

Abbey Care Solutions Limited

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Inspection report

Thrift Cottage
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Tel: 01992713011

Date of inspection visit:
22 March 2023
23 March 2023
27 March 2023

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20 April 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

Abbey Care Solutions Ltd is a domiciliary care agency. The service provides support to older people living in their own homes. At the time of our inspection 59 people were using the 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 had risk assessments completed and then used to develop care plans which guided staff on how to care for people safely. Medicines were managed safely. We received mixed feedback in relation to timings of care calls which the registered manager followed up immediately. Staff were recruited safely, and pre-employment checks were carried out to ensure suitable staff were employed. People told us they felt safe.

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.

The management team regularly reviewed the quality of support provided to people, involving the person, their families, and other professionals as appropriate. The registered manager was in the process of introducing a different system to enable them to monitor timings of calls more effectively.

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 24 October 2019).

Why we inspected

We received concerns in relation to missed calls, medicines management and staff training. As a result, we undertook a focused inspection to review the key questions of safe and well-led only. For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

The overall rating for the service has remained the same based on the findings of this inspection.

We found no evidence during this inspection that people were at risk of harm from this concern. Please see the safe and well led sections of this full report.

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

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.

Abbey Care Solutions 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 1 inspector 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

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

We gave the service 48 hours' 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 in the office to support the inspection.

Inspection activity started on 22 March 2023 and ended on 27 March 2023. We visited the location's office on 22 March 2023.

What we did before inspection

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

During the inspection

We spoke with 9 people using the service and 8 family members. We also spoke with 8 members of staff, including the registered manager. We received email feedback from 4 professionals. We looked at 6 people's care records and a selection of other records including quality monitoring records, recruitment and training records for 3 staff members.

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 for this key question has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were kept safe because staff knew them well and understood how to protect them from abuse. The service worked well with other agencies to do so.
- Staff had training on how to recognise and report abuse and they knew how to apply it. Staff told us they would not hesitate to raise any concerns. A staff member told us, "This is about the welfare of people. We make sure people are safe. If I was concerned, I would report to the office or go to CQC."
- People and their relatives told us they felt safe with staff. One person told us, "It's all good, I have just had it 4 weeks, they come every day, in the morning for a shower. It is just one [staff member] that comes, they are on time, and they wear their gloves and things. I do feel safe with them." A relative said, "I am sure [person] is safe with them [staff]."

Assessing risk, safety monitoring and management

- Risk assessments and care plans identified and included information about a range of risks including moving and handling, risks of skin breakdown and environmental risks. The care plan contained guidance for staff to follow.
- Regular reviews took place and care plans were updated to reflect any changes in people's needs. A staff member told us, "If somebody's needs changed, I would go to the office and let them know."

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). In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS)

- We found the service was working within the principles of the MCA.

Staffing and recruitment

- We received mixed feedback from people and their relatives about the timeliness of their care calls. Comments included, "Well it's the timings that are a bit off, they come three times a day and they can be up to an hour late and sometimes they don't let us know", "They are more or less on time and sometimes they do ring to let me know if they are late, it's usually the same carers" and, "I have given them a time I would like them to come (daily visit) and they try and stick to it, it's all different staff but it is staff that we know."

- The registered manager was in the process of introducing a new system that would support them to monitor the timings of call more effectively. They told us they would follow up the concerns in relation to call times. Following the inspection the registered manager confirmed reviews had been booked to review people's call times.

Using medicines safely

- Medicines were managed in a safe way.
- Staff had received appropriate training and their competency to administer medicines was assessed. One member of staff told us, "We have training and they do check what we are doing. They also just turn up for spot checks."
- We identified some minor recording issues within medication administration records. Whilst audits had identified these recording issues, they did not always clearly record what action had been taken. The registered manager told us they would ensure the action is now clearly recorded.

Preventing and controlling infection

- There were systems to help prevent and control infection. Staff were provided with sufficient personal protective equipment (PPE). One person told us, "I have just had the service a few weeks, they come once a day, they are on time. I am safe with them, and they wear their gloves and masks."
- Staff received training in infection control and there was an up-to-date infection control policy

Learning lessons when things go wrong

- There were processes in place to review incidents and accidents and learn lessons from them. There were regular meetings with staff to share lessons learnt.

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. 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.

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

- There was a positive culture at the service. One relative told us, "They are nice to [family member] brilliant in fact, I can hear them making [person] laugh and talking to them, so that's really good." A staff member told us, "I have positive relationships with people, I try to sit down with people and watch a quiz with them or talk about football or learn about their families."
- Staff were positive about working at the service. One staff member told us, "We have very good teamwork. My [family member] has dementia and they really understand and organise swaps if I need them." Another staff member said, "I can pop into the office at any time, and they are very supportive."
- A professional told us, "I truly believe Abbey Care Solutions is one of the best care companies I've ever had to deal with. The managers and carers go above and beyond."
- The registered manager understood their responsibilities to complete statutory notifications.

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

- We identified minor concerns in some audit records and some feedback related to call times. The registered manager responded promptly to the feedback that we delivered on the day of inspection and immediately took action to book reviews with people who had concerns about their call times.
- The management team had clear understanding of their responsibilities and good oversight of the quality and safety of the care people received. However, they were aware their current electronic system had limitations and were about to receive training on a new system.
- The service carried out a range of checks and audits. These included care plans, medicines audits, staff practice spot checks and complaints.

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

- The registered manager used an impartial feedback service to gather open and honest feedback from people that use the service and key stakeholders which had just been received. They told us, "It has only just arrived, so I still need to look at the feedback and look for any themes or trends."
- Staff reported that they felt involved in the way the service was run. One member of staff told us, "We have supervision and [registered manager] is very good and listens to what we have to say."

Continuous learning and improving care; Working in partnership with others

- The registered manager had access to healthcare professionals and understood the process of making referrals to other agencies where there was need.
- Professionals we contacted were positive about the service and comments included, "The Managers have empathy for service users and try hard to support them in their own homes". "Discharge planning home from hospital can be sometimes difficult as this means liaising with both the hospital ward and the discharge team, I have found [named managers] to be very supportive with this allowing for the discharges to commence safely." and, "Any concerns that are raised are dealt with in a very professional manner and dealt with quickly."
- The registered manager was committed to continuous learning and improvement.