

Collingswood Care Limited

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Inspection report

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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

Collingswood Care Ltd is a domiciliary care agency registered to provide personal care to people in their own homes. The service provides care and support to people which includes personal care, food preparation and medication support. At the time of this inspection, the provider informed us they were providing personal care to 163 people who used the service.

Not everyone using Collingswood Care Ltd received a regulated activity. CQC only inspects the service received by people provided with 'personal care'; 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 and relatives were happy with the care workers who supported them. Comments included, "They are all good. I know their names and they know mine. They are friendly and we have a chat and a laugh together" and "I can't fault them. They are so lovely."

People felt safe and comfortable when staff were in their home. People were kept safe as potential risks had been assessed and managed. Staff recruitment practices were safe.

People felt staff were trained and experienced to meet their needs. Comments included, "They are very good. My care plan works well", "Care staff are always helpful. Very well trained" and "Care staff are very professional. They go above and beyond." However, one person told us some staff were not meeting their needs as well as others. We raised this with the provider who assured us they would follow this up.

People's medicines support needs were documented. People told us they were happy with the support they received with their medicines. We have made a recommendation about the management of medicines prescribed on a 'when required' (PRN) basis.

People and their relatives confirmed staff followed good infection control practice in their homes. Staff had completed infection control training and additional training specifically relating to COVID-19. Some staff were unsure of the order they should put on and take off Personal Protective Equipment (PPE). The provider sent further information out to staff, so they understood their responsibilities in relation to this.

People told us the service was well managed. Comments included, "The management are very good. They are very responsive", "Very well managed" and "It's an excellent company" A healthcare professional told us, "They always feedback any concerns immediately to ensure the client is receiving the appropriate care. A very approachable friendly team".

Since the previous inspection, the provider had restructured the leadership of the service. The management team were implementing new systems to improve care planning, monitoring, and training and had plans to

further develop the service.

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 20 February 2020).

Why we inspected

We received concerns in relation to care plans, medicines management, missed and late visits, moving and handling, and personal care needs not being met. As a result, we undertook a focused inspection to review the key questions of Safe and Well-led only.

We reviewed the information we held about the service. No areas of concern were identified in the other key questions. We therefore did not inspect them. Ratings from previous comprehensive inspections for those key questions were used in calculating the overall rating at this inspection.

The overall rating for the service has remained the same. This is based on the findings at 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 Collingswood Care Ltd on our website at www.cqc.org.uk

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

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.

Collingswood Care 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.

Inspection team

This inspection was completed by one inspector and one assistant inspector. Two Experts by Experience telephoned people who received care from the service and relatives to obtain feedback about their 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

Collingswood Care Ltd is a domiciliary care agency. It provides personal care to people living in their own homes. 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

This inspection was announced. We gave the service 24 hours' notice of the inspection because we needed to be sure the provider would be available to assist. Inspection activity started on 17 March 2021 and ended on 7 April 2021.

Before the inspection

We reviewed information we held about the service. This included details about incidents the provider must notify us about, such as allegations of abuse, and accident and incidents. The local authority shared information with us. The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgement in this report. We used all of this information to plan our inspection.

During the inspection

We spoke with 19 people who used the service, nine relatives and one representative to gain their views about the service. We also spoke with 13 staff which included care workers, supervisor, care manager, office manager, trainee registered manager, and the provider. We received feedback from a further eight staff and one healthcare professional.

We reviewed a range of records. This included six people's care plans and risk assessments. We looked at documentation relating to medicines for three people. We looked at three staff files and checked recruitment. We also looked at records relating to the management of the service such as audits and a variety of policies and procedures developed and implemented by the provider.

Is the service safe?

Our findings

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

At the last inspection this key question was rated as Good. At this inspection this key question remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse; Learning lessons when things go wrong

- People and their relatives told us they felt safe and comfortable when staff were with them in their home. Comments included, "I feel very safe" and "They keep me safe."
- Staff had completed safeguarding adults training. They knew how to protect people and report concerns about people's safety.
- Staff told us they felt confident the provider would respond and take appropriate action if they raised any concerns. One staff member said, "I would get hold of the office if I had any concerns about a client or possible abuse and get someone out. The manager would tell adult social care and CQC."
- The local authority safeguarding team had been carrying out safeguarding investigations into concerns raised. The provider was working with the local authority safeguarding team.
- Where incidents had occurred, the provider had reviewed the information, reflected on what happened, and had taken action to prevent or minimise the risk of the issues happening again.

Assessing risk, safety monitoring and management

- Each person told us they had a care plan. People's care plans contained risk assessments which considered personal care and the environment in which care was to be provided. A healthcare professional told us, "They always feedback any concerns immediately to ensure the client is receiving the appropriate care."
- Records gave staff guidance on how to reduce risks and were up to date.
- People told us staff knew how to keep them safe. Comments included, "I have to be hoisted from the bed to my wheelchair. I would say they are very well trained" and "I walk around the house with a walking frame, they always walk behind me. I don't feel at risk." Staff were attending practical moving and handling training during our inspection. The provider was booked on a moving and handling 'Train the Trainer' update so they could also deliver training.
- The service had contingency plans in place to ensure people's care would continue in the event of an emergency.

