

Luton Borough Council

Luton Borough Council Reablement Service

Inspection report

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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: Luton Borough Council Reablement Service is a domiciliary care service based in Luton. The service provides rehabilitation and care to adults over the age of 18 in their own homes. In general, people stay with the service for no longer than six weeks following discharge from hospital or referral by local community teams.

People's experience of using this service:

The service ensured each person was treated as an individual with personal preferences being at the forefront of the care they received. Staff treated people kindly and communicated effectively. During our home visits staff were observed to be respectful, kind and caring. Staff promoted people's dignity and privacy.

There were robust recruitment checks in place which included DBS (disclosure and barring checks) and past employment history to ensure the staff were safe and suitable to work in this type of service. Staffing levels were appropriate to meet people`s needs in a timely way.

Care plans were in place when people started using the service. The support plans were reviewed weekly and risk assessments were developed for each identified risk to people`s health and wellbeing. Staff understood people`s care needs and encouraged people's independence.

There were effective systems in place for managing medicines. Medicines audits and medicine administration records were correctly completed. Competency assessments were in place to promote best practice.

Staff were supported with regular training and supervision to enable them to support people effectively. People told us they felt the care and support they received was safe. Staff received training in safeguarding and they knew how to report their concerns internally and externally to safeguarding authorities.

People were supported with their food and drinks where required.

People had good access to healthcare as needed and staff had a good understanding of people's health needs. People and relatives told us they were happy with the care provided by Luton Borough Council Reablement Service.

Rating at last inspection: Good (report published 27 April 2016).

Why we inspected: This was a planned inspection to check that the service remained Good.

Follow up: We will continue to monitor intelligence we receive about the service until we return to visit as

per our re-inspection programme. If any concerning information is received we may inspect sooner.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

The service was safe

Details are in our Safe findings below.

Good ●

Is the service effective?

The service was Effective

Details are in our Effective findings below.

Good ●

Is the service caring?

The service was Caring

Details are in our Caring findings below.

Good ●

Is the service responsive?

The service was Responsive

Details are in our Responsive findings below.

Good ●

Is the service well-led?

The service was well led

Details are in our Well led findings below.

Good ●

Luton Borough Council Reablement Service

Detailed findings

Background to this 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.

There was a service manager in post however they were not registered with the Care Quality Commission. This means that the provider is legally responsible for how the service is run and for the quality and safety of the care provided. However, the service manager was planning to submit their application to register with CQC.

Inspection team: One inspector carried out this inspection.

Service and service type:

Luton Borough Council Reablement Service provides support over a six-week period to enable people to regain their independence. This service is a domiciliary (home care) care agency. It provides personal care to people living in their own houses and flats.

Notice of inspection:

This inspection was announced. Inspection activity started on 4 March 2019 and ended on 7 March 2019. We visited the service on 5 March 2019 to meet the service manager and staff and to review care records and other documents.

What we did:

Before the inspection we considered all the information we held in relation to the service, including statutory notifications. This included the Provider Information Return (PIR). This is a form that requires them to give some key information about the service, what the service does well and improvements they plan to make. This information helps support our inspections. We also requested people and their relatives contact

details, so we could talk with them about the service they received.

During the inspection:

- We spoke to one care coordinator and a senior coordinator and the service manager.
- We reviewed information from three care files which included all aspects of care and risk assessments. which included medicine records.
- We looked at staff support arrangements including supervisions, and training records.
- Records of accidents, incidents, complaints and audits.

Following the inspection:

We reviewed information we requested such as training documents. After the office inspection we visited two people's homes to talk with them and staff who provided their support. Overall, we spoke with seven people, two relatives and six staff.

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.

- Staff supported people safely and demonstrated they knew how to protect people from abuse.
- One person told us, "I feel comfortable with staff."
- Staff had training in safeguarding and knew how to report any concerns.

Assessing risk, safety monitoring and management

- People had individual risks assessments to mitigate and reduce the risk of harm. These were kept under regular review.
 - People's risk assessments gave guidance to staff in how to mitigate risks in areas such as moving and handling, medicines and other identified risks to people's well-being.
- Risk assessments allowed for positive risk taking and promoted people to stay independent. Staff encouraged people to take the steps required for them to progress in the six-week enablement program. This was done in a way that was safe but supported people's recovery. For example, providing the right equipment and support.

Staffing and recruitment

- Robust recruitment procedures were in place which ensured staff were suitable to work in this type of service.
- Staffing levels were appropriate to meet people's needs. People and relatives told us, they felt there were enough staff and people received their visits on time.
- When staff were running late there were protocols in place that meant people were informed. One person said, "Staff always arrive on time." However, some people said they were not always contacted if staff were running late.
- The provider used an electronic system to monitor visits This enabled an overview of when visits were completed. There was an alert system that made the coordinators aware of any late visits to ensure everyone received their visits.

Using medicines safely

- People were supported with their medicines safely by staff who had been trained. Medicine administration records were correctly completed.
- There were systems in place for auditing medicines given daily and the related medicine records.
- There were competency assessments with staff and observed practice.

