

London Borough of Ealing

Short Break Service

Inspection summary

CQC carried out an inspection of this care service on 20 November 2017 and 21 November 2017. This is a summary of what we found.

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 

This inspection took place on 20 and 21 November 2017 and was unannounced. At our last inspection in February 2017 we found the service had met the requirement actions set at our previous comprehensive inspection in September 2015. We had left the Safe domain as 'requires improvement' and at this inspection we saw that the improvements found in February 2017 had been sustained.

Short Break Service is a 'care home' type of service. People in care homes receive accommodation and nursing or personal care as single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection. The Short Break Service provides periods of respite care for people aged between 18 and 65 years of age with learning disabilities and who may also have profound physical disabilities. The service provides support to approximately 51 people through periods of planned respite throughout the year. At any one time the service can accommodate a maximum of 10 people. The service also supports people who need respite on an emergency basis. All the people who use the service live in the London Borough of Ealing.

The service is required to have a registered manager and there was one 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.

The provider had systems in place to safeguard people from the risk of abuse and staff were confident they would report any concerns. Staff assessed risks for individuals and developed action plans to mitigate identified risks. The provider ensured risk assessments for systems, equipment and safe working practices were in place and that fire safety procedures were available and being followed.

Staff recruitment procedures were followed to ensure only suitable staff were employed by the service, to include any temporary staff who worked there. The numbers and skill mix of staff on duty were determined by the care and support each individual coming into the service required and were appropriate to meet these needs.

Medicines were being well managed and people received their medicines in a safe way. The service was clean and fresh and infection control procedures were being followed to protect people from the risk of infection. Staff reported and incidents, accidents and events, which were discussed so lessons could be learnt and action taken to minimise the risk of recurrence.

People were assessed by the local authority for their care and support needs and the registered manager carried out their own assessment to ensure the service could meet each person's needs. The provider had good practice guidance, technology and equipment in place to enhance the care and support of people.

Staff received the training and support they needed to provide them with the knowledge and skills to care for people effectively. People's nutritional needs and preferences were identified and being met. People had access to the Community Team for People with Learning Disabilities and other healthcare professionals to provide input and support for any healthcare needs they may have whilst using the service.

The environment was suitable and equipped to meet people's needs and provide a well maintained, accessible and homely place for people to stay. 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, relatives, and healthcare professionals told us they were happy with the care and support that staff provided to people. Staff understood people's individual care and support needs and met these in a friendly and caring way. Staff maintained people's privacy and dignity and offered them choices about the care and support they received. Staff knew about people's religious and cultural needs and respected them.

Care records were person centred and clear and were reviewed annually and when there were any changes, to keep the information up to date. People's interests and hobbies were identified and appropriate activities and outings took place. The local authority complaints procedure was available and people and their relatives were encouraged to raise any issues so they could be addressed.

The registered manager was experienced and approachable and was knowledgeable about the people who used the service. They were supportive to people, relatives and staff and there was good team work at the service. Systems for reviewing and monitoring the service and care provision were in place and being followed and people, relatives and staff were encouraged to express their views so improvements could be made.

The registered manager was involved in the local authority reviews of people's care and support to provide input about people's experiences at the service, to feed into the overall picture of the progress of each person and encompass each aspect of their life.

Further information is in the detailed findings in the main body of the report.

You can ask your care service for the full report, or find it on our website at **www.cqc.org.uk** or by telephoning **03000 616161**