

Edge View Homes Limited

# Clent View Domiciliary Service

## Inspection report

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## 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

This inspection took place on 13 December 2018 and was announced. We gave the provider 48 hours' notice that we would be visiting the service. This was because the service provides domiciliary care and we wanted to be sure that the manager and staff would be available.

At our last inspection visit on 26 February 2016 the service was given an overall rating of Good. At this inspection the service remained Good.

Clent View Domiciliary Service is registered to provide personal care to people in their own homes. People who use the service may have a physical disability, learning disability or an autistic spectrum disorder. On the day of the inspection there was only one person receiving support from the service in their own home. There was a registered manager in post. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act (2008) and associated Regulations about how the service is run.

The person receiving support told us they felt safe and were happy with the standard of care they received. Staff we spoke to were aware of people's risks and appropriate equipment was available for staff to use. In relation to safeguarding, staff were knowledgeable about different types of abuse and how to raise a concern.

There were sufficient numbers of staff on duty to meet the care and support of the person using the service. The provider had a robust recruitment procedure and staff were trained to meet the care needs of the person using the service. We found that there were appropriate arrangements in place for the safe management, administration and storage of medicines.

The person using the service was supported to eat and drink. The person's care and health needs were assessed and reviewed. The care was planned and delivered to meet the person's needs. The person using the service, their relative and health care professionals had been involved in the planning for their care needs. Care plans and risk assessments provided clear information and guidance for staff on how to support the person using the service.

Staff treated the person with dignity and respect and helped to maintain their independence. The person receiving support was supported by staff to participate in activities and access the community.

The person using the service told us staff asked for their consent before administering care and support. Staff understood they should gain people's consent where possible.

The person receiving support and their relative told us they were confident any concerns or complaints they had would be listened to and the matter resolved in a timely manner.

The person receiving support and their relative told us the staff, provider and manager were knowledgeable about the service and the person receiving support. Staff and management were also approachable.

We found the provider had systems in place to gather people's views on the service they received. They had taken action to respond to feedback received.

## 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 remains Good.

### Is the service effective?

Good ●

The service remains Good.

### Is the service caring?

Good ●

The service remains Good.

### Is the service responsive?

Good ●

The service remains Good.

### Is the service well-led?

Good ●

The service remains Good.

# Clent View Domiciliary Service

## **Detailed findings**

### Background to this 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.

This inspection took place on 13 December 2018 and was announced. The inspection team consisted of one inspector.

As part of the inspection we looked at information we held about the service. This included statutory notifications which are notifications the provider must send to inform us about certain events. We requested information about the service from the Local Authority (LA). They have responsibility for funding people who used the service and monitoring its quality. Before the inspection, the provider completed 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.

We visited the provider's main office location. We spoke with the only person who used the service and their relative. We spoke with three members of staff, the registered manager, senior and area manager. We also spoke with one external healthcare professional. We reviewed the care records for the person that used the service, reviewed the records for two members of staff, and records related to medicines, audits, complaints, accident records and the results of the provider's surveys.

# Is the service safe?

## Our findings

At our last inspection for Clent View we rated this key question as 'good'. At this latest inspection we found the rating for this key question remains 'good'.

The person receiving support told us, "I feel safe, the staff know what they are doing". Their relative told us, "I feel (Name) is safe, they (staff) do check to make sure (Name) is ok".

Staff we spoke to were knowledgeable about different types of abuse and had received training in how to protect people from abuse. Staff could describe the correct actions to take in response to abuse being reported or suspected and whistleblowing concerns. One staff member told us, "There are many different types of abuse such as financial, emotional and physical. If someone had an unexplained injury I would speak to the individual, record it, speak to a senior... If I was unhappy with how it was dealt with I would contact the local authority and CQC". Another staff member told us, "Sharing information is very important so that if required information can be sent to the local authority or police".

We saw the provider has completed risk assessments, such as skin care, bed rails and manual handling. The relative of the person told us, "I have observed when staff have used the hoist, they know what they are doing". Staff we spoke with were able to explain risks the person using the service had and how they minimise these risks. We saw risk assessments were reviewed and updated to reflect the person current medical conditions.