Using medicines safely

- People's medicines support needs were documented. People told us they were happy with the support they received with their medicines. Comments included, "The care staff come to administer medicines. I feel Mum is very safe with this" and "They give me my medication. Never had any problem."
- Staff knew how and why they administered medicines prescribed on a 'when required' (PRN) basis. Care plans contained information on what quantity of medicine to give. However, they did not contain the reason for giving it, for example for knee pain.
- Staff were trained to support people to take their medicines safely and staff competency was assessed.

Some staff had completed the pharmacy's advanced medicines training which was accredited by the Royal Pharmaceutical Society. A staff member commented "I am a lot more confident with this company in giving medicines and have learnt things."

- Regular medicines audits were carried out to ensure people received their medicines safely.

We recommend the service review best practice guidelines to ensure the guidance in care records for people's 'when required' medicines, includes additional information so staff can administer the medicine safely and effectively.

Staffing and recruitment

- Staff recruitment practices were safe. Checks such as employment history, references, and a disclosure and barring (police) check, had been carried out before staff were employed. This helped to ensure they were suitable to work with people.
- Staffing arrangements had been planned and organised in a way that met people's needs and kept them safe. There were enough staff available to support people in their own homes.
- People told us staff were usually on time, stayed the full time and contacted them if they were running late. One person said, "They always turn up, never let me down." Another person said, "Sometimes they may get stuck in a bit of traffic, that's not a problem. They always stay the full time." Two people told us they had experienced some late visits, but this had improved in the past few weeks. Most staff told us they usually had enough time at visits and between visits. Four staff members felt they needed more travel time. The provider was introducing a newer electronic call system which would improve call time monitoring.
- Most people told us they had good continuity of regular care staff. People said, "They are all good. I know their names and they know mine. They are friendly and we have a chat and a laugh together", "I do get different carers but that's ok. I have three regular ones though. They are all very caring" and "I can't fault them. They are so lovely." Two people told us they would like more regular care staff.
- People felt staff were trained and experienced to meet their needs. Comments included, "They are very good. My care plan works well", "Care staff are always helpful. Very well trained" and "Care staff are very professional. They go above and beyond." However, one person told us some staff were not meeting their needs as well as others. We raised this with the provider who assured us they would follow this up.

Preventing and controlling infection

- People and their relatives confirmed staff followed good infection control practice in their homes. They said they felt safe and staff wore Personal Protective Equipment (PPE) appropriately. One person said, "They wear all the PPE. I have felt very safe during COVID."
- Staff had completed infection control training and additional training specifically relating to COVID-19. Some staff were unsure of the order they should put on and take off PPE. The provider sent a reminder out to staff, to ensure they understood their responsibilities in relation to this.
- Infection control practice was observed to ensure staff were following guidance.

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 the previous inspection this key question was rated as Good. At this inspection this key question has remained the same. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- Since the last inspection there had been a restructure of the leadership of the service. This included a trainee registered manager, care manager, three supervisors, three care co-ordinators, and three staff who were responsible for planning visits. Staff knew their responsibilities and there were clear lines of accountability.
- Quality assurance systems were in place to assess, monitor and improve the quality and safety of the service. This included checks and observations to assess staff competency and audits.
- The management team were committed to improving care where possible. Following the previous inspection, they had grown the business and were delivering care to more people. The provider was open and honest throughout the inspection. They told us they had recently taken on new staff and new packages too quickly which impacted on the quality of the service. They assured us they had learnt from this and had systems in place to prevent this happening again.
- The management team were implementing new systems to improve care planning, monitoring, and training. They were carrying out a pilot of the new computerised system to ensure this worked effectively before it was fully introduced.

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

- People told us the service was well managed. Comments included, "The management are very good. They are very responsive", "Very well managed" and "It's an excellent company."
- People told us they would feel able to raise any concerns. Where concerns had been raised, people told us these had been resolved quickly. Two people raised some concerns during the inspection. We followed this up with them and they confirmed the issues had been resolved.
- The provider told us they were proud of their team. They told us they wanted staff to feel valued through supporting them and recognising their contribution. Staff were rewarded with vouchers and gifts. Staff told us they felt supported in their work. Comments included, ""Without a fraction of a doubt, I wanted to come into a better company and it's a lot like a family and they sort out problems and they help us to try and get better and I could not be happier" and "Definitely a good place to work – they have made feel so welcome and been so supportive."
- Staff enjoyed their work and were passionate about achieving good outcomes for people. Comments included, "They have a good knowledge and experience and are approachable. They all want the best for clients and staff. I can see improvements" and "I could not ask for a better company to work for."

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 provider was aware of their responsibilities to provide CQC with important information and had done so in a timely way.
- The provider understood the need to be open and honest with people and relatives.

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

- People and their relatives were asked to share their views about the service through regular home visits, telephone discussions and questionnaires. The latest feedback showed people were satisfied with the care delivered and how the service was managed. The provider also carried out visits to people to deliver care. One person commented, "The management are very friendly. The boss calls in to see me, makes sure I'm ok."
- Staff told us they felt able to contribute their thoughts and experiences of the service. Most staff spoke positively about communication within the service. Comments included, "Communication has improved" and "Over the last 12 months I have felt listened to and yes, we are all kept updated with any changes." Several staff felt communication could be better. The provider had recently introduced a key worker system. This meant a staff member was responsible for a group of named people and communicated any changes to the office.

Working in partnership with others

- Staff supported another service at short notice when they could not cover all of their visits to ensure people were safe.
- The service worked in partnership with key organisations including the local authority and other health and social care professionals to provide joined up care.
- A healthcare professional said, "A very approachable friendly team."