

Concept Care Solutions Limited

Concept Care Solutions Ltd (Edgware)

Inspection report

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Ratings

Overall rating for this service	Good ●
Is the service safe?	Good ●
Is the service caring?	Good ●
Is the service responsive?	Good ●
Is the service well-led?	Good ●

Summary of findings

Overall summary

Concept Care Solutions Ltd (Edgware) is a domiciliary care agency providing personal care to 41 people at the time of the inspection. The service supported older people, children and young adults with physical and learning disabilities, mental health needs, Autism and Asperger's.

Not everyone who used the service received personal care. CQC only inspects where people receive 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

People told us people they were happy with the care and support they received because they felt safe and their needs were met by kind and caring staff.

At the last inspection we found there were breaches of the regulations. Safeguarding incidents and allegations of abuse had not always been properly managed or reported as necessary to the Commission. Robust governance was not in place; audits and checks had been ineffective in driving the necessary improvements, and staffing levels were not always safe. At this inspection Improvements had been made in all these areas.

People had access to healthcare services and were involved in decisions about their care. Partnerships with other agencies and health professionals enabled effective outcomes for people. Staff supported people to take medicines safely.

Risks to people were assessed and regularly reviewed. Staff understood the actions needed to minimise the risk of avoidable harm including the prevention of infection. Staff had completed safeguarding training and understood their role in identifying and reporting any concerns of potential abuse or poor practice. There were improved systems in place to record or track incidents and allegations of abuse.

People and staff praised the managers of the service and agreed that they were approachable, knowledgeable, fair and did their job well. The staff team worked well together and supported the registered manager.

The staff team was committed to providing a high-quality service. They had undertaken training so that they were skilled and knowledgeable to effectively meet people's needs. Staff understood their responsibilities to report any concerns.

Staff encouraged people to be as independent as possible and respected people's privacy and dignity.

People were given choices about the way in which they were cared for. Staff listened to them and knew their needs well. Care plans contained information about each person's individual support needs and

preferences in relation to their care and we found evidence of good outcomes for people. When people did not have the capacity to make their own decisions, staff maximised their involvement and made decisions in their best interests, in accordance with legislation.

Recruitment practices were safe and relevant checks had been completed before staff worked at the service.

People told us that staff were able to meet their needs and were respectful of their individual preferences. Relatives told us staff who supported their loved ones were kind and caring.

People confirmed the service did not miss any care calls and that staff were usually on time.

People received care and support from a small group of staff, which provided consistency.

The managers of the service actively sought the views of people and their relatives about the running of the service and they dealt promptly with any concerns that people raised.

The provider had systems in place to monitor and improve the quality and safety of the service provided.

More information is in the full report.

Rating at last inspection

The last rating for the service was requires improvement (published 3 December 2019).

The provider completed an action plan after the last inspection to show what they would do and by when to improve.

We undertook this focused inspection to check they had followed their action plan and to confirm they now met legal requirements. This report only covers our findings in relation to the Key Questions, Safe, Responsive, Caring and Well-Led which contain those requirements. At this inspection we found improvements had been made and the provider was no longer in breach of regulations. The ratings from the previous comprehensive inspection for those Key Questions not looked at on this occasion were used in calculating the overall rating at this inspection. The overall rating for the service has changed from Requires Improvement to Good. This is based on the findings at this inspection.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our inspection programme. If we receive any concerning information, we may inspect sooner.

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 caring?

Good ●

The service was caring.

Details are in our caring findings below.

Is the service responsive?

Good ●

The service was responsive.

Details are in our responsive findings below.

Is the service well-led?

Good ●

The service was well-led

Details are in our well-led findings below.

Concept Care Solutions Ltd (Edgware)

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 planned this inspection to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Inspection team

The inspection team consisted of two inspectors and two experts 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

This service is a domiciliary care agency. It provides personal care to people living in their own houses and flats. The service had a manager registered with the Care Quality Commission. 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.

Notice of inspection

We carried out the inspection visit on 26 May 2021. We gave a short period notice of the inspection as we were mindful of the impact and added pressures of Covid-19 pandemic on the service. This meant we took account of the exceptional circumstances and requirements arising as a result of the COVID-19 pandemic.

What we did

We reviewed information we had received about the service since the last inspection. The provider was not asked to complete a provider information return prior to this inspection due to the timing of the 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.