The person receiving the service told us there were sufficient staff available to ensure they were safe. The person told us "There are enough staff to support me, two carers support me with personal care". The relative of the person told us, "(Name) has two carers for personal care and one staff member when accessing the community, there is enough staff on duty". Staff told us there were enough staff on duty and they had sufficient support to complete tasks without feeling rushed. One staff member told us, "We have enough staff on duty, I never feel like I'm rushing through a call. The manager uses a staffing rota and we all help each other out if shifts need to be covered". We found the person using the service had a fixed number of hours per week for support and the registered manager had an appropriate system in place to ensure the hours were delivered.

We found robust recruitment procedures were in place with evidence of pre-employment checks being carried out. The recruitment records we looked at contained evidence that a DBS (a criminal record and barring list check) had been carried out. Records also contained employment references, health declarations and proof of identification. Staff we spoke with also confirmed these checks had been completed before they commenced employment.

The person receiving the service told us they received their medicines as prescribed. The person told us, "I have my medication regularly and any pain relief medication when I need it". We looked at the person's Medicine Administration Records (MAR), records were completed accurately. We saw competency checks were carried out by managers and staff had completed medicine training as reflected in the provider's

training plan.

Staff we spoke to had a good knowledge of how to provide care to maintain infection control in accordance with the policies the provider had in place. Staff told us they had access to personal protective wear, such as gloves and aprons.

## Is the service effective?

### Our findings

At our last inspection for Clent View we rated this key question as 'good'. At this latest inspection we found the rating for this key question remains 'good'.

We found assessments in relation to the needs of the person using the service. The person using the service and their relative confirmed they were involved in these assessments. The person using the service told us, "I've been involved in assessments and reviews."

Staff we spoke to told us they sought information about the person's needs, choices and any reasonable adjustments that may be needed due to any personal characteristics protected by law; for example, race, age, gender, disability and sexuality. A staff member told us, "When visiting a new place, I always call ahead to make sure they have wheelchair access. (Name) has a good relationship with a local taxi service however if they have no cars available I will call other services to see if they have vehicles suitable to transport someone with a wheelchair".

The person using the service and their relative told us that staff knew what they were doing and had the relevant knowledge and skills. The person told us, "Staff have been caring for me for some time and know what they are doing". The person's relative told us, "For some time I believed the carers lacked knowledge about people with a disability. I have spoken with the carers about some of the challenges people face with a disability, I believe they now have a better understanding. I also believe the length of time they have been caring for (Name) has resulted in them having a greater understanding of how to meet her needs". Staff we spoke to were knowledgeable about the person using the service and how to meet their needs.

Staff told us that the provider ensured they had the skills and knowledge to support the person using the service. Staff we spoke to confirmed they had completed an induction before providing care to person using the service. The induction programme involved shadowing more experienced members of staff and training. Staff newly employed also completed the Care Certificate. The Care Certificate is an agreed set of standards that sets out the knowledge, skills and behaviours expected of people working in the care sector. Staff told us the induction programme fully prepared them for meeting the needs of the person using the service.

The provider used a training matrix for overseeing training provision to ensure staff were adequately trained and had refreshers when required. One staff member told us, "I really enjoyed completing the care certificate, they're lots of opportunity to do training here". Another staff member told us, "I have completed manual handling, health and safety, medication and safeguarding training. I have enjoyed all the training opportunities".

Staff told us they received regular supervision and annual appraisals, staff records we looked at confirmed this. One staff member told us, "I have regular supervision however I can go to the manager at any time, I feel very much supported in my role".

The person receiving support told us they were supported them with meals and drinks. They confirmed that



they tried to be as independent as possible, they had control and choice over what they consumed. The person told us, "I can do most things on my own, someone comes with me when I go food shopping". A staff member told us, "(Name) choose what they eat and drink, we try to encourage to eat healthy options however it is (Name's) choice".

The person using the service had access to healthcare services and received ongoing healthcare support. Care records contained evidence of visits to/from a range of health professionals including, social workers, physiotherapist, opticians, dentists and GP's. and mental health teams. The outcome of health appointments were recorded so that any actions requested by healthcare professionals could be followed.

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 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 and found staff promoted people's rights, and consent.

