

Halow Care Community Interest Company

The Halow Care Agency

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?	Requires Improvement ●

Summary of findings

Overall summary

The inspection of the Halow Care Agency was undertaken on 29 September and the 5 and 7 October 2016. We gave 24 hours' notice of the inspection to ensure the registered manager and other senior staff were available at their office to talk with us.

At our last inspection in March 2014 the provider met the regulations we inspected.

The Halow Care Agency supports young people and adults aged 16 to 35 years of age who have a learning disability and are living within the county of Surrey. Services provided include shared supported living houses and staff known as buddies providing domiciliary care and support to young people to access the community, develop life skills and achieve their goals. There were approximately 42 young people using the service and support or personal care was not being provided to anyone under the age of 18 at the time of our inspection.

The service had a registered manager in post. 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.

Throughout this report people who use the service are referred to as young people and the staff who provide support are referred to as buddies.

Young people using the service told us they felt safe and that buddies treated them with dignity and respect. They were happy with the support provided which met their individual needs.

The service empowered young people to take control of their own care and support. People were supported to plan and achieve their personal goals including building their independent living skills. Buddies said, and we saw that, the service was focused on putting young people at the centre, and in control, of their support.

People were supported by buddies who were trained and well supported in their job roles. Each buddy had been safely recruited, had access to regular training and supervision and felt well supported by the management team. The staff said they felt valued by the organisation.

Medicines were administered in a safe way. Buddies received training and a new competency framework was in place to make sure they understood and followed safe procedures for administering medicines.

Buddies and other staff had received training in the Mental Capacity Act (MCA) and understood the importance of gaining people's consent before assisting them.

The systems in place to monitor the quality of the service required improvement. Quality assurance

processes were not fully embedded and consistent. The provider organisation did not have the necessary systems and governance in place to ensure full oversight of the service and drive improvement where required.

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.

Buddies completed training in safeguarding adults and knew how to recognise and report suspected abuse.

Any risks to individual safety and welfare were identified and managed to help keep them and others safe.

Medicines were managed safely.

Is the service effective?

Good ●

The service was effective.

People's choices were respected and buddies understood the requirements of the Mental Capacity Act 2005.

Buddies received training and support to help them carry out their job role effectively.

Is the service caring?

Good ●

The service was caring.

Buddies respected and worked to support young peoples choice and independence.

Young people we spoke with were happy with the support they received and felt buddies respected their privacy and dignity.

Relationships between buddies and young people using the service were positive.

Is the service responsive?

Good ●

The service was responsive. Buddies and other staff were knowledgeable about people's support needs.

Young people were supported to take part in activities and to maintain contact with family and friends.

Suitable arrangements were in place for dealing with concerns and complaints.

Is the service well-led?

Some aspects of the service were not well led.

There was an experienced management team who were visible and approachable. Buddies felt supported in their job roles.

The systems in place for quality assurance required improvement to fully ensure the quality of service provided.

Requires Improvement ●

The Halow Care Agency

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.

Prior to our inspection we reviewed the information we held about the service. This included the Provider Information Return (PIR) which is a form that asks the provider to give key information about the service, what the service does well and improvements they plan to make. We also reviewed any safeguarding alerts and outcomes, complaints, previous inspection reports and notifications that the provider had sent to CQC. Notifications are information about important events which the service is required to tell us about by law.

This announced inspection was carried out by one inspector and took place on 29 September, 5 and 7 October 2016.

We spent the first two days at the office of the care service. On the third day of the inspection we visited a supported living service and spoke to young people about the support they received.

We met with four young people, the registered manager, the Head of Business Support and Development, the buddy service manager, the interim care advisor and five buddies. We looked at records held in the office relating to people's support and the day to day running of the service. These included support plans, risk assessments, policy and procedures and recruitment records.

Feedback was additionally received by telephone and email from three relatives of young people using the service.

Is the service safe?

