

Quality Outcomes Report 2015



North Tyneside Council

MENCAP
NOVEMBER 2015



North Tyneside Council

Name of Service:	Mencap
Date of Visit:	3rd November 2015
Manager:	Lynda Lancaster
Person in Charge on day of visit:	Lynda Lancaster
Contracts Team Officers:	Nina Dixon and David Meroniuk

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;

Mencap provides independent living support for two services within the area of North Tyneside. Their Head Office is situated in Northumberland. The two services are located in the North Shields and Whitley Bay areas of North Tyneside. During the visits to the services it was good to see that people had developed a good rapport with staff. People's support plans contained person centred information and were representative of peoples needs. There were some recommendations around business continuity and completion of Safeguarding National Competence Framework that were made within the previous years' report that remained yet to be carried out, however further feedback and advice given to The Manager following the visit may assist in there completion.

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. People's support plans viewed showed that needs assessments had been completed prior to the service commencing and that the person had given their consent.	Fully met	2
	1.2 Effective care planning and review processes ensure people receive excellent, individualised care	Overall this outcome was met. Support plans viewed contained detailed information on how people would like to receive their support and were person centred. Life histories had also been completed. People had signed their support plans and reviews. However it was felt that the review documentation used could be expanded to show how well the support is going, if the objectives are being achieved etc. It was explained to us by The Manager that the organisation were soon to introduce a new review system, where such information would be captured moving forward. An example of the new documentation was also viewed.	Fully met	2
	1.3 Positive risk taking ensures people are encouraged to maintain independence	This outcome was fully met. Risk assessments viewed were signed by the person supported. It was clear from the documentation viewed and from discussions with people during the visits to their homes, that people were being supported to maintain independence and explore acceptable risk taking. There was a good emphasis on supporting people to undertake activities of their choosing whilst considering the actions that could be taken to minimise any risks. Examples of this were around people's finances and independently attending to personal care.	Fully met	2
			Score	6

Main Outcome	Related Outcome Measures	Comments	Outcome	Outcome Score
2. People are supported by excellent 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.	This outcome was partially met. Staff files viewed showed that core induction standards had been completed when staff had first started their employment with the organisation. Staff training records viewed reflected that some training had lapsed, although The Manager explained that this had now been brought up to date, however certificates to confirm this were awaited. The training matrices for staff have a colour coded system to indicate when training is in date or due to expire. The organisation had yet to have staff complete the National Safeguarding Competence Framework, copies of which were sent to The Manager following the visit.	Partially met	1
	2.2 Staff are supported to undertake their duties	This outcome was fully met. Staff files viewed showed that regular supervisions were being held. The organisation has quarterly appraisals with staff called 'shape your future'. Handovers within people's homes were viewed and had been signed by staff.	Fully met	2
	2.3 Positive Staff Morale ensures people receive dignified care from a stable and productive staff team	This outcome was fully met.	Fully met	2
			Score	5
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 fully met. During the visit to Head Office, the organisations quality assurance systems were viewed. The systems are completed monthly, where the results of audits to services are recorded online, this populates a monthly report which is then pulled through as an action plan for the following months visit. The Organisation's annual report had been completed for 2014 and had an outline for 2015. The organisation has published a report called 'Our Big Plan' which sets out objectives for the next 5 years.	Fully met	2
	3.2 Effective Business Continuity procedures ensure the service can continue to care for people during crisis situations	This outcome was partially met. As reflected within last years' report there could be some further work undertaken in this area. The Business Continuity Plans viewed could be expanded to consider the impact of utility failure, loss of I.T. facilities, communication loss and financial problems. The response plan should then be signed by staff to confirm their awareness. The plan should be reviewed on an annual basis with evidence to demonstrate that the plan has been tested.	Partially met	1
	3.3 Effective recruitment procedures ensure the right staff are employed and people are protected from harm	This outcome was fully met.	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

Main Outcome	Related Outcome Measures	Comments	Outcome	Outcome Score
3.	3.5 Robust financial procedures ensure people retain as much financial independence as possible and are protected from financial abuse	Overall this outcome was met. There was evidence within support plans to show that people had been consulted around 'pooled budgets' for the running of their home, this was around set amounts for utility bills, shopping and cleaning of their home, however people's capacity to agree to this had not evidently been considered.	Fully met	2
			Score	9
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. During the visit to one of the ISL's the Fire Risk Assessment had been left at Head Office, advice was given at the time of the visit to the service that such records should remain within the service at all times. As reflected within last years' monitoring report fire drills are being carried out regularly, although they could be expanded to cover the procedure to follow during night time evacuations. PEEP's were also in place for people within the service. The format could be expanded to include night time needs for people.	Fully met	2
	4.2 Equal Opportunities procedures promote equal access to services and protect people from discrimination	Overall this outcome was met. The organisations Equal Opportunities policy was dated February 2013, with a date for renewal of February 2015. At the time of the visit the review had not occurred. It was explained during the visit that the organisation was in the process of reviewing policies, some of which were outstanding. A working group had been set up to bring policies up to date.	Fully met	2
	4.3 Proactive Complaints and Compliments procedures ensure services are reactive and responsive to people's needs	This outcome was fully met. The complaints policy was viewed and it was good to see that a number of outside agency contact details are included within the policy. An easy read version for people supported is available. There had been no complaints recorded within the complaints log viewed over the last year. It was a recommendation that the log could be expanded to capture any minor grumbles or issues people may have. There was evidence provided separately to show that action had been taken in response to staff raising concerns on people's behalf around attitudes of contracting staff who were completing decorating work in their home.	Fully met	2
	4.4 Confidentiality and data protection procedures ensure that sensitive information is treated with respect	This outcome was partially met. The organisation is registered under the Data Protection act 1998, registration number Z5709720. As recommended in last year's monitoring report, safeguarding and confidentiality issues in respect of people supported, need to be included within mobile phone, photographic equipment and social networking policies.	Partially met	1
			Score	7
	5.1 People are able to engage in meaningful activity and occupation	This outcome was fully met. It was good to see within support plans that people were being supported to live fulfilled lives, in terms of support to maintain interests and attend activities of their choosing. People spoken with during the visit told us that they were supported to go swimming, watch shows at theatres and go on holidays.	Fully met	2
	5.2 People are encouraged and supported to maintain and develop relationships	This outcome was fully met. There was good evidence within support plans to show that people's needs around social behaviours and relationships were considered on an individual basis.	Fully met	2