Preventing and controlling infection

- Staff used personal protective equipment when supporting people with personal care. Gloves and aprons were available to staff.

Learning lessons when things go wrong

- The manager shared lessons learnt with staff when things went wrong to help prevent reoccurrence. Staff discussed "topic of the month" to improve learning. Recent topics included safeguarding and dignity and respect.

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.

- Social workers completed people's Initial assessments before they started using the service. The providers assessment followed this to ensure people's needs could be met and discussed.
- People were involved in the assessment and development of their care and support plans.
- Staff respected people's choices. Staff obtained people's consent before supporting them.
- Staff were knowledgeable about people's preferences, wishes and how they liked to be helped.
- Care plans contained information about how to support people's needs, these were reviewed weekly.

Staff support: induction, training, skills and experience

- Staff received a thorough twelve-week induction when they started working at the service.
- Staff received an ongoing training programme which met the requirements of the role and supported safe practices.

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

- People were supported with their meals where required. One person said, "Staff helps with my meals." Another said, "Staff always make me tea and asks me if there is anything else I need."

Supporting people to live healthier lives, access healthcare services and support

- The service worked closely with the multidisciplinary team; this was a team made up of other professionals to ensure the person received the support and equipment required to enable them to remain independent at home. One person said, "Staff try and get me to do what I can for myself, they encourage my independence."

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

- 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 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.
- We checked whether the service was working within the principles of the MCA and we found they were working within the legal requirements.

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

- Staff provided good care and responded positively to people's individual wishes and preferences.
- People told us staff were kind and caring. Staff treated people with patience and communicated with people at their own pace. Staff developed kind and caring relationships with people. One person said, "Staff make me laugh, I enjoy the visits."
- Staff spoke with people in a supportive, caring way and promoted their independence. One person said, "I am very happy, [staff] are so kind they do more than they have to. You don't have to ask them, they always ask me what I want. They go the extra mile."

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

- People were supported to make decisions about their care.
- People had contact details to enable them to contact the office staff should they required. Staff routinely asked if people were happy with the support they received. One staff member said, "I always ask people what they want and check if there is anything else I can do." Another staff member said, "Choice is important, you have to ask what [people] want."

Respecting and promoting people's privacy, dignity and independence

- Staff demonstrated they were passionate about ensuring that individual needs were met in a compassionate way.
- Staff maintained and promoted people's dignity and privacy. Staff were able to describe how they maintained people's dignity.
- People felt their privacy and dignity was promoted. Staff told us they communicated what they were doing and always checked they had people's consent. Where personal support was needed this was completed in a private and dignified way.
- People`s confidential health and medical information was stored securely to ensure it remained confidential.

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

- Care plans detailed people's preferences, likes and dislikes. For example, how the person liked their care delivered and what was important to them.
- People's progression was reviewed weekly to ensure they were regaining their independence. If required other steps were taken to support people's needs and promote their well-being. People we spoke with confirmed they were supported with their independence.
- People told us they were happy with the care and support they received. One person said, "Staff are really helpful." One staff member said, "I always promote people's independence, encourage people to do what they can. People need to regain their confidence."

Improving care quality in response to complaints or concerns

- Staff were responsive to any concerns raised by people.
- People knew how to complain if something was not right. One person said, "I know who to contact if I have a complaint." Another person said, "I have contact details in my folder if I need to speak with anyone."
- There were processes in place to respond to any concerns people had.

End of life care and support

- People's end of life preferences was not part of the service provided. Luton Borough Council Reablement Service supported people for six weeks to enable them to regain their independence; this was achieved through a multidisciplinary team approach that ensured people had the support and equipment needed. People preferences and choices were documented.

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

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

- Staff were passionate about providing high quality care and achieving good outcomes for people.
- The provider worked with multidisciplinary teams to ensure people were supported to regain their independence where possible.

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

- The manager and care coordinators completed a range of audits and quality assurance checks to make sure systems and processes were being used effectively. These included reviewing care records, health and safety and medicines.
- The provider completed Quality Assurance Framework audits every three months, to identify any areas that required improvement.
- We saw that the audits were effective, and any shortfalls resulted in an action plan to address issues found.
- The staff team had clearly defined roles and felt supported by the manager.

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

- People and staff gave very positive feedback about the management team. One staff member said, "The new manager is very approachable, [they] told us that we can come to see them any time."
- Staff told us they loved their job and felt supported by the office team. We observed the communication by the office staff when they responded to telephone calls from people. This was completed with professionalism using a caring and considerate approach.
- People, relatives and staff feedback was sought by the provider who used the feedback to good effect.

Continuous learning and improving care

- There were regular meetings with staff, where issues could be discussed to support continued learning. Staff also received guidance and further learning during supervisions.

Working in partnership with others

- There was evidence of working in partnership with others to help provide person centred holistic care to people. The service enablement supported people to regain their independence over a six-week period. This was monitored and reviewed weekly to ensure the right support was in place. Where required other support was discussed and organised to ensure, going forward, people received the appropriate care for their needs.

