

London Borough of Sutton

The Specialist Health Team for People with Learning Disabilities

Inspection report

Civic Offices
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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:

The Specialist Health Team for People with Learning Disabilities is made up of staff from a range of health care professions, including nurses, speech and language therapists, physiotherapists, psychologists and behavioural analysts and music and drama therapists. The service aims to reduce health inequalities for people with learning disabilities in the London Borough of Sutton and improve their quality of life. The service works directly with people and also with professionals within GP practices, hospitals and care homes to improve the way they support people with learning disabilities. At the time of our inspection over 200 people were using the service.

The service is registered for 'treatment of disease, disorder and injury' because healthcare professionals treat people with learning disabilities in their own homes or within care homes.

People's experience of using this service:

People, relatives and health and social care professionals were positive about the support people received from the provider. People and relatives told us staff were caring, understood people's needs and were well-trained. Social care professionals told us the service worked well in partnership with them and met the needs of individuals well.

People were provided with the support and interventions they required to take greater control of their lives and become more independent, reduce social isolation, make informed decisions and have greater access to health care services.

Staff were experts in their fields who understood their roles, worked well as a team and felt well supported by the provider. Staff received the training they needed to maintain their professional registrations.

People, relatives, professionals and staff found the service to be well managed and our inspection findings supported this. However, the person registered with us as manager was no longer in post. The service was about to be restructured and the provider told us a new manager would register with us as soon as possible. The service received consistency of day to day management from two team managers since our last inspection.

People were safeguarded from abuse and the service supported safeguarding referrals and investigations regarding people using the service and other providers.

The provider checked they recruited only staff who were suitable to work with people with learning disabilities and there were enough staff to support people.

Staff supported people in line with the Mental Capacity Act when they suspected they lacked capacity to make decisions relating to their treatment.

A process was in place to investigate and respond to concerns or complaints.

Rating at last inspection:

The last inspection of this service by CQC was on 20 October 2016 and we rated the service Good.

Why we inspected:

This was a planned inspection in line with our inspection schedule based on rating at our last inspection.

Follow up:

We will continue to monitor the service through the information we receive. We will inspect in line with our inspection programme or sooner if required.

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

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 ●

The Specialist Health Team for People with Learning Disabilities

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:

Our inspection was completed by two inspectors and an Expert by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service. Their area of expertise for our Expert by Experience was as a person who had used, and cared for people who used, social care services themselves.

Service and service type:

The Specialist Health Team for People with Learning Disabilities provides treatment for disease, disorder and injury to people with learning disabilities in their own homes including care homes.

The service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. The registered manager and the provider are legally responsible for how the service is run and for the quality and safety of the care provided. At the time of our inspection, a manager was registered with us although they were no longer in day to day charge of the service. The provider told us they would register a manager with us as soon as possible.

Notice of inspection:

The inspection took place on 23 May 2019 and was announced. We gave the service two days' notice in line with our guidance for services of this type to ensure a suitable person would be available to meet with us.

What we did:

Our inspection was informed by evidence we already held about the service. We also checked for feedback we received from members of the public and the local authority commissioning and quality monitoring group.

The provider completed a Provider Information Return (PIR). This is information we require providers to send us at least once annually to give some key information about the service, what the service does well and improvements they plan to make.

Our Expert by Experience spoke with one person who used the service and three relatives. During our inspection we spoke with the two joint team managers, the head of service for all age learning disability, a community nurse and a senior community nurse, a lead psychologist, an assistant psychologist and a behavioural analyst and a team manager for learning disabilities and transitions. After our inspection we received feedback from four adult social care providers and an advocacy provider.

During our inspection we reviewed six people's care records, three staff personnel files, audits and other records about the management of the service.

Is the service safe?

Our findings

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

At the last inspection this key question was rated as Good. At this inspection this key question remained the same and is rated Good. People were safe and protected from identified harm. Legal requirements were met.

Assessing risk, safety monitoring and management

- The provider assessed and managed risks to people's care well. Nurses risk assessed any physical therapy people required and took action to reduce the risks.
- Staff closely monitored and supported some people to reduce their risk of hospitalisation.
- Behavioural analysts used specialist assessment and interventions for people who displayed behaviour which challenges. They worked closely with people's relatives or care home staff to develop behaviour management plans and to provide support to reduce risks relating to these behaviours.