The registered manager and staff told us when they involved people in the decision-making process, and considered their views, they were conscious of the need to ensure people as far as possible made their own decisions as to what they wished to do and how they lived their life. The person receiving support told us, "They (staff) ask for consent - they don't just do things". The person's relative told us, "The staff talk to (Name) when providing care, they do gain consent".

## Is the service caring?

### Our findings

At our last inspection for Clent View we rated this key question as 'good'. At this latest inspection we found the rating for this key question remains 'good'.

The person receiving support told us most of the staff were caring, respectful and kind. The person said, "Staff are nice and caring, we chat and have a laugh". The person's relative told us, "When I'm there I've had no concerns about the staff, they seem nice".

Staff members we spoke to were able to tell us how they comforted people who use the service. They were also able to tell people's interests and hobbies, and how they supported people to participate in those activities.

The person using the service told us they had been consulted about their care and support needs. Staff we spoke to were able to tell us about the person's likes and dislikes and how they preferred to be supported. One staff member told us, "We provide care for (Name) in line with their preferences, (Name) will tell us how they want the care to be delivered".

The person using the service told us, "Yes my dignity and privacy is respected". They stated that staff knocked their flat door before entering and ensured during personal care the person was covered with a towel. One staff member told us, "We always try and promote people's independence. During personal care we assist (Name) to sit on their bed so that they can wash their own face with a flannel". Staff had an understanding of the importance of promoting a person's independence.

People's care records were kept securely ensuring only care and management staff had access to them. This ensured the confidentiality of people's personal information.

## Is the service responsive?

### Our findings

At our last inspection for Clent View we rated this key question as 'good'. At this latest inspection we found the rating for this key question remains 'good'.

The person using the service told us, "I've seen my care plan I also have a copy". The person using the service and their relative told us that when they have raised issues, the matter has been dealt with by the management in a timely manner.

The person receiving support said they have had an active role in relation to the care they received. We reviewed the person's care plan and it contained details about the person's needs, and confirmation regular reviews were taking place. The care plan also contained the person's life history, likes, dislikes and preferences. Staff we spoke to were very knowledgeable about the person's preferences, health and support needs.

The person using the service and their relative told us if they had any concerns or complaints they would contact a staff member or the manager. The person confirmed they had received a copy of the providers complaints policy. During the inspection we discussed the complaints procedure with the registered manager and reviewed documentation relating to complaints. All complaints received were investigated and outcomes recorded. The person using the service confirmed that all their concerns had been investigated and resolved.

The person's care plan contained details in relation to end of life care, this documented the person's wishes including whether they would want to go to hospital if their health deteriorated.

## Is the service well-led?

### Our findings

At our last inspection for Clent View we rated this key question as 'good'. At this latest inspection we found the rating for this key question remains 'good'.

The person using the service told us the registered manager and management team were approachable and visible. The person said, "The managers listen to me and follow through on agreed actions". The person and their relative told us they had good relationships with the provider and registered manager. The person's relative told us, "The management team are friendly and approachable".

We found a range of audits in place such as medicines, equipment and the environment. Any actions taken were documented, monitored and the responsible members of staff identified.

The registered manager was aware of their legal responsibilities, for example submitting notifications in respect of any incidents to CQC. The registered manager was also able to explain what their responsibilities were in respect of their duty of candour such as being open and transparent with people, their relatives, professionals and CQC.

The person using the service told us they were able to share their views and they told us they could talk to the manager. The person told us, "I have completed questionnaires and have also given feedback verbally". We sampled some of the completed surveys most were positive about the service, any issues raised were investigated and an outcome was recorded.

We found staff were consulted and kept up to date with information about the service. Staff told us meetings were held regularly and this gave them an opportunity to share their opinions and suggestions. Staff we spoke with also felt supported in their role and felt they could report concerns. One staff member told us, "We have regular meetings and always kept up to date with things. I feel fully supported in my role and happy to work here". Staff we spoke to were aware of the whistleblowing policy should they wish to raise a concern. Whistleblowing means raising a concern about a wrongdoing within an organisation. One member of staff told us, "I would raise a concern with the managers, if I was not happy with the outcome I would contact the local authority and CQC".

We found the provider worked in partnership with other agencies, such as social workers, opticians, GP and nurses.

The law requires the provider to display the rating for the service as detailed in CQC reports and the provider was aware of this requirement. We saw the rating from our previous inspection on clear display in the home.