

Medevent Limited

Medevent Limited

Inspection report

33 New Hey Road
Huddersfield
West Yorkshire
HD3 4AL

Tel: 01484450920
Website: www.medevent.com

Date of inspection visit:
01 May 2019

Date of publication:
01 July 2019

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: Medevent Limited offers a range of supported living, domiciliary and specialist care services for both adults and children. At the time of this inspection one person was receiving the regulated activity of personal care.

The care service has been developed and designed in line with the values that underpin the Registering the Right Support and other best practice guidance. These values include choice, promotion of independence and inclusion. People with learning disabilities and autism using the service can live as ordinary a life as any citizen. The service was delivered in line with these values.

People's experience of using this service:

The person's relative told us the person's behaviour and body language indicated they were happy and safe. Staff had a good understanding of how to safeguard adults from abuse and who to contact if they suspected any abuse had taken place.

Risk assessments were individualised and minimised risk whilst promoting independence. A robust system of managing incidents kept the person safe.

Staff felt supported with an induction and role specific training, which ensured they had the knowledge and skills to support the person. Meals were planned around the person's tastes and preferences.

The person received a good level of support to lead a fulfilling life. They were supported to maintain good health and had access to healthcare professionals and services.

The person was supported to have maximum choice and control of their life and staff supported them in the least restrictive way possible; the policies and systems in the service supported this practice. Mental capacity assessments and best interest decisions had not always been completed where capacity was in doubt.

We made a recommendation about this.

Staff were caring and supported the person in a way that maintained their dignity, privacy and independence skills. The person experienced person-centred care and engaged in social and leisure activities which they chose.

The registered provider had good systems of governance in place to drive improvements to the quality of the service.

Further information is in the detailed findings below.

Rating at last inspection: At the last inspection the service was rated good and remained good at this inspection (last report published 12/11/2016)

Why we inspected: This was a planned comprehensive inspection which took place on 1 May 2019 and was announced.

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

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.

Medevent Limited

Detailed findings

Background to this inspection

The inspection: We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, 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 took place on 1 May 2019 and was announced to ensure someone would be in the office. The inspection was conducted by one inspector.

Service and service type: Medevent Limited offers a range of supported living, domiciliary and specialist care services for both adults and children.

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.

What we did: Prior to our inspection we reviewed all the information we held about the service. This included information from notifications received from the registered provider, feedback from the local authority safeguarding team and commissioners. We reviewed all the information we had been provided with from third parties to fully inform our approach to inspecting this service.

On this occasion we did not ask the registered provider to complete a Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make.

During our office visit we spent time looking at the persons care plan, we also looked at three records relating to staff recruitment, supervision and training, and various documents relating to the service's quality assurance systems. We spoke with the registered manager and the director. We visited the person at home and spoke with one relative and two care staff.

Is the service safe?

Our findings

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

Good: People were safe and protected from avoidable harm. Legal requirements were met.

Systems and processes to safeguard people from the risk of abuse

- The persons relative told us they were settled and happy and we saw they smiled and interacted happily with care staff. Staff we spoke with knew how to ensure people were safeguarded against abuse and the procedure to follow to report any incidents.

Assessing risk, safety monitoring and management

- Risks were minimised by detailed risk assessments, with clear directions for staff and included the positive benefits of the right to take risks. They included taking part in wide a variety of activities outside the home, road safety, falls, mobility, adequate nutrition and hydration, safety on transport, and specific health conditions. Risks were rated according to seriousness with a clear list to instruct staff on what constitutes each level of risk for the person, and how to minimise them.
- Staff members we spoke with knew how to support the person if they experienced behaviours that may challenge others and how to prevent this from occurring through diversions and proactive person-centred support.

Staffing and recruitment

- The registered provider deployed sufficient numbers of staff to meet the persons assessed needs and support them to lead the life they chose. The relative we spoke with said there was a consistent team of staff who were matched to the person, "Medevent are very good at changing staff if they don't get on."
- Recruitment procedures were safe.

Using medicines safely

- The registered provider planned to administer medicines for the person in the near future. Staff had completed medicine training. The registered provider sent us their updated medicines policy following our inspection.

Preventing and controlling infection

- People were protected from the spread of infections by good staff practice and there was a good supply of personal protective equipment.

Learning lessons when things go wrong

- The registered provider demonstrated learning from incidents and proactive action to embed the prevention of future risks. For example; the person sustained a minor skin injury during trampolining and the service consulted with family to enable the person to continue to complete the activity by finding a safe way to cover their skin for protection.

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

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

- Physical, mental health and social needs had been assessed and the care plans included guidance and information to provide direction for staff and ensure care was provided in line with current good practice guidance.

Staff support: induction, training, skills and experience

- Staff were provided with an induction, training, supervision and appraisal to ensure they were able to meet people's needs effectively. One staff member said, "Training is absolutely wonderful."

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

- The person lived with their family and staff supported with meals. Meals were planned around their tastes and preferences and Individual dietary requirements were met.

Staff working with other agencies to provide consistent, effective, timely care

- The service had good relationships with community professionals to achieve best practice and help people to achieve good outcomes.

