

Darlington Borough Council

Darlington Borough Council In House Home Care

Inspection report

Central House
Gladstone Street
Darlington
County Durham
DL3 6JX

Date of inspection visit:
04 December 2023
05 December 2023

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18 December 2023

Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Darlington In House Homecare is a reablement and supported living service providing personal care to people. The service provides support to adults of all ages. People using the reablement service were supported for up to 6 weeks with therapy led support following hospitalisation or injury. The service also supported 3 people with a learning disability living in their own home. At the time of our inspection there were 37 people using the service.

People's experience of the service and what we found:

We expect health and social care providers to guarantee autistic people and people with a learning disability the choices, dignity, independence and good access to local communities that most people take for granted. Right support, right care, right culture is the statutory guidance which supports CQC to make assessments and judgements about services providing support to people with a learning disability and/or autistic people. We considered this guidance as there were people using the service who have a learning disability and or who are autistic.

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

Right Support:

Medicines were given safely by trained and competent staff. The service had plans and guidance to support people with identified risks. Care was person centred and promoted choice and independence. People were supported to achieve positive outcomes. People were supported by staff who received an induction and ongoing training.

Right Care:

People received kind and compassionate care. Feedback from people was all positive, staff knew people well, understood and responded to their individual needs. Staff promoted and respected people's right to privacy, dignity, and respect. Staff knew how to protect people from the risk of harm and abuse.

Right Culture:

The manager listened to concerns and promoted a positive culture that was person-centred, open, and inclusive. Staff were supported and given opportunities to feedback about the service. Quality assurance processes enabled continuous improvement. As the manager had not been in post long some systems and processes were still in development, but plans were in place and being acted on.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection The last rating for this service was Good published on 3 November 2018.

Why we inspected

We undertook a focused inspection to review the key questions of safe and well-led only. For those key question not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

You can read the report from our last comprehensive inspection by selecting the 'all reports' link for Darlington In House Homecare on our website at www.cqc.org.uk.

Follow Up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Good ●

The service was safe.

Details are in our safe findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

Darlington Borough Council In House Home Care

Detailed findings

Background to this inspection

The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Health and Social Care Act 2008.

Inspection team

The inspection team consisted of 1 inspector.

Service and service type

This service provides care and support to people living in 1 'supported living' setting, so that they can live as independently as possible. It also provides short term therapy led support to people leaving hospital or after being unwell in their own homes. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for supported living; this inspection looked at people's personal care and support.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations. At the time of our inspection there was a manager in post whose application to be registered had been submitted to CQC.

Notice of inspection

The inspection was announced. We gave 48 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the provider or manager would be in the office to support the

inspection. We visited the location's office on 4 December 2023.

What we did before the inspection

We reviewed information we had received about the service. We sought feedback from the local authority and Healthwatch. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with 7 people about their experience of the care provided. We visited the office location and the supported living service. We spoke with the manager, 2 team leaders, 4 coordinators and 6 support workers. We looked at written records, which included 6 people's care and medicine records and 2 staff files. A variety of records relating to the management of the service were also reviewed.

Is the service safe?

Our findings

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

At our last inspection we rated this key question good. At this inspection the rating has remained good. This meant people were safe and protected from avoidable harm.

Using medicines safely

- People were supported to receive their medicines safely.
- Medicines were administered and signed for safely, medicines records were regularly checked by managers.
- Staff we spoke with said they had regular refresher training and had their competency assessed to administer medicines safely.

Assessing risk, safety monitoring and management

- The provider assessed risks to ensure people were safe. Staff took action to mitigate any identified risks.
- People were involved in managing risks to themselves and in taking decisions about how to keep safe. Several people told us staff helped them to carry out independent living skills safely. One person told us, "They encourage me to do the things I can do for myself but will step in if I need help."

Systems and processes to safeguard people from the risk of abuse and avoidable harm

- People were safeguarded from abuse and avoidable harm.
- The provider had a safeguarding process for staff to follow.
- Staff received safeguarding training and were aware of when and how to report any concerns.

Staffing and recruitment

- The provider ensured there were sufficient numbers of suitable staff. The provider operated safe recruitment processes.
- We saw people using the supported living service had consistent staff and people receiving reablement services told us they got to know the staff supporting them.
- Staff recruitment and induction training processes promoted safety. Staff knew how to consider people's individual needs, wishes and goals.

Preventing and controlling infection

- People were protected from the risk of infection as staff were following safe infection prevention and control practices.
- People we spoke with said staff took care to reduce contamination risks and wore appropriate PPE when supporting them.
- All relevant staff had completed food hygiene training and followed correct procedures for preparing and storing food.

Learning lessons when things go wrong

- The provider learned lessons when things had gone wrong.
- The service managed incidents affecting people's safety well. Staff recognised incidents and reported them appropriately.
- Any lessons learned were shared to improve practice through staff meetings and communication books.

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The MCA requires that, as far as possible, people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

- The provider was working in line with the Mental Capacity Act.
- People were asked for their consent before support was given and involved as fully as possible in decision making.
- Support was planned in the least restrictive way. People and staff told us people were not restricted from doing what they wanted to do.

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 our last inspection we rated this key question good. At this inspection the rating has remained good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- There was a positive and open culture at the service. The provider had systems to provide person-centred care that achieved good outcomes for people.
- All the people we spoke with said they were supported well and achieved positive outcomes. One person told us, "The staff all uphold my dignity and always insist I have everything I might need, they are really brilliant."
- Staff understood the values of the service and told us they worked to achieve these. A staff member told us, "We want to help people be as independent as possible and let them enjoy their lives as fully as possible."
- People and staff told us there was an open culture and they were encouraged to discuss any issues.
- Service promoted equality and diversity in all aspects of the running of the service.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong; Continuous learning and improving care

- The provider had a clear management structure that monitored the quality of care to drive improvements in service delivery. The manager was keen to promote new ways of working that introduced national models of good practice.
- Quality assurance systems and governance arrangements were in place to identify areas for improvement and actions required.
- There was a manager in post who understood their role and requirements of the position. We received positive feedback from people and staff about the management of the service. One staff member said "We feel really supported by management here and we are listened to, its good teamwork."
- The provider understood their responsibilities under the duty of candour.

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

- People and staff were involved in the running of the service and fully understood and took into account people's protected characteristics.
- Systems were in place to gather feedback from relatives and people including surveys and meetings.

- Staff were consulted through regular surveys and meetings. One team leader said, "It's been empowering to look at new ways of working and to bring in new approaches to really make the service as person centred as possible."

Working in partnership with others

- The service worked proactively in partnership with a range of other health and social care services to improve people's outcomes.
- The reablement services met weekly in a multidisciplinary forum to review each person using the service. The manager of the Rapid Response team they worked with said, "We do a lot of collaborative working sharing good practices, and did some recent joined up work around falls preventions. I have to say that Reablement and Rapid Response Team work extremely well together which enhances both services so that the people we all support get a great wrap around care- from the minute of a hospital discharge till they successfully end the service."