Quality Outcomes Report 2015

LENORE OUTREACH
SEPTEMBER/OCTOBER 2015

Name of Service:	Lenore Outreach
Date of Visit:	30th September and 1st October 2015
Manager:	Laura Murray Walton
Person in Charge on day of visit:	Laura Murray Walton
Contracts Team Officers:	Nina Dixon and Kimberley Pennock

Not Met	Poor evidence of outcome being met
Partially Met	Good evidence of outcome being met /majority of evidence is in place but not all
Fully Met	All evidence is in place demonstrating the outcome is fully met

SUMMARY;

Lenore outreach provides independent living support for people who have mental health and/or learning disability needs. The organisation utilises it's residential care establishment, located in the Whitley Bay area of North Tyneside as a 'Head Office'. It was positive to see that people supported have maintained links with people within the residential service. People that were spoken with during the visit were very complimentary of the support provided and stated that they felt that the staff team were approachable and friendly. A Staffing Questionnaire was sent out as part of the Quality Monitoring exercise which was viewed at the time of the visit . This showed that staff turnover had been very low over the past year. There were very few working days which had been lost to sickness and there had been no use of agency staff. Questionnaires were sent to family contacts on behalf of the council by the provider with poor response. The results of the questionnaires were discussed during the visit, one persons' feedback was very positive and another was negative, the issues of which were discussed during the visit.

Main Outcome	Related Outcome Measures	Comments	Outcome	Outcome Score
1. People benefit from Personalised Care	1.1 Effective assessment procedures ensure that placements are appropriate and well planned	This outcome was fully met.	Fully met	2
	1.2 Effective care planning and review processes ensure people receive excellent, individualised care	This outcome was fully met. People we spoke with during the visit confirmed that they felt involved within the support planning process and felt able to view their support plans if they wished.	Fully met	2
	1.3 Positive risk taking ensures people are encouraged to maintain independence	This outcome was fully met. Through discussion with staff and people supported and in addition to support plans viewed, it was clear that the service ensures people are encouraged to maintain independence	Fully met	2
			Score	**6**
supported by t staff	2.1 Comprehensive training procedures ensure staff have access to up to date knowledge and skills that is appropriate to the needs of the clients receiving the service.	Overall this outcome was met. It would be good practice to show the expiry dates of training courses within the training matrix. This could be alongside dates of bookings made to refresh training, which were recorded on the matrix viewed.	Fully met	2

Main Outcome	Related Outcome Measures	Comments	Outcome	Outcome Score
2. People are s... excellen...	2.2 Staff are supported to undertake their duties	This outcome was fully met.	Fully met	2
	2.3 Positive Staff Morale ensures people receive dignified care from a stable and productive staff team	Overall this outcome was met. Staff satisfaction surveys for this year had been disseminated. The results had yet to be compiled and fed into an action plan at the time of our visit.	Fully met	2
			Score	6
3. Management systems ensure an excellent quality of service provision	3.1 Effective quality assurance procedures ensure the manager has a clear overview of service performance	This outcome was partially met. Accidents and incidents were being reported and recorded appropriately. There was an audit of such reports carried out on an annual basis. During the visit advice was given around building on the current quality monitoring systems in place, by collating and auditing information on a monthly basis, which would feed into a monthly report with resulting actions as required. This system could provide The Manager with a clear overview of performance. This would also feed into a formalised version of a schedule for development of the service for the year ahead. It would be good practice to include the views of people outside of the service within quality assurance procedures e.g. carers and family members and other professionals. The process for reviewing policies and procedures within the service could be expanded to show document control and demonstrate that the most recent version of policies would be in current use.	Partially met	1
	3.2 Effective Business Continuity procedures ensure the service can continue to care for people during crisis situations	Overall this outcome was met. Within Head Office there is a Business Continuity Plan, which staff had signed to confirm their awareness of the plan. Although it was evident that staff were aware of on call telephone numbers, where a designated person would take responsibility for guidance in an emergency,it would be beneficial to have documentation within the person's home which would make reference to any individual factors that should be taken into account during crisis situations.	Fully met	2
	3.3Effective recruitment procedures ensure the right staff are employed and people are protected from harm	0	Fully met	2
	3.4 Effective staff management ensures the right numbers of staff are available at the right time and have the right skills, knowledge, experience and competencies to carry out these duties.	This outcome was fully met.	Fully met	2
	3.5 Robust financial procedures ensure people retain as much financial independence as possible and are protected from financial abuse	This outcome was fully met. People spoken with during the visit said that they felt supported by the service in being able to maintain a budget to suit their financial needs. One person said that they had been supported to become debt free.	Fully met	2
			Score	9

