

# Springfield Home Care Services Limited

# Springfield Healthcare (Darlington)

### **Inspection report**

Unit 2, Aspen House Chesnut Street Darlington DL1 1QL

Tel: 01325353997

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### 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

Springfield Healthcare (Darlington) is a domiciliary care agency based in Darlington. It provides personal care and other additional support to people living in their own homes throughout the Darlington area. It provides a service to older adults, younger disabled adults and children with a wide range of health and social care needs including physical disabilities, learning disabilities, mental health needs and people living with dementia. At the time of our inspection there were 188 people receiving a service.

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 and what we found

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.

Risks to people's health, safety and well-being were effectively managed. Medicines were administered safely. The provider had effective infection prevention and control systems in place.

The provider had recruitment processes in place to ensure suitable staff were employed. People told us they felt safe when receiving support from staff. Staff understood how to protect people from poor care and abuse. Staff had training on how to recognise and report abuse and they knew how to apply it.

People told us staff generally arrived on time and staff had the right skills to support them. People's needs were assessed prior to the commencement of the service. The assessment included people's health, physical, emotional and communication needs. Care provided was personalised and supported people's preferences and wishes. Care plans had been reviewed regularly to ensure they were accurate.

People and staff spoke positively about the management of the service and their openness to feedback. The management team was approachable, maintained regular communication, and listened to the views of others.

Systems to monitor the quality and safety of the service were in place. The provider was open to improvement and listened and acted on feedback.

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

Rating at last inspection

The last rating for this service was rated good (published 30 May 2018).

#### 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 well-led?                           | Good • |
| Is the service well-led? The service was well-led. | Good   |



# Springfield Healthcare (Darlington)

**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

This inspection was carried out by 1 inspector and 1 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

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

#### 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

This inspection was unannounced.

Inspection activity started on 14 November 2023 and ended on 16 November 2023. We visited the location's

office on 14 November 2023.

#### What we did before the inspection

We sought feedback from the local authority and healthcare professionals who work with the service. 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 this information to plan our inspection.

#### During the inspection

We spoke with the registered manager and operations support manager. We spoke to 3 office coordinators, a regional recruitment lead, a compliance and engagement officer and 4 staff. We spoke with 12 people receiving support and 7 relatives.

We reviewed 4 people's support records, including the administration of medicines. We looked at staff files in relation to recruitment, and a variety of records relating to the management of the service, including policies and procedures.

We asked the registered manager to send us documents after the on-site inspection. These were provided in a timely manner and this evidence was included as part of our inspection.



## 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. At this inspection the rating has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- The provider had appropriate systems in place to safeguard people from abuse.
- The registered manager ensured staff were aware of the different types of abuse. Staff had been trained in their responsibilities for safeguarding adults and knew what action to take if they witnessed or suspected abuse.
- Actions were taken by the provider to keep people safe and to share any lessons learned to help prevent recurrences.
- One person told us, "Once you get to know them and begin to trust them I do feel better, safer having them come in the house."

Assessing risk, safety monitoring and management

- Risks to people had been assessed and reviewed. The provider had systems in place to identify and reduce the risks involved in supporting people.
- Staff managed the safety of the office environment and people's living environment. Regular checks on equipment and maintenance were made.
- Staff had completed the appropriate mandatory training to keep people safe. One staff member we spoke with said, "I would report to higher management straight away if I saw another staff member do something wrong."

#### Staffing and recruitment

- The registered manager ensured there were enough staff, with the right training and skills, to meet people's needs.
- The provider had effective recruitment processes. Recent records showed staff being recruited safely, with appropriate checks completed. Staff told us they had received training to support them in their role.
- The service had an electronic system to enable coordinators to track late calls effectively and to make alternative arrangements through consultation with people where appropriate. No calls had been missed and staff told us managers would help with support tasks when needed.
- Most people felt introductions to new staff were effective in keeping them safe. One person told us, "I do feel safe because they are kind to me and we have a chat."

#### Using medicines safely

- The provider had processes in place to support people with prescribed medicines.
- The registered manager ensured staff received medicines training and had processes in place to assess their competency to ensure they could give medicines safely.

• People's medication records confirmed they received their medicines as required.

Learning lessons when things go wrong

- The provider had systems in place to support staff reporting and recording any accidents and incidents.
- The provider had an out of hours on call service to provide guidance and support to staff.
- The registered manager ensured lessons were learned and practice changed if any trends were identified.

#### Preventing and controlling infection

- The provider had up to date infection prevention and control and COVID-19 policies in place to provide guidance for staff.
- Staff were provided with appropriate personal protective equipment (PPE) and had completed infection prevention and control training.



## 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 our last inspection we rated this key question good. The rating for this key question 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.

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

- There was a positive culture in the office during our visit which created a warm, relaxed and caring atmosphere.
- The registered manager and coordinators led by example and demonstrated an open and transparent approach. We observed staff interacting positively with each other and other professionals.
- Staff told us the registered manager was a positive leader who shared good ideas and practice, along with communicating any operational changes. The registered manager told us of a new staff forum they were setting up to discuss what staff want to see moving forward.
- Positive relationships existed between people, relatives and staff. People spoke well of the staff team and their approach. Comments included, "Very caring without a doubt", "Ringing the office always pickup and helpful" and "They help me maintain my independance."

Continuous learning and improving care; Working in partnership with others

- Monitoring systems in place included unannounced spot checks of staff to help ensure they were upholding the provider's values of good quality care. Staff were then given feedback on what they did well and any areas to be improved upon.
- We saw evidence that when things went wrong these were discussed with the staff team to allow reflection and lessons learnt to help reduce the risk of recurring themes.
- The registered manager ensured people were included in the local community by working closely with other agencies to support people's social and cultural needs. We saw a letter from one person who praised their carer, who had helped them go out into the community after many years of being isolated in their home due to anxiety.

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 the requirements under the duty of candour. People and their relatives were kept informed of issues when needed. Statutory notifications had been submitted to CQC in line with requirements.

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

- The provider was actively involved in the service. The operations support manager and registered manager met regularly.
- Audits and performance checks were used to manage the service, maintain standards and identify areas for improvement.
- Audits contained clear action plans to address any concerns found.