

Northumberland County Council

South East STSS (Short Term Support Service)

Inspection report

The Harbour Suite
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Northumberland
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Tel: 01670536400

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16 November 2023

05 December 2023

14 December 2023

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12 February 2024

Ratings

Overall rating for this service

Outstanding 

Is the service safe?

Good 

Is the service well-led?

Outstanding 

Summary of findings

Overall summary

About the service

South East STSS (Short Term Support Service) is provided by Northumberland County Council. It provides a range of rehabilitation for up to six weeks, including reablement, occupational therapeutic support and a 'bridging' service, when people are awaiting longer-term care packages. The service is provided to people in their own homes. At the time of our inspection there were 18 people using the service.

Not everyone who used the service received personal care. CQC only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do we also consider any wider social care provided.

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

South East STSS was an extremely successful service which helped people achieve positive outcomes, build confidence and gain independence to better manage their lives.

People who used the service received high-quality, personalised support from an exceptionally well-led service. People said the service was "outstanding" and had successfully helped them to regain independent skills to remain at home.

Staff were fully committed to providing an extremely person-centred service. Staff were very proud to work for the service and said they received superb support from the organisation and their colleagues.

The managers provided strong leadership and constantly considered how they could enhance the service. There was excellent team work and collaboration both within and outside the service. Other health and social care professionals commended the service for its exceptional management, joint-working and open communication.

Since the last inspection, the provider had developed significant new initiatives to support and improve the service to people and to the local community. These included a 'home safe' support team to get people home from hospital with the equipment and resources they needed within 24 hours.

The service was safe. Risks to people's health and safety were assessed and mitigated. Medicines were managed in a safe way. There were enough staff who were recruited safely to make sure people received the right support.

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

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 outstanding (published 28 November 2017).

Why we inspected

We carried out this inspection due to the length of time since the last inspection.

This report only covers our findings in relation to the key questions Safe and Well-led. For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

The overall rating for the service remains the same, based on the findings of this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for South East STSS 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.

<p>Is the service safe?</p> <p>The service was safe.</p> <p>Details are in our safe findings below.</p>	<p>Good ●</p>
<p>Is the service well-led?</p> <p>The service was exceptionally well-led.</p> <p>Details are in our well-led findings below.</p>	<p>Outstanding ☆</p>

South East STSS (Short Term Support Service)

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 was carried out by an inspector and an Expert by Experience.

Service and service type

This service is a domiciliary care agency. It provides personal care to people living in their own homes.

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 registered manager in post.

Notice of inspection

We gave the service 48 hours' notice of the inspection. This was because we needed to be sure that the provider or registered manager would be in the office to support the inspection.

Inspection activity started on 16 November 2023 and ended on 14 December 2023. We visited the location's office on 22 November and 5 December 2023.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from health and social care professionals who work with the service. 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 the inspection.

During the inspection

During the inspection we spoke with 8 people who had recently used the service and relatives by telephone.

We spoke with 5 management staff, including the registered manager, senior manager, regional manager, service manager and 2 deputy managers. We received 27 survey responses from reablement staff, home safe support staff, supervisors and occupational therapists.

We received written feedback from 7 health and social care professionals who work with the service.

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. The rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- The provider had safeguarding processes to manage any concerns. Staff had access to the local authority's safeguarding policy and a range of in-house measures to support the safety of people and staff.
- Staff had annual refresher training in safeguarding vulnerable people and 100% of staff were up to date with this training. Staff understood their responsibilities to follow the provider's safeguarding arrangements and knew what to do if they had any concerns about people being at risk.
- People said they felt safe using the service. They told us, "The care staff are very kind to my relative and seem really nice people" and "They (staff) are very well trained and know what they're doing."

Assessing risk, safety monitoring and management

- The provider had systems for assessing potential risks to people.
- The staff team carried out risk assessments of each person's individual circumstances and needs to make sure potential risks were managed. The assessments included clear strategies to show how specific risks to individual people would be mitigated.
- People told us the staff supported them to manage risks in a safe way. Their comments included, "If there has been anything I needed (to keep me safe), they seem to be able to organise it for me very quickly" and "The carers worked with me to find out how I could safely use the shower without falling and showed me how to use new equipment."

Staffing and recruitment

- The provider ensured there were sufficient staff in relevant roles to provide a safe and effective support for people as soon as they needed it. The service was well-staffed and resourced.
- Since the last inspection, the provider had set up a 'Home Safe' support team who provided safe discharge assistance for people leaving hospital or urgent attention for people in the community. In addition, the provider now employed a team of occupational therapists.
- The provider used safe recruitment practices to make sure new staff were suitable to work with people.

Using medicines safely

- The provider had established safe medicines management practices. The management team had recently started working with a consultant pharmacist to make sure medicine practices were meeting best national standards.
- The majority of people managed their own medicines or had short-term support from staff to regain the skills to do this independently.
- Staff were trained and competent in administering medicines, where this was necessary.

