

New Shepherd Care Limited

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Inspection report

New Shepherd Care
Elton Way
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27 September 2021

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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

About the service

New Shepherd Care Limited is a domiciliary care agency registered to provide personal care living in their own homes. At the time of the inspection, seven 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 told us they felt safe receiving care and support. Risks to people's health, safety and wellbeing had been assessed and staff knew how to work safely with people. Any incident or accidents were investigated with learning shared with people, relatives and staff.

Staff were aware of safeguarding procedures and how to report any concerns they may have had. There were robust procedures in place to ensure any concerns were shared with relevant partner agencies, if identified as required.

Medicines were managed safely, and effective infection prevention and control measures were in place. This included the use of personal protective equipment (PPE) by all staff.

People received continuity of care and were supported by sufficient numbers of staff. Robust recruitment processes were followed to ensure the suitability of staff.

People's needs, and preferences were assessed and regularly reviewed. Care plans were personalised and reflected people's needs and wishes. People felt involved in their care and were supported in deciding how they wanted their care to be provided.

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.

Staff were described by people as kind and caring. They showed dignity and respect to the people they were providing care to. Feedback from people and relatives complimented them on their caring and compassionate attitudes. Staff were trained and supported in their roles through formal training, supervision and observations of their work. All spoke positively about working at the service.

People and their relatives knew how to raise concerns or make a complaint. The provider encouraged feedback on the service and acted in response to any feedback received.

There were a range of quality assurance checks and audits in place. The provider maintained oversight of all aspects of the service and demonstrated a commitment to maintaining high standards of care. The values of the service were known and shared by all staff.

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

Rating at last inspection

This service was registered with us on 01 February 2019 and this is the first inspection.

Why we inspected

This was a planned inspection based on the date of registration.

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 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.

New Shepherd Care Limited

Detailed findings

Background to this 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 Care Act 2014.

Inspection team

The inspection team consisted of an 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.

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

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 14 September 2021 and ended on 27 September 2021. We visited the office location on 17 September 2021.

What we did before the inspection

We reviewed information we had received about the service since registering. 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 judgements in this report. We used all of this information to plan our inspection.

During the inspection

We spoke with two people who used the service and three relatives about their experience of the care provided. We spoke with six members of staff including the provider, registered manager and care staff.

We reviewed a range of records. This included two people's care records and medication records. We looked at two staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were also reviewed.

Is the service safe?

Our findings

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

This is the first inspection for this newly registered service. This key question has been rated Good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People told us they felt safe receiving care and support. One person told us, "Yes, they take their time to work with me, they listen to me."
- Staff received training and were clear about how to raise an alert or any concerns they may have had. They understood their responsibilities and how to escalate any concerns further, if necessary.
- The provider had an up to date safeguarding policy and a process in place to help them identify and report to local safeguarding authorities any concerns when required.

Assessing risk, safety monitoring and management

- Risks to people were assessed at the start of their care package with plans put into place to manage and mitigate risks. One person told us, "They did an initial assessment and when new staff members start, they shadow."
- Plans were regularly reviewed and updated as people's needs changed. The provider also routinely audited people's assessments, records and care plans.
- Guidance for staff on how to reduce any risk of harm was in place. One member of staff told us, "At New Shepherd we are made aware of each client's care plans and risk assessments as a priority. These are also updated accordingly, and we are made aware of changes."

Staffing and recruitment

- The service had enough staff to meet people's needs and to manage changes to the services required.
- People had continuity of care. One relative told us, "We have a team of four and they rotate. We are familiar with whoever comes in."
- Staff we spoke with told us that they thought there were enough staff members in the team to provide the care required and they visited the same people on a regular basis.
- The provider had a thorough staff recruitment process and records demonstrated that it was followed. References were taken up and Disclosure and Barring service (DBS) checks carried out prior to staff starting.

