure to respond to a CQC request for pre-inspection information.
- ☐ Since the last inspection the provider had amended their business and they no longer provided a supported living service. This area of the provider's business was where we identified the main concerns during our last inspection. The provider now only provides the regulated activity of 'personal care' to one person, in their home, twice a week. No other people who use the service receive support with their personal care.
- ☐ For the person that does receive this regulated activity, we found their records to be well completed and reflective of their needs and the risks to their safety assessed and acted on. The registered manager told us there were no plans for the service to change its current working model.
- ☐ Staff enjoyed their role and respected the registered manager. They were confident the registered manager would act on any concerns they raised.
- ☐ The registered manager was now more aware of the requirement to have robust quality assurance processes were in place. A senior support worker had been recruited and they had undertaken the responsibility of ensuring care records were up to date, reviewed and reflective of the person's current needs. This will help to ensure on-going compliance with the CQC's fundamental standards,
- ☐ It is a legal requirement that a provider's latest CQC inspection report is displayed at the service where a rating has been given. This is so that people and those seeking information about the service can be informed of our judgments. We noted the rating from the previous inspection was displayed at the provider's office address.

Planning and promoting person-centred, high-quality care and support; and how the provider understands and acts on duty of candour responsibility

- ☐ There was a clear focus on providing the person with high quality, person-centred care and support.
- ☐ The registered manager understood the requirement of their registration with the CQC. They could explain what incidents needed to be referred to the CQC and why. This meant the registered manager operated in an open and transparent manner.
- ☐ The registered manager was aware of their responsibilities to apologise to the person if mistakes were made.

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

- ☐ The person's views were actively and regularly requested and acted on. The person liked the registered manager and felt able to talk to them if they had any concerns. This was used to inform the registered manager to help develop and improve the service.

Continuous learning and improving care

- ☐ The registered manager was eager to continually learn and to improve to provide the person with continued high-quality care and support. They met with their senior support worker and staff regularly to discuss the person's care needs and what actions to take if improvement were needed.

Working in partnership with others

- ☐ There was not currently the requirement to work alongside other health or social care agencies when providing care and support for the person.