Systems and processes to safeguard people from the risk of abuse; Learning lessons when things go wrong

- People told us they felt safe with staff from the service who supported them.
- Staff understood their role in reporting any concerns people as they received training.
- Staff reported any concern people were being abused and were involved in safeguarding meetings to keep people safe.
- Staff discussed safeguarding concerns at team meetings to check people were receiving the right support and learning was shared.
- The provider told us there had been no accidents or incidents involving their staff team. However, the provider supported those who worked with people to understand and respond to incidents of behaviour which challenged.

Staffing and recruitment

- The provider checked staff were suitable to work with vulnerable people during recruitment. One relative told us, "They pick good staff".
- Checks included obtaining and verifying evidence of people's identity, training and experience, character and previous work references, professional registration and criminal records checks.
- There were enough staff deployed to work with people and locums were used to cover some staff shortages.

Using medicines safely; preventing and controlling infections

The service does not administer medicines to people and is not involved in preventing and controlling infections so we did not inspect these areas.

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

At the last inspection this key question was rated as Good. At this inspection this key question remained the same and is rated Good. People's outcomes were consistently good, and people's feedback confirmed this.

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.
- The provider was working within the principles of the MCA. Staff received training in the MCA and understood their responsibilities in relation to this. The provider was involved in MCA assessments which we saw were in line with the MCA. A relative told us, "The psychologist that [my family member] works with always asks for consent."

Staff support: induction, training, skills and experience

- People were supported by staff who were suitably qualified, experienced and were competent. A relative told us, "Everyone that has come into contact [with my family member] has been very well trained."
- Staff completed a corporate induction although inductions specific to the specialist areas staff worked in were lacking. A nurse told us they felt a specific induction would be an area for improvement for the service. The provider told us they would review this.
- Staff received the training they needed to keep their knowledge current and so they understood people's needs. The provider supported staff to maintain their professional qualifications with training and attendance at conferences and support with postgraduate qualifications.
- Staff received regular supervision to discuss their work with people who used the service and issues relating to their employment and training. Staff felt supported by their line managers. Staff received appraisals of their work to review their performance and training and set goals for the following year.

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

- The service supported local people with learning disabilities to improve their physical and emotional health by helping them access mainstream health care appointments and by reducing hospital admissions.
- The provider supported local GPs and hospitals to help improve the way they supported people with learning disabilities.
- The provider met regularly with the local mental health team and clinical health team to review new referrals and share best practice.

Assessing people's needs and choices

- The provider assessed the support people needed before they began using the service and clearly recorded their needs and how staff should support them in their care plans.

Delivering care in line with standards, guidance and the law

- The clinicians working for the service were specialists in their field and followed relevant standards, guidance and laws in supporting people.

Supporting people to eat and drink enough to maintain a balanced diet

- The service was not involved in the preparation and provision of meals to people. However, where people needed advice with nutrition this could be provided by the healthcare professionals who worked within the team.

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.

At the last inspection this key question was rated as Good. At this inspection this key question remained the same and is rated Good. 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, relatives and professionals were positive about the support they received from this service. Comments included, "[My family member] is very much treated with dignity and respect. She's a person and treated as such", "They're such a caring service", "All of the staff are affectionate and kind and can deal with difficulties" and "They deal with him completely with dignity and respect."
- Staff received training in equality and diversity and understood their responsibilities in relation to this.

Supporting people to express their views and be involved in making decisions about their care

- The provider continued to encourage people with learning disabilities to be active members of local self-advocacy groups. These groups are run by and for local people with learning disabilities with the help of a self-advocacy supporter and the provider.
- People and relatives where appropriate were involved in decisions about the support people received from the provider. A relative told us, "I'm always included in decisions and I'm so grateful for everything we've received".
- Staff accompanied some people to appointments with their GP or to meetings at the local council and helped them understand what was discussed.
- The provider helped people understand their care by creating pictorial care plans and information sheets.
- Staff trained and advised staff in local care homes and health services to improve the way they communicated with people with learning disabilities.
- Speech and language therapists worked with people to improve their communication skills to improve their quality of life.
- The psychology team analysed people's behaviour to help understand what they were trying to communicate. A relative told us, "They're a life line. [My family member] sees and feels things very differently to us and there were a couple of incidents of where they were able to put his point across and they made us understand".
- The provider recently set up workshops to help people with learning disabilities understand sex and relationships.

