

## Scope

# Scope Inclusion East Midlands

## Inspection report

Concord House  
Nottingham Road  
Nottingham  
Nottinghamshire  
NG7 7FF

Website: [www.scope.org](http://www.scope.org)

Date of inspection visit:  
07 February 2017

Date of publication:  
23 March 2017

## 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

This inspection took place on 7 February 2017. Scope Inclusion East Midlands is a domiciliary care service which provides personal care and support to children and young adults in their own home. On the day of our inspection five people were using the service.

At the last inspection, the service was rated Good. At this inspection we found the service remained Good.

People continued to feel safe and staff ensured that risks to their health and safety were reduced. There were sufficient staff to meet people's needs in a timely manner and systems were in place to support people to take their medicines.

People were 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 supported this practice. Staff received a detailed programme of training which was relevant to the needs of the people they cared for. People were supported to eat and drink enough to maintain good health.

There were positive and caring relationships between people and the staff who cared for them. Staff promoted people's right to make their own decisions and respected the choices they made. People were treated with dignity and respect by staff who understood the importance of this.

People received person-centred and responsive care from staff who had a clear understanding of their current support needs. Detailed care plans were in place which underpinned the care that was provided. People knew how to make a complaint and there was a clear complaints procedure in place.

There was an open and transparent culture which enabled people and staff to speak up if they wished to. The management team provided strong leadership and a clear direction to staff. There were robust quality monitoring procedures in place.

Further information is in the detailed findings below.

## 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 remains Good

### Is the service effective?

Good ●

The service remains Good

### Is the service caring?

Good ●

The service remains Good

### Is the service responsive?

Good ●

The service remains Good

### Is the service well-led?

Good ●

The service remains Good

# Scope Inclusion East Midlands

## **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.

We visited the service on 7 February 2017, this was an announced comprehensive inspection. We gave 48 hours' notice of the inspection because we needed to be sure that the registered manager would be in. The inspection team consisted of one inspector.

Prior to our inspection we reviewed information we held about the service. This included information received and statutory notifications. A notification is information about important events which the provider is required to send us by law. We contacted commissioners (who fund the care for some people) of the service and asked them for their views. In addition, 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.

During our inspection we spoke with three people who were using the service, two relatives, two members of care staff, a team leader, the service manager and the registered manager. We looked at the care plans of three people and any associated daily records such as the daily log and medicine administration records. We also looked at a range of records relating to the running of the service such as satisfaction surveys and quality audits.

# Is the service safe?

## Our findings

The people we spoke with told us they felt safe when staff were providing care in their home. One person said, "Yes I do feel safe." The relatives we spoke with also felt that their loved ones were safe when being cared for by Scope Inclusion staff. One relative said, "I have absolutely no concerns. I know [my relative] is safe with the staff."

People were supported by staff who knew how to keep them safe and what action they would need to take to report any concerns. The provider ensured staff were provided with the required skills and training to understand their role in protecting people. There were clear procedures in place for staff to follow when they wished to report anything of concern.

Risks to people's health and safety were appropriately assessed and well managed. For example, staff used a hoist to assist one person to get in and out of their bed due to the risk of them falling. The person told us that staff provided this support in a safe way and that they had been involved in the risk assessment of this task. Each person's care file contained a set of risk assessments which also detailed the steps that should be taken to mitigate any risks whilst also supporting the person to be as independent as possible.

The people and relatives we spoke with felt that there were sufficient staff to meet their needs in a timely way. One relative said, "We have never had any issues with staff not turning up. It has been a consistent group of staff as well." The service manager ensured that sufficient staffing hours were available to meet the hours of support that they were contracted to provide. We saw that there were enough staff employed to cover the rota each week and ensure that staff could take any planned leave and rest days.

At the time of our inspection only one person was supported by staff to manage their medicines. We saw that appropriate systems were in place to ensure that the person received their medicines as prescribed and at the correct time. The registered manager told us that they were looking into developing a new medicines administration record as they had found the existing records were not always being completed correctly.

## Is the service effective?

### Our findings

People were cared for by a staff team who felt well supported and received a comprehensive range of relevant training. One person told us, "Yes I do think staff are very well trained." The relatives we spoke with also praised the skills and knowledge of the staff that supported their loved one. The staff we spoke with told us that they were impressed with the level of training and support they received. One staff member said, "I've never had training like this before, it has been really good." The records we looked at showed that staff received relevant training as well as regular supervision with their line manager.

Staff ensured that they asked for people's consent before providing any care and this was confirmed by the people and relatives we spoke with. People were involved in the creation of their care plan and we saw that, where possible, the person had signed their care plan to confirm their consent. If the person was not able to do this, their relative had provided consent on their behalf. Systems were in place to ensure that, where people's capacity to make a decision was in doubt, appropriate assessments were carried out. This ensured that staff were acting in people's best interests should the person not be able to make the decision for themselves.