During our inspection we went to the service's office and spoke with the registered manager, the regional manager and five care staff. We looked at four care records and three staff records; we also looked at various documents relating to the management of the service. We discussed quality assurance with the registered manager and regional manager and the actions they had taken since the last inspection to improve quality, and planned changes. We also received feedback from the local authority commissioning team. After the inspection visit, we spoke to five relatives and 18 people who used 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 requires improvement. At this inspection this key question has improved to good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

At our last inspection the provider had failed to ensure that systems in place to safeguard people from harm and abuse. People were exposed to the risk of harm because the systems in place to safeguard people from harm and abuse were not followed properly by staff. This was a breach of Regulation 13 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014, Safeguarding service users from abuse and improper treatment

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 13.

- There were systems in place to record or track incidents and allegations of abuse reported. Incidents were reported to the Commission in line with procedures.
- People we spoke with, told us they felt safe using the service, one person told us, "They're very, very good, I feel safe with all of them "and "Oh yes, treat me very well, I do feel safe with them."
- Staff knew what to do and to whom to report if they had any concerns about people's safety and had completed relevant training.
- A member of staff told us, "We protect peoples well-being and ensure they are not in any danger we discuss with our manager anything that raises a concern."

Assessing risk, safety monitoring and management

- The staff assessed all potential risks to people and put guidance in place so that the risks were minimised. Risk assessments were developed that maximised people's independence and ability to remain in control of their life.
- Environmental risks and potential hazards within people's homes had been identified and were managed appropriately

Staffing and recruitment

At our last inspection people and relatives we spoke with told us about inconsistencies with staff and poor time keeping which had caused them to receive an unsatisfactory service. This was a breach of f Regulation 18 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014, Staffing.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 13.

- The service followed a recruitment policy so that they were as sure as possible that people were suitable to work at this service. They carried out checks, such as criminal record checks and references.
- People were supported by enough staff to meet their needs. Staffing arrangements provided the flexibility

to meet people's changing needs whilst ensuring consistent care. Everyone we spoke with confirmed that they had regular carers which gave them continuity in their care. People also recognised that some changes and lateness in staff were unavoidable due to sickness, holidays and traffic restrictions

- People described the staff as reliable and confirmed that they stayed for the agreed length of the visit and only left earlier if asked to do so.
- Comments included, "Calls on time, never missed a call" and "If they are running late, they phone me, they've never missed a call"
- People and their relatives told us they knew the staff well and had built good working relationships with them.

Using medicines safely

- People received their medicines when they were needed and in ways that suited them. There were systems in place to ensure this was done safely.
- People had their medicines administered by staff who had completed safe management of medicines training and had their competencies checked regularly.

Preventing and controlling infection

- The agency had systems in place to make sure that infection was controlled and prevented as far as possible.
- Staff had undertaken training and were fully aware of their responsibilities to take appropriate measures to protect people from the spread of infection.
- Staff had access to personal protective equipment (PPE), for example, masks, gloves and aprons. This helped to minimise the risk of infections spreading.
- This inspection took place during the Covid 19 pandemic. The registered manager reported that they had taken action to ensure staff followed appropriate infection control practices. This included ensuring there was a good stock of personal protective equipment known as PPE) which was provided to them by the local authority

Learning lessons when things go wrong

- The service had a system in place to monitor incidents and understood how to use them as learning opportunities to try and prevent future occurrences.
- The management team would review risk assessments and care plans following incidents to prevent re-occurrence.

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 requires improvement. People did not always feel well-supported, cared for or treated with dignity and respect. At this inspection this key question has improved to good. People were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; equality and diversity

- People told us that staff were kind and caring. Comments included, "In my view, caring is one of the worst jobs in the world. My dad is difficult. They need a medal and they're doing a great job" and "They're like friends, they really are excellent. I look forward to seeing them. We talk, we laugh – it's good. They keep me alive."
- Staff we spoke with were knowledgeable about people's preferences, personalities and things that were important to them. This indicated staff had caring relationships with the people they looked after.
- People told us their individual needs and wishes in respect of their values, culture and religion were respected.
- Staff we spoke with were aware of people's needs, choices and preferences. They respected people's religious and cultural preferences.
- People were asked if they preferred a female or male care worker and this was recorded in their care plans.

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

- People and their representatives were regularly asked for their views on their care and their plans. A person told us, "My needs do change due to my illness, yes, they do update my care needs."
- Staff told us that they had enough time to engage with people to make sure that each person had everything they needed, and that travel time was kept to a minimum.
- People who used the service confirmed that they usually had their needs met by a small group of staff and that they always knew who was going to be visiting them
- Most staff had worked for the agency for many years, this meant there was consistency and continuity in care.