Main Outcome	Related Outcome Measures	Comments	Outcome	Outcome Score
5. People experience dignity and respect	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. It was good to see that the recommendation within last year's report around inclusion of advocacy to be made within service user guides had been completed. Support plans viewed were written in a person centred way with people's choice around their daily routines being recorded.	Fully met	2
	5.5 Privacy is a valued part of everyday life	This outcome was partially met. A key holding policy is in place within the organisation, however within people's support plans viewed it was not evident that people were involved in decisions around being supported to manage a key to their home. If this would not be possible for people then reasons and support needed should be recorded within their support plans. It would be good practice to show how people have been involved in determining who has access to their home and the system around where keys are held to their home.	Partially met	1
	5.6 People experience a sense of belonging and being a valued part of the community	Overall this outcome was met. It was clear that people were supported to use local services, such as leisure centres and hair dressers. Recommendations were made within last years' monitoring report that a community mapping exercise would be beneficial to have completed within each of the services. During the visit to people's homes there was literature/leaflets available for people around local services. During feedback given to The Manager it was felt that a reference file (or similar) would be a good source of information to have in one place within the services.	Fully met	2
	5.7 People have timely and appropriate access to information	Overall this outcome was met. There was evidence provided separately to the information that was available for people within service user guides, which was around the arrangements to terminate the service. This information could be included within the guides ensuring people could have access to it at any time.	Fully met	2
			Score	13
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 partially met. The information within people's support plans could be revised to ensure that it is evident that people's capacity to agree to the placement is recorded. People's support plans viewed did not demonstrate that staff had access to the forms required to assist with decisions around mental capacity. It was not clear that there was an awareness of the circumstances in which these would be used. As referenced within the outcome around supporting people with their finances, it would be good practice to show consideration around people's capacity where decisions are being made around their finances. This was in particular regard to where pooled budgets for the household are used and for holidays etc.	Partially met	1	

Main Outcome	Related Outcome Measures	Comments	Outcome	Outcome Score
6. People are protected from avoidable harm and are cared for in	6.2 Excellent safeguarding procedures ensure people are protected from harm	This outcome was partially met. The organisations policy around safeguarding stipulates that Managers of services must have access to the local authority's safeguarding policy. During the visit to the services North Tyneside Councils' safeguarding policy and contact details were available. The organisation's staff had not completed the Safeguarding National Competence Framework. A copy of the framework was sent to The Manager following the visit. This had been recommended within last years' report. It was a recommendation that safeguarding policies and procedures for safeguarding covers the suitability of people entering the home and others who the provider commissions to carry out work. This may be of particular relevance for one service where people supported pay for cleaning services within their home.	Partially met	1
	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 at the time of the visit.	Not applicable	Not applicable
	6.4 Maintaining a safe environment ensures people are protected from potential hazards	This outcome was fully met. Health and safety checks are completed on a monthly basis, which demonstrated that environmental checks of people's homes were being completed.	Fully met	2
	6.5 Appropriate and safe equipment ensures people receive safe and dignified care	This outcome was fully met. There was a small section of this outcome that was applicable at the time of the visit. There was evidence within one persons' support plan which demonstrated that their needs around mobility aids were being represented.	Fully met	2
			Score	6
improved health and well-being	7.1 People's nutritional needs are comprehensively met and dining is a positive experience for all	Overall this outcome was met. It was good to see that the organisation gave consideration into people's dietary needs. It was felt that some good practice was being carried out particularly where people needed support to maintain a healthy diet, where people had been supported to access and attend slimming clubs. People that were spoken with during the visit said that they felt they had choices around the meals they would like to have. A recommendation was given that access to a recognised nutritional screening tool may be beneficial in order to recognise where further advice or support may be needed.	Fully met	2
	7.2 Effective Health and Hygiene practices minimise the risk of cross infection	Overall this outcome was met. The Manager completes environmental checks every 8 weeks, where their signature is recorded to verify that a check of the cleanliness of people's homes has been completed. It would be good practice to have formal cleaning regimes that are signed of by staff or other agencies (as appropriate) when cleaning has taken place.	Fully met	2

Main Outcome	Related Outcome Measures	Comments	Outcome	Outcome Score
7. People experience it	7.3 Robust medication procedures ensure people receive the right medication at the right time to protect their health	Overall this outcome was met. It would be good practice to reference a requirement to consider errors or omissions within safeguarding procedures. Staff records viewed at the time of the visit did suggest that staff competency training had lapsed. However The Manager explained that training and competencies had been brought up do date and that records had yet to be amended to reflect this. Medication policies viewed within people's homes made reference to previous regulatory body as being 'CSCI', therefore it was a recommendation that the most recent versions of policies should be available. Within peoples' support plans around their medication needs, there could be scope to expand on the information requested to capture if any support is required to have periodical medications (such as flu inoculations).	Fully met	2
			Score	6

Total Scored	52
Maximum Score	58
Percentage scored	90%