Supporting people to live healthier lives, access healthcare services and support

- The service was proactive in identifying the persons health needs and promoting a healthy lifestyle. Records showed they had good access to external health professionals when required to meet their care and treatment needs.

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.

- We checked whether the service was working within the principles of the MCA. The staff members we spoke with had a good understanding of the Mental Capacity Act and it was clear from observations and records the persons autonomy, choices and human rights were promoted. A mental capacity assessment and best interest decision had not been recorded to evidence consent to the care plan, although it was clear the persons choices were promoted and their relative was heavily involved. The director sent evidence this had been completed after our inspection.
- We recommend the service consult best practice in this area.

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

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 relative we spoke with said, "Staff are caring, very much so. They all love [my relative]. [My relative] is now sleeping at night due to the dedication of staff." We visited the person and their relative at home. We observed very caring, warm and respectful interactions from staff. Positive caring relationships were developed through staff understanding the persons needs and their personality. One staff member said, "[Name of person] is such a wonderful soul. Spending time with [them]. I love my job. We all work as a team."
- Equality was promoted within the service and staff knew how to support the cultural needs of people from different ethnic and religious backgrounds.

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

- The person was living with multiple sensory impairments and staff used speech, touch, gestures, photographs, symbols and facial expressions to support the person to make choices and communicate their preferences. Staff were patient and respected their response.
- Care plans contained details of how to recognise when the person was unhappy or happy using nonverbal cues, including when they may be in pain or unwell and the steps to take to improve their wellbeing. Staff were aware of how to access advocacy services if the need arose.

Respecting and promoting people's privacy, dignity and independence

- Staff knew how to maintain the persons privacy and dignity, for example when delivering personal care and giving the person private time where needed.
- The service had an enabling ethos which tried to encourage and promote choice and independence. For example; the person was encouraged to maintain their self-help skills with eating and drinking and to use public transport and community facilities with staff support.

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs

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

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

- The relative we spoke with said the person had an excellent life. We saw the person was involved in every aspect of their support. We looked at their care plan and found it was person-centred and explained in detail how they liked to be supported. Care plans contained detailed information covering every aspect of support. Care plans specific to individual health conditions were also completed, including good practice information and guidance for staff.
- The person and their relative was involved in regular person-centred planning reviews, where they set their objectives and goals. These were reviewed and updated regularly, or when needs changed.
- The person was supported to take part in a range of person-centred activities and to lead a fulfilling life. We observed the person return from a day out at a local activity centre. They then enjoyed a sensory massage and played on a games console with staff support. Activities were tailored to their individual needs and they frequently participated in their local community and on trips further afield, such as trampoline parks, train rides and camping trips.
- The service met the Accessible Information Standard. This requires the service to ask, record, flag and share information about people's communication needs and take steps to meet them. We saw staff used a variety of methods to communicate with the person according to their needs. The director had also created a series of one page 'Policies in a nutshell' in larger print for staff who would benefit from this.

Improving care quality in response to complaints or concerns

- No complaints or concerns had been raised since our last inspection. Staff we spoke with said if a person wished to make a complaint they would facilitate this and there was an easy read complaints procedure in care records.

End of life care and support

- End of life care was not currently being delivered by the service. The director said the service would record the persons future wishes along with their family if they wished to do so.

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

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

Planning and promoting person-centred, high-quality care and support with openness; and how the provider understands and acts on their duty of candour responsibility

- The family member we spoke with said, "The nominated individual [director] does a great job. If I have issues they are on it."
- Staff told us they felt supported by the director and the registered manager who acted on any concerns. One staff member said, "Definitely supported by managers. They make you feel like family."
- Staff we spoke with were clear about the organisations core principles and the registered manager told us the aim of the service was; "To give the best possible care we can. We give very bespoke care. To make clients lives as normal as possible." We saw during our inspection these aims were being achieved.
- The registered provider had a robust system to manage and reduce incidents and was aware of the duty of candour, being open and honest about any incidents that occurred.

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

- The registered provider had effective systems in place to assess, monitor and improve the quality and safety of the service. The director had recently completed a quality assurance course and used these skills to continually review and improve the service. The director and registered manager provided support and direction to staff in the field to ensure compliance with the provider's policies and procedures.
- The registered provider understood their responsibilities with respect to the submission of statutory notifications to CQC.

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

- The management team had an in-depth knowledge of the needs and preferences of the person they supported. The registered provider sought feedback from family members and the responses were positive. The service had regular contact with relatives and took their views into account.
- The person was supported to use local community facilities, which promoted equality and inclusion.
- The management team held regular staff meetings and staff told us their views were listened to. A staff survey had been completed and feedback was overwhelmingly positive.

Continuous learning and improving care/ Working in partnership with others

- The registered provider reviewed information to drive up quality in the organisation. The management team were registered health professionals who maintained their registration through continued professional development and attended training and good practice events to share up to date good

practice. The registered manager told us they were signed up to CQC emails and also kept up to date using professional publications and websites.

- The management team worked in partnership with community health professionals and organisations to meet people's needs.