

Amica Care Trust

Signature Care

Inspection report

3 Maumbury Gardens
Brewery Square
Dorchester
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Tel: 01305253842

Date of inspection visit:
31 March 2022

Date of publication:
03 May 2022

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

Signature Care provides personal care to people living in their own homes in Signature House Apartments, Dorchester. Not everyone supported by 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. At the time of the inspection the service was providing personal care to one person.

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

There was a person-centred culture in the service. The team were proud of their work and sought to ensure they were delivering care in a way that suited the person. The person who received care described that for them this meant they received care from "marvellous" and "respectful" staff.

The person felt safe with staff coming into their apartment to support them. Staff knew how to recognise and report any safeguarding concerns. Risks were assessed and managed and we were told by the person that they were supported safely by the staff. They told us "They all know what they are doing. I trust them implicitly." Topical medicines were managed safely by trained and competent staff.

We received positive feedback about the provider's infection prevention and control processes. Staff were confident explaining their use of personal protective equipment (PPE) and the person and their relative told us staff always wore PPE appropriately.

The person received their care from a small and consistent team of staff who knew them well and understood their needs and preferences. The person appreciated the rapport they had built up with these staff and told us "I get excellent care from them all." They also told us they had never missed a call and they were told about any changes to time or personnel.

Staff felt very well supported and trained to ensure they had the skills to provide safe, effective and respectful support.

People's needs were assessed before the service began to provide care and support. This ensured that the service was able to identify any personal care needs and this assessment, including the person's preferences, had informed a clear care plan outlining how staff should deliver care.

The person was supported to have maximum choice and control of their life 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.

The service was well-led. There was an open culture within the staff team that maintained a focus on the people they supported. The person who received personal care was extremely complimentary about the management and described how their feedback was sought out regularly. Audits and checks were

completed to monitor the quality and safety of the service. There were clear processes in place to drive improvement and to continually develop the service in line with the needs of both the person who currently received personal care and others living in the apartment block who may need this service.

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

Rating at last inspection

This service was registered with us on 26 August 2020 and this is the first inspection.

Why we inspected

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

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 effective?

Good ●

The service was effective.

Details are in our effective 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.

Signature Care

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 team was one inspector.

Service and service type

This service is a domiciliary care agency. It currently provides personal care to people living in their own apartments within a purpose-built block for people over 55 years old.

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 gave the service 48 hours' notice of the inspection visit. This was because it is a small service and we needed to be sure that the provider or registered manager would be in the office to support the inspection and we wanted to be able to speak with the person who received the service.

Inspection activity started on 29 March 2022 and ended on 1 April 2022. We visited the location's office on 31 March 2022.

What we did before the inspection

We reviewed information we had received about the service since registration. 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 used all this information to plan our inspection.

During the inspection

During the inspection we visited a person and their relative. We visited the office and spoke with the registered manager, a member of staff and a representative from the provider. We looked at records related to the person's care and the oversight and management of the service. This included a staff file, training records, risk assessments and audits.

After the inspection

We sought further information about the provider's plans for the service. We received this information on 1 April 2022.

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 of this newly registered service. This key question has been rated Good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- The person using the service told us they felt safe with the staff who supported them. They told us, "I always feel comfortable with them."
- Staff had received training and knew how to recognise potential signs of abuse. Staff were confident to share concerns with the registered manager or provider and other agencies. One staff member explained there was a whistleblowing policy that had the contact details of other agencies.
- The registered manager understood how to report potential safeguarding incidents to the local authority and the Care Quality Commission.

Assessing risk, safety monitoring and management

- The person was protected against identified risks and the staff had systems in place to identify emerging risks. Risk assessments informed care plans that detailed the measures in place to manage and minimise risks.
- Staff were trained to support people safely, for example they received training in moving and assisting, first aid, falls, and fire safety. Staff had either completed this training or had the training scheduled.
- Environmental risk assessments were completed. We discussed the risks associated with batteries on electric mobility aids. The registered manager and provider added this risk to their assessments.

Staffing and recruitment

- The provider carried out thorough staff recruitment checks to ensure staff were suitable to work at the service.
- There were enough staff to ensure that the person received consistent care at a time that suited them. This meant they had established a rapport and built trust with the staff who provided their care.
- The person, and their relative, told us there had been no missed calls and staff turned up on time. They said if ever staff were delayed, they were contacted, and it was never a very long delay.

Using medicines safely

- The person only had support from the staff with topical creams. They told us these were administered correctly. Staff had clear information about how to apply this cream and signed to record when it had been administered.
- Staff had received medicines training and had been assessed as competent.

Preventing and controlling infection

- Effective infection prevention and control procedures were in place, including those relating to COVID-19. Staff explained how they used PPE (personal protective equipment) with confidence.
- Staff tested for COVID-19 in line with current guidance.

Learning lessons when things go wrong

- There were systems in place to record incidents and accidents and what action had been taken. Whilst no incidents or accidents had occurred relating to the regulated activity, the registered manager described how the system had been used to reduce risks and achieve good outcomes for people living in the apartment block.
- Staff described an open culture where any learning points could be discussed.