Using medicines safely

- People told us they were happy with the way staff supported them with their medicines. One person told us, "They (staff) put it in a glass so I can take it myself, they make it easier for me."
- Staff were trained, and checks were in place to ensure they administered people's medicines safely.
- Medicine Administration Records (MAR) were audited regularly. If any errors were identified, these were followed up with staff and records kept of action taken.

Preventing and controlling infection

- People and their relatives told us staff were wearing appropriate personal protective equipment (PPE) when they visited and followed good hygiene practices.
- Staff received training in infection control and had access to PPE such as face masks, gloves and aprons. One member of staff told us, "New Shepherd Care provides PPE to ensure my safety. We have regular spot checks and weekly COVID testing."
- We were assured that the provider's infection prevention and control policy was up to date.

Learning lessons when things go wrong

- Any accidents and incidents were recorded and had been reviewed by the provider. Where things went wrong, the team were keen to explore the reasons and to take steps to reduce the risk of it happening again.
- Senior members of staff regularly visited people and monitored staff, to identify any required improvements, and took prompt action as required.

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.

This is the first inspection for this newly registered service. This key question has been rated Good. This meant 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

- People's care needs, and preferences were assessed before they started to receive support. This was to ensure people's needs could be met and were incorporated into their care plans.
- People and their relatives, where appropriate, were involved in the assessment process. One relative told us, "(We did) a telephone assessment, a questionnaire and provided a family statement. This was during COVID, so no one was visiting." Another relative told us, "Yes, I told them when to come and what to do."
- People's preferences were obtained and recorded in detail. This included information about people's preferred routines. People told us staff knew how they liked things done.
- Staff demonstrated a good understanding of people's needs and the support they needed and were delivering care in line with current guidance and best practice.

Staff support: induction, training, skills and experience

- People told us that staff were trained and they were confident in their abilities. One person said, "They are all trained, [Provider] will not allow anyone without training."
- Staff told us that the provider had a positive attitude towards training and encouraged them to develop in their roles. One member of staff told us, "[Provider] provides support if I have any areas that I am unsure with, and training is readily available." Another member of staff told us, "I am well supported by [Names of senior staff] through training and supervision. I also have access to online training and group chats to share best practice."
- Training records identified when mandatory training required updating and showed staff training was up to date. Staff also benefitted from regular supervision and observation in their care visits by a senior member of staff.

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

- People's needs around eating and drinking were assessed. Their preferences and special diets were documented and recorded.
- Staff monitored people's food and fluid intake as required and followed guidance, where provided, from health professionals.

Supporting people to live healthier lives, access healthcare services and support; Staff working with other agencies to provide consistent, effective, timely care

- Care plans and records showed effective liaison with healthcare professionals and guidance received from them was included in people's care plans.
- People were supported to access health services and attend appointments where needed. One person

told us, "I haven't been to the GP, dentist or opticians without [Names of staff] in the last 2 years

- Staff worked well with other organisations to ensure people's needs were met. This meant the service could make prompt referrals and seek advice when concerns were identified.

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.

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 MCA. When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty.

We checked whether the service was working within the principles of the MCA.

- People's capacity to make decisions relevant to their care and support were assessed and documented.
- Staff we spoke with understood their responsibilities regarding the MCA.

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.

This is the first inspection for this newly registered service. This key question has been rated Good. This meant 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

- People and relatives gave positive feedback about staff. They told us staff were kind and caring. One person told us, "They are all different, but they are all very, very caring." A relative told us staff were, "really caring, supportive and friendly."
- People's diverse needs, including religion, culture and language, were assessed and included in their care plan appropriately. The provider took steps to ensure they matched people to staff who best understood those needs.
- Senior staff completed observations and sought feedback from people to ensure staff delivered care in a kind and compassionate manner.