Respecting and promoting people's privacy, dignity and independence

- Respect for privacy and dignity was at the heart of the service's culture and values
- People were supported to be as independent as possible. Care plans reflected what people were able to do for themselves and how to encourage them to do this.
- One person told us, "You get to know them well and they do listen to what I want. They're kind and they never rush me."
- People's personal information was kept secure and staff understood the importance of maintaining secure documents and care records to ensure people's confidentiality was maintained.
- People had no concerns about the way staff treated them. Staff described ways they protected people's

privacy and dignity, such as knocking on doors and closing the curtains.

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 requires improvement. People had raised complaints with the service but not received a response. At this inspection this key question has improved to good.

People's needs were met through good organisation and delivery.

Improving care quality in response to complaints or concerns

- People were given information about the service and how to complain when they first started to receive support from the service.
- People told us they knew how to complain if they needed to and felt confident that they would be listened to.
- The complaints procedure explained how to make a complaint and set out how people could expect any concerns or complaints to be dealt with.
- Complaints were acknowledged, investigated and resolved in line with this policy.
- Comments included, "I've never complained but I would know how to. They're very accommodating with the times when I've got appointments like at the hospital", "I've got no complaints whatsoever. I never ring the office but they're very good at keeping in touch" and "If I make a call for help they always respond and nine times out of ten they'll put it right."

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

- People and their relatives told us they were happy with the care and support provided.
- Staff confirmed they checked people were happy and had everything they needed before they left them.
- Care plans were personalised and detailed clearly how the person wanted their needs and preferences met. Each person's plan was regularly reviewed and updated to reflect their changing needs. People confirmed that staff either knew how they liked things to be done or they felt very able to guide staff in what they needed.
- People received personalised care and support specific to their needs and preferences. Care plans reflected people's health and social care needs and demonstrated that other health and social care professionals were involved.
- Care plans gave staff detailed guidance so that staff knew each person's individual likes and dislikes.
- When people's needs changed this was quickly identified and prompt, appropriate action was taken to ensure people's wellbeing was protected.

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.

- Where people had specific needs relating to the way in which they communicated, or the support required around their communication, this was recorded within the person's care plan.

- This included information about any support aids that the person may use to support them with their hearing or their eyesight.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- Staff explained the importance of developing and maintaining relationships with people they supported to avoid social isolation.

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 requires improvement. The provider failed to ensure they complied with the requirements of their registration. Allegations of abuse and other incidents which the provider is legally required to inform us of, had not been notified to the Commission. This was in breach of Regulation 18 of the Care Quality Commission (Registration) Regulations 2009, notification of other incidents

Enough improvement had been made at this inspection and the provider was no longer in breach of Regulation 18. The service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

- The provider had improved their systems to ensure they complied with the requirements of their registration. Allegations of abuse and other incidents which the provider had not been notified to the Commission.
- The registered manager who was also the provider, had effective oversight and governance of the service's safety and quality to ensure all regulatory requirements were met.
- People and relatives expressed confidence that the service was well run. We received comments such as, "They're well managed with me. They never let me down and I don't think there's anything to improve" and "The manager is very friendly, very approachable and a good communicator. Minor issues are always dealt with, not ignored, and she'll contact me if there are any issues."
- Staff told us they felt well supported by the management team, comment included, "My manager is lovely, they care about us as much as the clients" and "They are very supportive and always listen to us."
- The management team were clear about their roles and responsibilities and felt well supported by the registered provider. People and staff said there was a clear management structure in place and that they were always responsive to any issues raised.
- The registered provider continually monitored the quality of the service provided to people. Surveys were sent to people as well as discussions with people during reviews and unannounced spot checks on staff. This meant they were continually checking to ensure that people received the best possible care and support.
- Records of staff meetings, quality assurance and audits showed that when issues were identified, these were shared appropriately and action was taken to address any shortfalls. Spot checks were carried out to ensure staff were following their training and meeting people's needs.

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

- The management team and staff were motivated to provide the best possible person-centred care and support for people.
- People and staff told us the managers were very approachable and that they would have no hesitation in

raising concerns or making suggestions.

- Quality assurance surveys were sent out to people y. The most recent survey had been completed in February 2021. The report showed high rates of satisfaction.
- Staff said they felt comfortable to put forward any ideas they may have to improve the care, support or wellbeing for people and were confident these would be acted upon.

Continuous learning and improving care

- There was a process of continual improvement and quality assurance in place. There was a variety of audits completed to ensure the quality of the provision was maintained.
- The number of missed calls were kept to a minimum by regular audits and an Electronic Call Monitoring system. Everybody we spoke to told us they had not had any missed calls.
- There was evidence of learning from incidents. Investigations took place and appropriate changes took place and appropriate changes were implemented.