Main Outcome	Related Outcome Measures	Comments	Outcome	Outcome Score
4. People benefit from a transparent, consistent and equitable service through effective policies and procedures	4.1 Effective Health and Safety procedures ensure people are cared for in a safe environment	Overall this outcome was met. It was acknowledged that there was a process in place for accidents and incidents to be reported. It would be good practice to link this up to a comprehensive monthly auditing system in respect of Accidents / Incidents, CQC Notifications which enables trends to be identified and relevant action taken.	Fully met	2
	4.2 Equal Opportunities procedures promote equal access to services and protect people from discrimination	This outcome was partially met. Within the review and implementation of policies it would be good practice to demonstrate that Equality Impact Assessments are carried out. Therefore, this would show that consideration has been given to ensure that all policies do not impact negatively on any minority or individual group.	Partially met	1
	4.3 Proactive Complaints and Compliments procedures ensure services are reactive and responsive to people's needs	Overall this outcome was met. Complaints procedures have been expanded within the service to include people being informed of the outcome of complaints. At the time of our visit this process had yet to be embedded into practice.	Fully met	2
	4.4 Confidentiality and data protection procedures ensure that sensitive information is treated with respect	This outcome was fully met. The service is registered under the Data Protection Act 1998, registration number ZA077974.	Fully met	2
			Score	7
5. People experience dignity and respect	5.1 People are able to engage in meaningful activity and occupation	This outcome was fully met. Support Plans viewed on the day of the visit showed that people were being offered opportunities to engage in meaningful activity and occupation. People we spoke with during the visit confirmed that staff offer prompts and encouragement in this area.	Fully met	2
	5.2 People are encouraged and supported to maintain and develop relationships	This outcome was fully met. People we spoke with during the visit explained that the service offers opportunity at Christmas time to have their Christmas lunch within the residential service of the organisation. People felt that this was very positive especially if they were not spending time with family members.	Fully met	2
	5.3 People are proactively involved in services	This outcome was fully met.	Fully met	2
	5.4 People experience Choice and Control in every part of their life	This outcome was fully met. Support Plans and discussions held with people during the visit showed that choice and control for people was being advocated by the service.	Fully met	2
	5.5 Privacy is a valued part of everyday life	This outcome was fully met.	Fully met	2
	5.6 People experience a sense of belonging and being a valued part of the community	This outcome was fully met. People spoken with during the visit explained various services within the community that they had been supported to access; such as educational and work experience placements.	Fully met	2
	5.7 People have timely and appropriate access to information	This outcome was fully met.	Fully met	2
			Score	14

Main Outcome	Related Outcome Measures	Comments	Outcome	Outcome Score
6. People are protected from avoidable harm and are cared for in a safe environment	6.1 The Mental Capacity Act 2005 and Deprivation of Liberty procedures are effective and ensure people are treated with dignity and are protected from harm	This outcome was fully met.	Fully met	2
	6.2 Excellent safeguarding procedures ensure people are protected from harm	Overall this outcome was met. It was considered good practice that the organisation utilises the services of maintenance staff that they employ directly, to carry out repair work within the independent living services. This good practice could be reflected within the safeguarding policy. People spoken with during the visit stated that they felt reassured that they knew the person who would be carrying out repairs within their home.	Fully met	2
	6.3 Proactive falls prevention practices and procedures ensure that actions are taken to reduce the incidence and impact of falls	This outcome was not applicable to the client group at the time of our visit.	Not applicable	Not applicable
	6.4 Maintaining a safe environment ensures people are protected from potential hazards	Overall this outcome was met. It was evidenced through discussion with staff and people supported that furniture and equipment were inspected on a regular basis, although this was not formally recorded. People supported stated that repairs were carried out efficiently. People explained that their homes had been recently decorated, with their involvement. It would be good practice to have a formally recorded renewal programme in place (it was acknowledged that such work(s) are being carried out on an informal basis).	Fully met	2
	6.5 Appropriate and safe equipment ensures people receive safe and dignified care	This outcome was not applicable to the client group at the time of our visit.	Not applicable	Not applicable
			Score	6
ealth and well-being	7.1 People's nutritional needs are comprehensively met and dining is a positive experience for all	This outcome was fully met. It was good to hear from people supported that they felt supported by staff to follow a healthy eating plan.	Fully met	2
	7.2 Effective Health and Hygiene practices minimise the risk of cross infection	Overall this outcome was met. It would be a recommendation that cleaning regimes (where applicable) could become a formalised practice, where staff would sign off as required. Further checks of cleaning tasks could be incorporated into quality assurance procedures.	Fully met	2

Main Outcome	Related Outcome Measures	Comments	Outcome	Outcome Score
7. People experience improved he	7.3 Robust medication procedures ensure people receive the right medication at the right time to protect their health	This outcome was partially met. Within the medication policy, there was a procedure to be followed by staff in the event of a medication error. It would be good practice to include stipulation around errors to be linked with safeguarding reporting procedures. It was advised that a formal procedure to be followed should people take medication outside of their home. This procedure could then be reflected within the persons' support plan and individual risk assessment according to their particular needs. Medication administration records for one person were not complete for the period currently in use. For the same person it was discovered that medication records had been completed retrospectively. Staff had received up to date training around medication, however competency complaisance had not been assessed. Audit checks of staff compliance with medication procedures could be incorporated into quality assurance checks.	Partially met	1
			Score	5

Total Scored	53
Maximum Score	56
Percentage scored	95%