Supporting people to express their views and be involved in making decisions about their care; Respecting and promoting people's privacy, dignity and independence

- People were involved in creating their own care plans and actively participated in reviews. They told us staff listened to them and their choices were respected.
- Staff understood the importance of involving people in decision making. We saw that discussions were held with people when their wishes or needs changed. One relative told us, "[Staff] are very good, very personable." Another relative told us, "I just think they are perfect for my [relative] and we are very, very happy."
- People and relatives told us they had no concerns about staff. They were respectful and protected people's dignity and privacy. One relative told us that all staff provided care, "respectfully and compassionately."
- People's care plans promoted their independence and staff encouraged people.

Is the service responsive?

Our findings

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

This is the first inspection for this newly registered service. This key question has been rated Good. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- People and their relatives were involved in planning their care, drawing up care plans and completing reviews. One relative told us, "Yes, absolutely (involved), my [relative] has complex needs so yes." Another relative told us in relation to their family members care plans, "We have edited (care plan) several times."
- People's care plans recorded their decisions, the tasks they required support with and preferred daily routines. They also highlighted areas where staff could encourage people to be independent.
- Staff had a good knowledge of the needs and preferences of the people as care plans were personalised and included a background history of the person, communication needs, mobility needs, nutritional support and health conditions.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- People's communication needs were assessed and recorded in their care plans, with any adaptations or equipment needed recorded.
- Information could be made available in a different format, if this was required so people were provided with information in a way they could understand. This helped them make decisions about their care.
- Staff told us about the different ways they communicated with people, including those people with communication barriers such as hearing loss or visual impairment.

Improving care quality in response to complaints or concerns

- People and their relatives were given the opportunity to give feedback on the service during care reviews, meetings and surveys. This feedback was consistently positive, with many complimentary comments about the support provided.
- People told us they knew how to complain if they needed to and felt confident, they would be listened to. One relative told us, "Yes, I was worried about [issue] and it has now been changed."
- A complaints policy and procedure was in place. At the time of inspection, no recent complaints had been made. The system in place ensured that all complaints would be recorded and responded to promptly.

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.

This is the first inspection for this newly registered service. This key question has been rated 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

- People were at the centre of the service's culture and feedback from people described good outcomes. The vision and values were clearly set out, staff understood them, and people said they were reflected in their working practices.
- People and their relatives felt involved in the service. One relative told us, "Faultless, they are there all the time, they respond immediately, all positive and always meets our needs." Another relative told us, "Over all I am extremely happy with the service. [Provider] and I have always worked through any issues and I know that I am really lucky."
- The provider gave opportunities to people and their relatives to give their views about the service and used the feedback to shape the service provided so people's needs could be better met. One person told us, "Yes, I did a questionnaire once a while ago." A relative told us, "I have been impressed, I have used a few (services) and they seemed to be the easiest to communicate with, I like that they are local and small."
- Staff felt engaged in the service and told us they felt supported by the management team. One member of staff told us, "I do feel supported by the management team, whether personal issues or work-related issues, they are easy to talk to and quite understanding and supportive." Another member of staff told us, "I feel that the management team are always accessible and are always willing to provide support, if and when needed. During my time here I have been listened to, encouraged and been made aware of opportunities that could enable me to grow and develop my skill set."

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; 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 were systems and processes in place for monitoring the quality of care. The provider told us how this system of checks enabled them to monitor the quality of the service and helped ensure they had oversight of the service. Where audits identified issues, action was promptly taken.
- The provider understood their duty of candour and legal responsibilities. We could see from the detailed records being kept that feedback had been dealt with in a candid and honest way. They understood the importance of honesty and transparency, when investigating something that went wrong.
- The provider understood their responsibilities around notifying the CQC and had submitted all the required notifications.

Continuous learning and improving care; Working in partnership with others

- The service had a strong culture of learning and improvement, and there were robust quality assurance systems in place. This included regular quality checks with people, satisfaction calls, audits of all the service's records and analysis of any feedback to identify any concerning trends.
- The service worked closely with other professionals and services to promote positive outcomes for people. We saw examples of this in people's care plans and records.
- Staff worked together to ensure that people received consistent, coordinated care and support.