

Social Care Academy Ltd

# Social Care Academy Ltd

## Inspection report

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Date of inspection visit:  
04 May 2022

Date of publication:  
20 June 2022

### Ratings

Overall rating for this service

Requires Improvement 

Is the service safe?

Requires Improvement 

Is the service effective?

Good 

Is the service caring?

Good 

Is the service responsive?

Good 

Is the service well-led?

Requires Improvement 

# Summary of findings

## Overall summary

### About the service

Social Care Academy is a domiciliary care agency which provides personal care to people in their own homes. At the time of our inspection the service was providing the regulated activity personal care to 11 people. CQC only inspects the service being received by people provided with personal care. This is help with tasks related to personal hygiene and eating. Where they do, we also consider any wider social care provided.

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

Risks associated with people's care were assessed and staff understood their responsibilities to keep people safe. However, some risk assessments lacked detailed guidance to inform staff how to support people safely. Recruitment checks were not always completed in a timely manner, prior to staff being employed. The registered manager told us they would address these issues. People spoke positively about the service and medicines were administered safely, by staff trained in medicine management.

People had confidence in the ability of staff to provide effective care. Ongoing training was provided to the staff team to ensure their skills and knowledge remained up to date to provide effective care. People had access to healthcare professionals to ensure their ongoing healthcare needs were met.

People received person centred care and developed positive relationships with staff, who had a good understanding of their care and support needs. People's right to dignity and privacy were respected and their independence was promoted.

People and relatives were involved in their care plans to ensure they reflected people's preferences, religious and cultural beliefs and values. People knew how to make a complaint and feedback on the service was encouraged and used to drive forward improvements and learn lessons.

Quality monitoring systems and checks had not always been completed to provide effective management oversight of the service. The registered manager had identified this, prior to our inspection and recently recruited a manager to support the service. The provider had a contingency plan in place, to minimise any risks to the service running safely in the event of, for example adverse weather conditions. Staff felt supported by the management team.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

### Rating at last inspection

This service was registered with us on 08/06/2021 and this is the first inspection.

#### Why we inspected

This inspection was prompted by a review of all the information we held about this service.

## 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 not always safe.

Details are in our safe findings below.

**Requires Improvement** ●

### 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 not always well-led.

Details are in our well-led findings below.

**Requires Improvement** ●

# Social Care Academy Ltd

## 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

One inspector carried out this inspection.

#### Service and service type

This service is a domiciliary care agency. It provides personal care to people living in their own houses and flats.

#### Registered Manager

This 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. 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.

At the time of our inspection there was a registered manager in post.

#### Notice of inspection

We gave 24 hours' notice of the inspection. This was because we needed to be sure that the registered manager would be in the office to support the inspection.

#### What we did before the inspection

We reviewed the information we had received about the service. 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. We sought feedback from the Local Authority who work with the service. We also used information gathered as

part of monitoring activity that took place on 28 March 2022 to help plan the inspection and inform our judgements.

#### During the inspection

We spoke with six people who used the service about their experience of the care provided. We spoke with five members of staff including the registered manager, team leader and care staff.

We viewed a range of records including three people's care records. We looked at four staff files in relation to recruitment and staff support and a range of records relating to how the service operated and was managed.

#### After the inspection

We continued to seek clarification from the registered manager to validate evidence found. We looked at the providers policies and procedures.



# 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 requires improvement. This meant some aspects of the service were not always safe and there was limited assurance about safety. There was an increased risk that people could be harmed.

### Assessing risk, safety monitoring and management

- Care plans and risk assessments were in place for people. However, some risk assessments lacked, detailed guidance to inform staff how to support people safely. For example, when supporting a person, to use their walking frame, there was no information about what this support involved. Despite this short fall, staff demonstrated they knew how to support the person to keep them safe. We highlighted this to the registered manager who told us they would update the risk assessments, to include more detail.
- Risks associated to people's home environments had been assessed and regularly reviewed.
- The provider had a contingency plan to minimise any risks to the service running safely in the event of, for example adverse weather.

### Staffing and recruitment

- Recruitment checks were not always completed in a timely manner, or in line with the providers policies. During the inspection, we identified two members of staff had commenced work, without a risk assessment being completed, while waiting for all the necessary references being in place. The provider had completed all other pre-employment checks, for these staff.
- People told us they were happy with the timing of their care calls. One person told us, "The staff arrive on time and are rarely late."
- The provider had an electronic system in place to monitor the time staff arrived and left people's homes. The management team checked this regularly to ensure people had received their planned care. This ensured any late or missed calls were quickly identified and addressed.

### Systems and processes to safeguard people from the risk of abuse

- People felt safe with staff. One person told us, "I feel very safe with the staff, they are all great, very kind."
- Staff had received safeguarding training and understood their responsibilities to report any concerns to the managers. Staff were confident that their concerns would be followed up.
- The registered manager understood their responsibility to report any concerns to the local authority and to us (CQC) to ensure any allegations or suspected abuse were investigated.

