

Essential Care & Support Ltd

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Inspection report

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Date of inspection visit:
18 October 2023
23 October 2023

Date of publication:
16 November 2023

Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Essential Care and Support service provides care and support to people living in one 'supported living' setting, so that they can live as independently as possible. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for supported living; this inspection looked at people's personal care and support.

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

We expect health and social care providers to guarantee people with a learning disability and autistic people; respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

Right Support: People were supported to have choice about their daily lives. Not everyone being cared for expressed their needs verbally. The staff and the registered manager had a good understanding of people's responses and non-verbal communication. Staff had worked with people for a considerable time and knew them extremely well, including their likes and dislikes and personal preferences. People were able to access the community, if they wished and were supported to maintain good contact with their families.

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.

Right Care: Care was person centred and staff supported people to achieve their ambitions and live their best life possible. Staff spoke with understanding about the people they supported. People were treated with dignity and respect and staff had an in depth understanding of the person and the support they needed.

Right Culture: People led inclusive and empowered lives because of the ethos, values, attitudes and behaviours of the management and staff. People's care, treatment and support plans had clear guidance on what people's goals and aspirations were. The service enabled people and those important to them to work with staff to develop the service. Staff valued and acted upon people's views. We received positive feedback from people and their family members about the service. Staff members were positive about working at the service and felt supported by the manager and the provider.

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

Rating at last inspection

The last rating for this service was good (Published 1 May 2018).

Why we inspected

This inspection was prompted by a review of the information we held about this service and due to the length of time since the previous inspection. For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Essential Care and Support on our website at www.cqc.org.uk.

We have made recommendations about medicine records and audits regarding 'as and when required' medicines.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Good ●

The service was safe.

Details are in our safe findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

Essential Care and Support 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 Health and Social Care Act 2008.

Inspection team

The inspection was carried out 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.

Service and service type

Essential Care and Support Limited is a domiciliary care agency based in Seaham. This service provides care and support to people living in 12 'supported living' settings, so that they can live as independently as possible. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for supported living; this inspection looked at people's personal care and support.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations. At the time of our inspection there was a registered manager in post.

Notice of inspection

We gave the service short notice of the inspection. This was because it is a small service and we needed to be sure that the provider or registered manager would be at the office to support the inspection. We also

wanted to gain consent from people to visit them in their own homes. Inspection activity started on 18 October 2023 and ended on 31 October 2023. We visited the location's office/service on 23 October 2023.

What we did before the inspection

We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We contacted the local authority for any information or concerns they had about the service. We used all this information to plan our inspection.

During the inspection

During the inspection we met and spoke with 9 people who used the service. We spoke with 10 staff members including the registered manager, service managers and support staff. After the inspection visit, we spoke with a further 3 support workers on the telephone. We also spoke on the telephone with 9 relatives about the care their family members received.

We reviewed a range of records. This included people's care and medication records. We looked at staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including risk assessments and procedures were reviewed.

After the inspection visit we continued to seek clarification from the provider to validate evidence found. We looked at training data and quality assurance records.

Is the service safe?

Our findings

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

At our last inspection we rated this key question good. The rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

Using medicines safely.

- Medicines were managed safely.
- Staff had received training on administering medicines and their practice was observed regularly to ensure medicines were administered safely.
- People received their medicines safely. However, records were not always up to date for 'as an when required' medicines.

We recommend the provider review current best practice and their records regarding 'as and when required' medicines.

Staffing and recruitment

- People were supported by enough staff to ensure their safety.
- The provider undertook appropriate recruitment checks, including references and relevant safety checks.
- Relatives and staff told us there were enough staff to support people and meet their needs in a personalised way. One staff member told us, "Yeah it's going brill with the hours it works perfect."

Systems and processes to safeguard people from the risk of abuse

- People were protected from harm.
- The provider had a safeguarding process for staff to follow.
- Staff received safeguarding training and were aware of when and how to report any concerns. One staff member told us, "Any form of abuse or harm would be reported, and we look for any signs."

Assessing risk, safety monitoring and management

- People were able to take risks safely as part of everyday life.
- People told us they felt safe with the support they received, one person told us, "It is safe here and you feel listened to. This lot (the staff) are amazing". Another told us, "The staff make me feel safe and locking the front door at night and having them here".
- Staff were aware of people's individual risks and what was in place to minimise these. One staff member told us, "We discuss potential risks as a team and if anything needs updating or changing, we agree together before making any changes."

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 MCA 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 Mental Capacity Act (MCA).

- We found the service was working within the principles of the MCA and if needed, appropriate legal authorisations were in place to deprive a person of their liberty. Any conditions related to DoLS authorisations were being met.

Learning lessons when things go wrong

- Records of incidents and accidents were effective and monitored for any trends.
- The registered manager was able to learn lessons from events that occurred. Any outcomes or lessons learnt were shared with staff and the appropriate bodies.

Is the service well-led?

Our findings

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 our last inspection we rated this key question good. At this inspection the rating has remained good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- Staff told us they were well supported by the registered manager. One staff member told us, "The registered manager is approachable and is very kind."
- The registered manager had in place a range of checks and audits in place. However, these had not picked up changes needed to people's 'as and when required' medicines.

We recommend that the providers medicines audit review 'as and when required medicines' records in more detail.

Promoting a positive culture that is person-centred, open, inclusive, and empowering, which achieves good outcomes for people

- The registered manager encouraged people and staff to be open with each other. Staff felt supported by their colleagues .
- Managers promoted equality and diversity in all aspects of the running of the service.
- Staff felt able to raise concerns with the management team.
- People's relatives shared their feedback with us on the positive culture of the service. One relative told us, "I don't go to bed at night and worry about my relative. We've seen a difference in them they're happier now" ad, "The staff are the best thing. They are fab."

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

- The registered manager was aware of their responsibility under the duty of candour regulations.
- There had been no recent incidents that required a response under the duty of candour.

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

- People were supported and enabled to express their views and needs.
- Regular staff and resident meetings were held which gave the opportunity for people to raise any concerns and for the management team to inform people of any changes within the service.
- People, and those important to them, worked with managers and staff to develop and improve the service.

Working in partnership with others

- The service looked to work in partnership with a range of other health and social care services.
- Records showed there was regular contact with GPs, practice nurses and a range of other health care professionals.