Our findings

Young people told us they felt safe being supported by consistent staff who knew their needs well. Each young person said that staff were kind and treated them well. One young person said, "I like it, it's fun living together." Another young person told us, "I would recommend them if you need support or anything."

We saw there were sufficient numbers of staff available to keep people safe and that staffing levels were determined by people's needs. For example, numbers of buddies in the supported living services varied according to people's support needs and gave some flexibility to provide individualised care. The buddies spoken with told us that staffing levels were safe with cover for absences provided by consistent agency staff where possible.

Assessments were completed to identify and manage any potential risks to young people and buddies. A senior staff member would meet with the young person and their relative or representative as appropriate to undertake a full support assessment. This identified any areas of risk such as the person's health needs or safety using public transport. Buddies spoken with were positive about enabling people and promoting their independence whilst also considering any known risks when supporting them. They talked about how they supported young people with daily tasks such as personal care and preparing meals, supervising them where necessary but with the goal of enabling them to be as independent as possible. Where risks had been identified, we saw individual assessments were carried out documenting the control measures required to help keep the young person safe. Each identified risk had a rating which looked at the likelihood of the risk occurring and the potential hazards to the individual.

There was a procedure for safeguarding adults and information about this was supplied to buddies during their induction. All of the buddies we spoke to said they had received training in safeguarding adults and records confirmed this. They knew they should speak with the senior staff if they had any concerns and felt able to do this. There was appropriate information about recognising abuse and what to do available for people using the service. The service had responded appropriately to any allegations of abuse, working with the local authority to investigate concerns and take action to keep people safe. They had reported concerns and kept CQC informed of safeguarding alerts and the action taken regarding these. Revised procedures were in place with improved records around people's finances being kept therefore reducing the risk of financial abuse.

Some young people required support from staff to take their medicines safely. Each person's support needs were assessed with support provided as required by staff to help them take their medicines as prescribed. One young person confirmed that staff supported them to take their medicines and we saw records to support this. Medicines were safely stored in the supported living service we visited and records were kept of the medicines administered.

It was however noted that further work was required to make sure that the provider's governance of the service was more structured and maintained through documented visits and audits. We were unable to see evidence of regular audits of people's medicines and finances by senior staff.

There were procedures for responding to any emergencies or untoward events and these were understood by the buddies. An on-call system was in operation for staff to contact out of office hours. One buddy told us, "You can ring the on-call for advice and support, there's always someone there." The other buddies we spoke with said they felt supported by senior staff if they needed advice or guidance in or out of office hours.

Accidents and incidents were recorded and were reviewed by senior managers to make sure that action had been taken as appropriate and any learning applied for the future. A new recording form had recently been introduced to make sure this process was documented.

Safe recruitment practices were in place to help protect people from the employment of unsuitable staff. We looked at the recruitment information kept for five members of staff. Each record contained evidence that criminal record checks had been carried out along with employment references and proof of identity documentation.

Is the service effective?

Our findings

Young people told us that the buddies who provided their support were trained and competent. One young person told us, "I like the staff." Another young person said, "My buddy has done well, she listens to me."

One relative told us, "We are satisfied with the quality of the buddies chosen but we have, at times, experienced gaps in provision due to Halow finding it difficult to recruit sufficient buddies." Another relative gave us the same feedback saying there had been gaps in provision due to a shortage of available buddies. This was acknowledged as an issue by senior staff and revised recruitment strategies had been used with some new buddies having recently been recruited.

A new buddy was seen to be completing their online training including safeguarding and medicines management in the office during our visit. New induction procedures had been introduced to make sure that all buddies achieved the competencies required by the Care Certificate. The Care Certificate is an identified set of 15 standards that health and social care workers adhere to in their daily working life. New buddies received three days of classroom training and then shadowed existing staff until they were assessed as being able to work alone. A buddy told us, "I have shadowed four sessions with young people, the people here are supportive, it's been fun."