Preventing and controlling infection

- The provider's infection prevention and control policy was up to date and effective.
- Staff received mandatory training in infection control and use of personal protective equipment (PPE) as part of their induction.
- People confirmed staff wore PPE when appropriate.

Learning lessons when things go wrong

- The provider had clear systems to monitor care and learn lessons where issues arose.
- Any incidents or accidents were acknowledged and acted upon. The management team promoted an open culture and reflective practices were used to learn and continuously improve.

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 outstanding. The rating for this key question has remained outstanding. This meant service leadership was exceptional and distinctive. Leaders and the service culture they created drove and improved high-quality, person-centred care.

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

- The service promoted an extremely person-centred approach and consistently achieved excellent outcomes for the people who used it.
- People unanimously described the significantly positive impact the service had on their confidence and regained independence. They told us, "I can honestly say that the progress I have made is more than I expected (because of them)" and "The carers were all very kind and seemed to want me to get back on my feet as much as I did. They built my confidence up again."
- People said the service was "a godsend" and "outstanding". One person told us, "I have enjoyed very detailed care and to be honest, it was the push I needed (to regain skills) when I came out of hospital."
- The management and staff team were absolutely clear the service only existed for the benefit of the people who used it. The managers used storyboards and case studies to demonstrate the positive impact the service had on people's lives.
- Staff fully displayed the provider's organisational values and put people's well-being at the centre of the service. Staff comments included, "Success is about ensuring the person is at the very centre of everything and that the team has given their all to achieve realistic goals" and "Our success is making positive changes to a client's life to allow them the independence to carry on. We all have a 'can-do' attitude despite all the challenges in the community."
- Other care professionals said the service was very successful in achieving the right outcomes for people. Their comments included, "STSS staff have always been extremely competent. Their approach to reablement allows the people they work with to identify their desired outcomes by delivering person-centred care."

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

- There was a robust management structure across the health and social care elements of the service. There were strong relationships between all staff and senior managers with regular integrated meetings and integrated governance.
- The managers used national best practice guidelines and professional standards to complete quality audits, including NICE standards for reablement. The managers had directly aligned those standards to their own audit framework.
- People were empowered to measure the success of the service they received by completing their own 'before and after' change in abilities outcomes. The managers also used a monthly dashboard to capture

the effectiveness of the service in supporting people to remain at home and prevent the need for longer term care.

- External health professionals told us the service was exceptionally well-led. Their comments included, "STSS has an excellent management structure. The managers are approachable, consistent and always available. They are reliable and we have confidence in the service."

Continuous learning and improving care

- The provider and staff team were enthusiastically committed to continuous improvements. Since the last inspection, the provider had introduced several new initiatives, including employing dedicated occupational therapy staff and setting up the extremely responsive Home Safe Support Service.
- Innovative new plans to extend the service were being put in place, including the development of 2 sheltered accommodation flats where people could be supported by reablement staff to become ready to go home.
- The provider was about to pilot the use of digital and technology-based support for people, including voice-activated devices and self-support videos.
- Staff said they were empowered to be involved in designing improvements to the service. They commented, "Proactive involvement from all staff in service development initiatives is encouraged. Suggestions for improvement are welcomed and taken seriously" and "There is a culture of seeking to continuously improve, in order to provide the best service possible."

Working in partnership with others

- The service worked extremely well with several health and social care professionals to provide seamless, effective support for people.
- Health and social care professionals made many comments about the very positive outcomes for people as a result of the service collaboration. These included, "My experience is that they are extremely knowledgeable, creative in their thinking, open to constructive feedback and led by example. STSS is exceptional at supporting hospital discharge by providing same-day packages of care" and "We have a great relationship with STSS and have open communication channels to ensure pertinent information is shared between our respective services."
- The service was regarded as a model of excellence by other providers. For example, another local authority had recently contacted the service to see how they could replicate it in their area.
- The service was a very important part of the local community. For example, managers engaged with weekly GP Partnership meetings to discuss clients that were struggling in the community and may require some short-term care or therapy equipment.
- The service had instigated a Specialist Falls meeting at which hospital and council staff meet to review best practice guidelines. As a result, STSS was invited to support the development of the Northumbria Healthcare Community Trust 'falls strategy', which will be a 5-year strategy to guide services and staff in the community in the best falls prevention and management.

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

- The provider valued and promoted quality engagement with staff and people who use services. The managers used a self-reporting tool for people to measure the impact of the support they had received with their reablement goals. The managers also requested people to complete a survey about the standard of their care at the end of their package. The results were very positive.
- Staff also completed an annual survey. Action plans were developed in collaboration with staff from their survey responses to drive forward any identified service improvements.

- Staff said they felt valued by the organisation and described the management team as "very approachable". Their comments included, "I have never known a management team be as supportive as they are" and "I always feel listened to and that my views are taken on board."