People were supported to eat and drink sufficient amounts to maintain their health. Where staff assisted people with meal preparation there was clear guidance available about the person's likes and dislikes as well as the way in which food should be prepared. The staff we spoke with could clearly describe how they assisted people with their meals and also received specialist training to assist people who received their nutritional intake in different ways.

Whilst staff were not responsible for making healthcare related appointments for people, we saw that they liaised appropriately with healthcare professionals. The staff we spoke with also told us that they would report any healthcare concerns to the service manager and that they would contact the most appropriate person to ensure that the concern was dealt with.

## Is the service caring?

### Our findings

People had developed positive relationships with the staff who cared for them. One person told us that they had a consistent team of staff and that had helped them get to know and trust staff. The relatives we spoke with were also complimentary about the staff who cared for their loved one. One relative said, "The staff know [my relative] well and that helps make the most of their time together." During our visit to the location address we spoke with two people who were being supported by staff. We observed that staff clearly knew how best to engage with people and that they enjoyed sharing a laugh and joke together, when this was appropriate.

Staff respected the choices people made and the importance of this was clearly embedded in people's care plans. One person's care plan detailed that, whilst they were not able to communicate verbally, they expressed their wishes in other ways. The care plan went on to describe the different ways in which the person communicated, such as by using sign language or facial expressions. The staff we spoke with understood this and were passionate about the importance of giving people choices and respecting their decisions.

One of the people who used the service also attended a day service provided at the registered location address. They told us that they had been appointed as a service user 'dignity champion' and spoke up on behalf of other people using the day service. A dignity champion is someone who promotes good practice regarding providing dignified care and also speaks up about any poor practice. Taking on this role had helped the person to develop more self-confidence and they told us they enjoyed carrying out this role on behalf of other people using the service.

People were treated with dignity and respect by staff who clearly understood the importance of this. The staff we spoke with clearly described the ways in which they would ensure a person's privacy was maintained whilst carrying out any personal care. There was detailed information in people's care plans about any personal care that needed to be carried out and how this should be done. This took into account people's wishes and preferences.

## Is the service responsive?

### Our findings

The people we spoke with told us that they were happy with the care they received and that it was responsive to their needs. The relatives we spoke with were also satisfied with the care provided to their loved one. One relative said, "They have been great, we haven't had any problems for a long time." Staff had developed detailed care plans in conjunction with people or their relative and these clearly described what support people needed. In some areas, detailed step by step information was given where care had to be provided in a specific way.

The staff we spoke with had a detailed understanding of people's care needs and how these had changed over time. Staff completed a daily record to confirm the care and support provided during each call. People or their relative had the opportunity to contribute to the daily record, or just to check and sign it off. A more detailed daily record had been developed with one of the people who used the service as they had wanted to have a more person-centred and detailed record. People were sometimes supported with activities or trips to places in their local community. This helped people to maintain their interests or visit places they enjoyed.

There was a clear complaints procedure in place and the people and relatives we spoke with knew how to complain. One relative said, "I've not had to make a formal complaint, but I would be very comfortable doing so. I have discussed a few issues and they have been resolved quickly." People and their relatives were provided with a copy of Scope's complaints procedure when they first started to use the service. There had not been any formal complaints made since our previous inspection, however people were regularly reminded of their right to lodge a complaint. A number of compliments had been received and we saw that these were shared with staff.



## Is the service well-led?

### Our findings

The people and relatives we spoke with told us that the service maintained a positive and open culture. One relative said, "I would be comfortable speaking with any of the staff or the manager about anything." The staff we spoke with also commented positively on the ethos of the service, commenting that it was transparent and honesty was encouraged. The staff we spoke with said that they would have no hesitation in reporting anything of concern or if they had made a mistake. Minutes of staff meetings also showed that the service manager gave staff the opportunity to speak up and also make suggestions about how the service could be further improved.

There was a clear management structure in place and the registered manager and service manager led by example. 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 service manager was responsible for the day to day operation of the service and the registered manager provided support and oversight. The staff we spoke with understood their roles and what they were accountable for. They told us that the management team provided clear leadership and led by example as well as listening to their views. The provider ensured that sufficient resources were available to enable to smooth day to day running of the service.

People and relatives were regularly asked for their views on the quality of the service being provided. Satisfaction surveys were distributed on an annual basis, the latest batch had been distributed shortly before our inspection. The results of the previous survey demonstrated that there continued to be a high level of satisfaction with the service provided. There was a robust quality monitoring system which allowed the provider to assess the service provision and this ensured that any required improvements were made. For example, this had identified that medicines records were not always being correctly completed and work was due to start on producing a clearer record for staff to complete.