We saw buddies received training to help them do their jobs effectively. The training programme, comprising of distance learning and classroom based sessions, was being reviewed to make sure it provided buddies with the skills required to meet people's needs. Individual training records were kept to help ensure the training remained up to date and these were being monitored by the service. Training addressed areas such as moving and handling, safeguarding, infection control, medicines and first aid. More specialist training was also provided for areas such as epilepsy, autism and the Mental Capacity Act (MCA). Personal development plans were being put in place for each buddy at the time of our inspection. One buddy told us, "It has been a bit sporadic" but acknowledged the improvements in training in recent months. Another buddy commented, "I know the training is being worked on – there is now more professional development."

Buddies received effective supervision to support them in their roles. Supervision was a regular one-to-one support meeting between each buddy and a senior member of staff to review their work role, current responsibilities and development needs. It was noted that records of supervision sessions varied as to frequency between buddies and this was discussed with the registered manager at the time of inspection. Regular meetings and annual appraisals also provided opportunities to identify people's development needs. This was in addition to the informal day-to-day contact with the management team.

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.

Buddies we spoke to confirmed they had received training and demonstrated a good understanding of the MCA. The interim care advisor was meeting with lead buddies to discuss MCA assessments at the time of our inspection. We saw decision specific assessments had been completed for people where required, for example, around people taking medicines. One buddy told us, "If they don't want to do something they don't." Another buddy said, "We always give opportunity for them to make choices and do it independently."

The service worked with family members and healthcare professionals to make sure young people's health was maintained. Records showed that buddies were provided with information on people's health needs so they could monitor these effectively. Buddies told us that they would always report any concerns with people's health or behaviour. One staff member said, "Things are immediately flagged. They are very good at picking up when things are not right." Care plans were in place around individual health needs such as epilepsy. We saw hospital passports were available in care files should the young person be admitted to help other healthcare staff communicate and treat the young person effectively.

Is the service caring?

Our findings

Buddies spoke with kindness and respect when speaking about young people. They knew the people well and were able to tell us what was important to each person when they were being supported. For example, the way they supported them with personal care or to cook their meals. The staff we spoke with were confident that they were providing good quality care. One buddy told us, "The support is excellent." Another staff member commented, "The support is spot on, young people are always given choice."

A relative of a person using the service told us, "I am in no doubt about the passion, dedication and hard work of the Halow staff." Another relative said, "I have no complaints about the staff." A third relative commented, "I can't fault them."

The staff told us the service was designed around, and guided by, the needs of the young people using the service. They told us how they met people's care needs and helped their independence by encouraging them to do as much for themselves as they could. One buddy said, "it's brilliant, a very personalised service for the young people." The buddies we spoke with were knowledgeable about people's needs, preferences and routines.

During our visit to a supported living service, the atmosphere was relaxed and homely. People were able to come and go as they pleased and were clearly relaxed around the buddies, sharing jokes and making plans for the day ahead. We observed buddies working with people, upholding their dignity and independence. For example, always asking for their opinion and helping them to make informed choices. There was a strong emphasis on putting the person in control and building their confidence and skills. A buddy told us, "I do like the fact that the young people are always in the driving seat, we are doing that."

We noted that the staff in the office and the registered manager knew many young people well and were able to talk about their individual support needs. Support assessments highlighted information about specific needs such as language, cultural or dietary needs. For example buddies were reminded about how to effectively communicate with one person in their support assessment. The care documentation we looked at also included information about the young person's own interests and tips to help buddies work positively with each person including their use of technology such as mobile phones and tablets.

Regular house meetings were held to check in with young people living in the supported living services and obtain their views. The meetings were used to make sure people were happy with the support provided.

The service had a confidentiality policy and procedure that helped protect people's privacy. Confidentiality was included in the induction training for new staff with further guidance made available in a staff handbook.

Is the service responsive?

Our findings

People told us they were happy with the support they received from buddies. One young person told us that they received support from the same buddy saying, "She's done well." Other young people told us how buddies supported them with their daily living activities and this was done in the way they wanted it.