### Using medicines safely

- People received their medicines as prescribed. There were systems in place to ensure this was done safely. One person told us, "The staff help me with my medication, they are very good at getting it ready for me."
- Staff completed training to administer medicines and competency assessments were completed to

confirm they did so safely.

#### Preventing and controlling infection

- People told us staff wore personal protective equipment (PPE). One person said, "They always wear a mask and put on gloves and an apron before helping me."
- Staff received training in infection control and understood their responsibilities. They told us there was a good supply of PPE to maintain good infection control practice.

#### Learning lessons when things go wrong

- The registered manager acknowledged improvements were needed and had started to review people's risk assessments and recruitment processes.



# 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.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law; Staff support: induction, training, skills and experience

- People and their relatives contributed to the assessment of people's care needs, to ensure that they reflected the person's health, wellbeing and how they wished to be supported.
- People had confidence in the ability of staff to provide effective care. One person said, "Staff are very good, they are professional and respectful."
- Staff told us that the information gathered during assessments was used to develop care plans which helped them get to know people and understand their needs.
- The registered manager ensured new staff received an induction and would work with an experienced staff member until they were confident to be included on the staff rota, to work unsupervised.
- Staff spoke positively about their training. One staff member told us, "It's very good and gives us the skills, we need."

Supporting people to eat and drink enough to maintain a balanced diet; Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- Staff had a good understanding of people's dietary needs and spoke about the importance of offering healthy choices, when supporting people with their meals.
- The service has established effective working relationships with other professionals involved in people's care, including GP's and social workers. This supported people's health and well-being.
- Staff had access to information about professionals involved with each person, this meant they could be contacted if support was needed.

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 confirmed staff worked within the principles of MCA. One person told us, "The [staff] always ask me, what I need before helping me."
- Staff ensured people were involved in decisions about their care, by having regular discussions with them.
- Staff had received MCA training and demonstrated an understanding of the principles. One staff member said, "I always ask first, to make sure the person is happy, for me to help them. It's important to get their consent."

# 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 said staff were caring and treated them with dignity and respect. One person described staff as, "Really great, they're marvellous."
- People's care plans detailed their life histories and staff used this information to promote equality and diversity.
- Staff spoke with care and compassion about the people they supported.
- Staff felt supported in their roles. One staff member told us, "The managers are very supportive and approachable."

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

- People told us they were involved in making decisions about their care. One person told us, "The staff always ask me, about what I need and if anything changes, they sort it out, with me."

Respecting and promoting people's privacy, dignity and independence

- People's right to dignity was respected. One person told us, "The staff are respectful and always knock the door and keep me covered up, when helping with personal care."
- Staff promoted people's independence. One person told us, "Staff are supportive and give me the time to do things for myself, my independence is important to me."

# 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 personalised and responsive care. One person said, "I get very good care, my needs are met and the staff support me, as I want them to."
- Care records contained detailed information to help staff meet people's needs including their likes, dislikes and things that were important to them.
- Staff told us if people's needs changed, they were called by the manager to inform them and care records were updated.

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 to communicate effectively with people. One staff member told us, "[Person] can communicate but I need to face them, speak slowly and clearly, so they can hear me."
- The registered manager demonstrated a good understanding of the AIS. They told us when a service referral was received, they ensured information was made available in the appropriate format for the person. For example, large print text or in the person's first language.

Improving care quality in response to complaints or concerns

- People knew how to complain. One person said, "I would call the manager and they would sort it out for me."
- Where people or their relatives had made complaints, these had been recorded and responded to by the registered manager in line with the provider's policy and procedure.

# 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 requires improvement. This meant the service management and leadership was inconsistent. Leaders and the culture they created did not always support the delivery of high-quality, person-centred care.

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

- Although systems and audits were in place to drive improvements within the service, these were not being completed regularly. For example, audits of care records, which led to some, small delays in reviewing people's care and support needs. The registered manager acknowledged this and had recently recruited a manager, to help improve the managerial oversight of the service.
- Where governance systems had identified concerns, action had not always been taken to resolve the issue, such as the pre-employment checks.
- People spoke positively about the staff. One person said, "they are a good bunch, friendly and kind."
- Staff felt supported and received the guidance needed to fulfil their roles through individual and team meetings.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics;

- People were happy with the service provided. One person told us, "The staff are good, I'm very satisfied with the support, I get."
- Staff gave positive feedback about the culture of the service. One staff member said, "I really enjoy working for them, the managers are really supportive and always have time for you."
- The providers' policies and procedures promoted inclusion and diversity and reflected protected characteristics as defined by the Equalities Act 2010.

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; Continuous learning and improving care; Working in partnership with others

- The registered manager had identified the governance and quality assurance processes had not always been completed and took action to address this. However, further time was needed for these processes to fully embed and drive forward improvements.
- Throughout our inspection visit the registered manager was open and honest. They welcomed our inspection feedback and took swift action to address the issues identified.
- Records showed staff liaised with a range of health and social care professionals involved in people's care to support their physical health and wellbeing.