Respecting and promoting people's privacy, dignity and independence

- The service focused on what people could do for themselves and supported people to be as independent as possible.

- Staff actively promoted people's independence by teaching them every day skills such as preparing meals and travel training.

Is the service responsive?

Our findings

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

At the last inspection this key question was rated as Good. At this inspection this key question remained the same and is rated Good. People's needs were met through good organisation and delivery.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control

- People's care was personalised and suitable for their needs. A relative told us, "[My family member] has a lot of fun with their music therapist who is very good and has helped her through a difficult time."
- Community nurses within the team supported people by ensuring they had person-centred health action plans in place which met their needs. People with a learning disability have a health action plan to coordinate input into their care and promote their health.
- Community nurses worked closely with local GPs to support them in reviewing people's health action plans for some people.
- Health action plans we viewed clearly set out the health care interventions they needed from the provider and how these would be achieved.
- Where the service was responsible, people's health action plans were reviewed regularly by community nurses working for the provider, involving people and their relatives or care home staff so they remained current and reliable.
- Drama therapists trained care home staff in 'intensive interaction', a way to communicate with non-verbal people with learning disabilities.
- Speech and language therapists worked to help people's relatives and care home staff understand what they were communicating and improve the way they communicated together.

Improving care quality in response to complaints or concerns

- The provider had arrangements in place to respond appropriately to people's concerns and complaints although they had not received any in the past year. A relative told us, "If there are any issues I speak to the manager and they get addressed".
- People told us they knew how raise a concern or complaint about the service.
- The complaint procedure for the London Borough of Sutton was available to people on their website and in an easy to read format.

End of life care and support

The provider was not involved in end of life care and support so we did not inspect this area.

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.

At the last inspection this key question was rated as Good. At this inspection this key question remained the same and is rated Good. The service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Working in partnership with others; Planning and promoting person-centred, high-quality care and support with openness; and how the provider understands and acts on their duty of candour responsibility

- The service worked in partnership with other health and social care providers. All adult social care providers we contacted were positive about the support they received from the provider and their partnership working.
- Community nurses worked with GP practices in Sutton to improve their support for people with learning disabilities. They trained staff, checked their learning disabilities registers were up to date and that patients received annual health checks.
- Hospital liaison nurses also worked closely with the local hospital NHS Trust to improve the experiences of people with learning disabilities. They coordinated the hospital admissions and discharges of people with learning disabilities and advised staff on people's needs.
- Psychologists and behavioural analysts also provided specialist advice, support and training to other health and social care professionals such as care home staff.

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

- The service is required to have a registered manager. The person registered with us was no longer in post. The provider was beginning a restructure of the service and told us a new manager would register with us in the next few months once this process was complete.
- The borough's head of learning disability services was new in post and oversaw this service as well as others within the council. Two joint team managers led the team. A community nurse manager led the community nurse and music therapy teams and a speech and language team leader led the speech and language, psychology and physiotherapy teams. Our inspection findings and discussions showed the managers and their staff understood their roles well and worked well as a team. Staff felt well supported.
- Governance systems were in place to oversee the team's performance. The team managers completed a monthly 'dashboard' which monitored referrals, any safeguarding incidents and healthcare plans. The team managers checked staff received the support they needed including regular supervision.
- The provider had an action plan in place which included restructuring the service and reviewing the roles within the team.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- The provider gathered the views of people using the service and other professionals through satisfaction

surveys and forums for people with learning disabilities and used these as part of improving the service.

- □ Staff were able to share their views on the service during regular team meetings and staff told us communication across the service was good.
- □ The team recently moved location within the council's head office. The team sat near the children with disabilities and transitions teams and staff told us they hoped to work more closely to improve people's experiences.