People were involved in the way their support was provided. Buddies told us that they had regular discussions with people to discuss their support and make sure their needs were being met. The support provided was documented against personal development goals in a written 'goal tracker' for each young person. Both young people and buddies were able to tell us about goals they were working towards. Examples included becoming more independent when out in the community, using public transport and finding a job. We observed one buddy discussing a possible new goal with a young person, responding to a comment they had made about something they wanted to do in their daily life.

Support assessments were completed for each young person detailing the support they required to meet their individual needs. For example, how they liked buddies to support them and the possible risks that they needed to be aware of. Individual plans were completed around particular support needs such as epilepsy and behaviour that could require a response from the buddy.

Young people told us that the service helped them to follow their interests, take part in social activities and keep in contact with their family and friends. Some young people told us about the 'Building Futures Group' they attended run by Halow. This provides life-skills training to prepare young people for independence-developing self confidence, leadership and team work. Buddies talked about working in partnership with family members to effectively support young people with their individual goals.

Young people said that they felt able to raise any issues with buddies or the managers if they had any concerns or complaints. One young person said, "I would speak to the managers here, they sort it out." A computerised system was used to log any complaints and monitor progress to help ensure they were resolved in a timely manner. An easy read complaints procedure had been developed and buddies confirmed that these had been given out to young people. A relative of a young person said that the service had been responsive to them when they had raised any issues.

Is the service well-led?

Our findings

People using the service said they were happy with the service provided and how it was managed. One relative of a young person said, "We are really happy with them, it has worked out well." Another relative told us, "Its working well, we are happy." One relative said that they would welcome more consistent communication from the organisation to make sure they were getting up to date information about the service and any developments.

Managers and buddies had a clear understanding of the organisational vision and values for the service and spoke positively about the support provided. One individual described the organisation as "absolutely brilliant, so person centred." All of the staff we spoke with were confident about the quality of service provided and said they felt valued by the organisation.

Buddies spoken with and other staff reflected on how the service was improving under the current management team. There was a new organisational structure in place which provided clear lines of accountability and responsibility. A new buddy service manager had been appointed along with an interim care advisor in order to effectively support the registered manager, acknowledging the increased amount of support hours now provided by the Halow care Agency. A buddy told us, "Things have improved, they are tightening everything up."

The registered manager provided a regular written report to the Trustees on progress made by the service including safeguarding, referrals, staffing and training.

The interim care advisor had completed a comprehensive audit of the service in August 2016 focusing on compliance with CQC standards. A written report and action plan had been produced using a traffic light system to prioritise the work required. We saw that action had already been taken to address areas identified as higher risk.

There was however no documented evidence of any other regular visits, audits or surveys to maintain oversight of the service and ensure its quality. Buddies spoken with were unaware of any regular formal documented visits or quality checks from senior staff or Trustees. The registered manager stated that feedback tended to be received informally from young people coming into the office or from their family.

The registered manager had previously developed a quality checking system based on CQC standards however this had not yet been implemented. Plans were also being developed to strengthen the board in the area of care expertise in order to improve the governance and oversight within the organisation.

The above shortfalls meant the safety and quality of the service was not always being appropriately audited and assessed. This was a breach of Regulation 17 of the Health and Social Care Act (Regulated Activities) Regulations 2014.

Compliments were recorded by the service and we saw recent feedback from relatives of young people

using the service. One relative said, "[The young person] really enjoys the sessions and we feel they benefit from attending." Another relative commented, "Many thanks for the continued support, we are really pleased with their progression."

The service had recently been nominated to receive a mayor's care award for promoting and creating services for young people in the borough to access.

This section is primarily information for the provider

Action we have told the provider to take

The table below shows where regulations were not being met and we have asked the provider to send us a report that says what action they are going to take. We will check that this action is taken by the provider.

Regulated activity	Regulation
Personal care	Regulation 17 HSCA RA Regulations 2014 Good governance Effective systems were not fully in place to ensure that the quality of service is assessed, monitored and improved.