

Stockton-on-Tees Borough Council

OneCall

Inspection report

The Square
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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

One Call provide sensors into people's homes that are linked to a unit which is monitored 24 hours a day. If a person requires assistance for example if they have had a fall, the sensors alert One Call who will respond and support the person. The service provided this support to about 5000 people. However, they only provided personal care to, on average about ten people a month. The Care Quality Commission looked at the personal care side of One Call.

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

People were protected from abuse by staff who understood how to identify and report any concerns. The risks to people's health, safety and welfare had been assessed, recorded and plans put in place to reduce these. Staffing levels enabled people's needs to be met safely.

Staff were recruited safely and received appropriate training and support to enable them to carry out their role effectively.

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. People, and where appropriate their relatives, were involved in decisions about their care.

Staff were caring and treated people with kindness and respect.

Information was available to guide staff on the most appropriate way to attend to people. People were confident to raise any concerns.

Staff were supported by the registered manager. Quality assurance systems were completed.

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

This service was registered with us on 14/11/2018 and this is the first inspection.

Why we inspected

This was a planned inspection based on the date of registration.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information 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 ●

OneCall

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 Care Act 2014.

Inspection team

The inspection team consisted of one inspector.

Service and service type

One Call provide a rapid response service to people living in their own home.

The service had a manager registered with the Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection

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

What we did before the inspection

The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report.

During the inspection

We spoke with two people who used the service. We spoke with four members of staff including the registered manager, senior officer and officers.

We reviewed a range of records which included three staff files in relation to recruitment, supervision and

training. Client information and risk assessments. A variety of records relating to the management of the service including policies and procedures were reviewed.

Is the service safe?

Our findings

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

This is the first inspection for this newly registered service. This key question has been rated good. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management

- Before a person received a service an assessment of risks in their environment was undertaken. This was to identify potential hazards in a person's home such as uneven floors or any safety concerns.
- The first time a person raised an alarm for assistance, two staff always attended. This was to ascertain that staff could access the property safely without risks. After this a decision would be made as to whether one or two staff were needed. This was continually assessed at each call and two staff would always attend during the night for their own safety.

Preventing and controlling infection

- Staff had completed infection control and food hygiene training. They followed safe infection control procedures and always wore personal protective equipment (PPE) when entering people's homes.

Systems and processes to safeguard people from the risk of abuse

- Staff were knowledgeable about safeguarding processes and how to raise any concerns, internally and externally.
- People felt safe when the staff from One Call attended to them.

Learning lessons when things go wrong

- All call outs were subject to monthly analysis by the registered manager to look for any lessons to be learnt

Staffing and recruitment

- Recruitment checks had been completed to ensure new staff employed were suitable to work at the service.
- There were enough staff employed to meet the call out demands. The service had bank staff who covered sickness and holidays.

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.

This is the first inspection for this newly registered service. This key question has been rated good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Staff support: induction, training, skills and experience

- The registered manager had started to implement the Care Certificate. The Care Certificate is an identified set of standards that health and social care workers adhere to in their daily working life.
- Staff had the required skills and training to undertake their role.
- Staff received regular support and were given opportunities to review their individual work and development needs through supervision and appraisal.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- The service supported people with many different needs. For example, it could be someone with dementia, at risk of falls, someone requiring rehabilitation and/or reablement or for peace of mind for family member's, so the person could continue to live independently in their own home. Whatever the reason One Call would do an initial visit and install all the equipment a person needed or wanted.
- Staff continued to assess the person's needs at each call. If no calls had been made staff would complete a welfare check to make sure the person was okay and to ensure the equipment was working.

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- Staff worked well with other agencies such as the ambulance service and social workers and in some cases the fire brigade.

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.

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA. When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty. We checked whether the service was working within the principles of the MCA.

- People had signed paperwork to show that they consented to the care and support they were being provided with. Due to the majority of people who signed up to this service, as a 'safety net,' never requesting

a call out, the registered manager was looking into revisiting people's consent during the test calls.

- Training records confirmed that staff had undertaken training in relation to the MCA.

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.

This is the first inspection for this newly registered service. This key question has been rated good. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; respecting equality and diversity

- People who used the service were complimentary about the staff.
- Each person's needs were diverse and individual to them. We saw no evidence to suggest that anyone who used the service was discriminated against and no one told us anything to contradict this.
- Staff had completed training in equality and diversity.

Respecting and promoting people's privacy, dignity and independence

- Staff were very aware of being respectful when entering people's homes.
- People's privacy and dignity was respected when attending to call outs. Staff explained how they would cover someone with a blanket or towel straight away if needed.
- The service One Call provided was all about keeping people independent in their own homes. One relative said, "This gives [person's name] more confidence."

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs.

This is the first inspection for this newly registered service. This key question has been rated good. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- People received support that was focused on individual needs, preferences and what was important to them.
- The registered manager and staff explained that sometimes small things can become very important. For example, a light bulb goes out or the television control needs new batteries. The registered manager said, "These are not 'emergencies', but we don't want someone sitting in the dark or the television may be their sole source of comfort. We will always attend to these if we can, or at least contact the person's family."
- One Call would also support a person's family. For example, if a person rang their alarm, or if a sensor alarmed as well as One Call attending they also contacted the person's family member, if their family member had requested this. If the family member did not drive One Call would go and collect them (if they lived in Stockton).

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- Staff knew how people preferred information to be provided to them.

Improving care quality in response to complaints or concerns.

- The provider had systems to analyse complaints and concerns to make improvements to the service.
- There was a complaints procedure in place. People were supported to raise any concerns and action was taken in response to these.

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.

This is the first inspection for this newly registered service. This key question has been rated good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted person-centred care.

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

- Staff were knowledgeable and enthusiastic about their working roles. All staff had a clear understanding of their job roles and how to provide safe, responsive and effective support.
- The registered manager had systems and procedures to monitor and assess the quality and safety of their service.
- Audits were used to assess standards, check response times and drive up improvements.

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

- We found a positive and inclusive atmosphere within the service with all levels of staff dedicated to providing fast and responsive support. Staff were committed to ensuring people received high quality effective support.

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 management team knew how to share information with relevant parties, when appropriate.
- The registered manager understood their duty of candour responsibilities. They had submitted notifications of specific events in line with legal requirements.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- The provider had established forums in place to communicate with people. This included monthly test calls, surveys and an annual report.
- The service worked in partnership with health and social care professionals who were involved in people's care.
- Regular staff meetings occurred; staff felt listened to and able to contribute.

Continuous learning and improving care

- The management team were committed to continuously improve the service.
- The registered manager was open and responsive to our inspection feedback.