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

- People's needs were assessed before they started to use the service. This ensured any regulated personal care needs would be identified and ensured those needs could be met. This information was used to create a personalised care plan and risk assessments for the person.

Staff support: induction, training, skills and experience

- The person and their relative told us that they received support from staff who had the skills and knowledge they needed.
- Staff received an induction aligned to the Care Certificate. The Care Certificate is the recognised standard for training for staff new to health and social care.
- Staff shadowed experienced staff until they were ready to work alone. One staff member described all the training they had received and told us that in addition to the training they could go to the registered manager "whatever the scenario" for advice and support.
- Spot checks were scheduled based on the needs of the person. This meant if staff were providing care to someone who was more vulnerable they would have more spot checks. Spot checks covered the skills the staff needed to provide personalised care and included the person's views.
- Staff received formal support through supervisions and appraisals. A staff member told us that this framework was effective and valuable to them.

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

- No one received support to eat and drink at the time of our inspection. Staff had access to food hygiene and dysphagia training.

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

- Staff had worked with healthcare professionals and other agencies to support people who did not need personal care. This meant they had established relationships with teams in the local area.
- Staff monitored a health need and liaised with the health professionals who supported the person if appropriate.

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.

- Consent to care and treatment was sought and recorded in line with the principles of the MCA 2005.
- Staff told us they always asked people for their consent before they provided care and support. The person told us staff always checked with them before they provided any care and support.

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

- The person and their relative told us they were always treated with respect and kindness by compassionate and familiar staff.
- There was a strong, person-centred emphasis that was evident in the systems that were in place and the way staff spoke about their work.

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

- The process for developing and reviewing care plans involved the person on a regular basis.
- The person told us that staff ensured that they checked before carrying out any tasks.

Respecting and promoting people's privacy, dignity and independence

- Staff supported the person to maintain their privacy, dignity and independence. Respect for privacy and dignity was embedded in the way staff delivered care. The person told us, 'They (staff) are very respectful – they would not draw a drink from the tap without saying "may I?"'
- Staff promoted independence very effectively. The person told us the staff only did what was necessary and understood how important their independence was to them.

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

- Care was planned to meet individual needs and was delivered in a way to ensure choice and continuity of care. The person was involved in planning their care and reviewing care needs to ensure the right support in line with their preferences.
- The person's care plan gave staff the information they needed to provide safe and effective care and support. Care was delivered by a team of staff who knew the person and their loved ones very well.
- The person and their relative described a flexible and responsive service that they would not hesitate to recommend to others.

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisation's what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- Communication needs were detailed in the person's care plan. This included preferred methods of communication and any impairments that could affect communication. This meant staff knew the most helpful communication methods for the person.

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

- The person received support in a way that respected their relationships. They did not require staff support with this aspect of their life.
- The team organised and supported a range of social / community events within the block of apartments. These activities and events afforded people the opportunity to get together, stay active and feel part of a community that the person and their relative described as 'a big family'.

Improving care quality in response to complaints or concerns

- Information was available as to how to raise concerns or make a complaint if needed. No complaints had been raised since the registration of the service.
- The person said they felt able to raise any concerns but had not needed to.

End of life care and support

- The service had no one receiving end of life care at the time of the inspection.
- The registered manager and staff knew how to support someone at the end of their life from previous experiences. The team had links with specialist end of life services and had drawn on expertise and guidance to provide appropriate care.

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 Good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- The service was person centred with a culture that focussed on achieving the best outcomes for people. The registered manager and a representative of the provider organisation described how they planned to grow within the wider Brewery Square community at a pace that ensured their culture and quality were protected.
- We heard that the service was reliable and supported choice. The person described their care and told us, "I am extremely happy."
- The person, their relative and staff told us the service was well managed. All said they would recommend the service to others. The person told us, "Any chance I get to praise them I will."

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

- The registered manager and provider understood their responsibility to be transparent and honest when things went wrong or there were any near misses.
- The provider was aware of their responsibility to notify CQC of significant events which had occurred within the service.

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

- The registered manager, provider and staff were clear about their role and responsibilities. The registered manager and provider were committed to the continual improvement of the service. They also engaged in national and local forums to maintain their knowledge.
- Monitoring systems were in place which included audits and quality assurance systems to help identify and implement improvements. This included audits of people's care plans and records, accidents, incident or near misses, compliments and any safeguarding concerns.
- People were supported by a team that was well led. Staff were motivated to develop their skills and were enthusiastic about their work.
- Staff confirmed the registered manager and provider were supportive and accessible.

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

- There were systems in place to involve people, relatives and staff in the running of the service. Everyone

spoke positively about their involvement in the service and felt they were listened to.

- The person told us that the registered manager regularly sought their views about the service. This was often an informal "Everything alright?" but they also sought feedback on staff and carried out regular reviews.

Working in partnership with others

- The registered manager and provider liaised with professionals and organisations to make sure people received care which met their needs. This meant that there were established working relationships with local organisations that would be utilised to achieve good outcomes to anyone they provided a regulated activity to.