

Classic ResourcesUK Ltd

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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 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

Classic Resources is a domiciliary care service providing personal care to people in their own homes. Classic Resources also provide an emergency support service for hospital discharges. At the time of our inspection they were supporting two people.

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 with the staff and the management.

At the time of the inspection no one was receiving support with their medicines. There was a policy in place and staff were trained to administer medicines if this changed in the future.

Infection prevention and control procedures were followed by staff and they had received training in donning and doffing of PPE. People confirmed staff always wore PPE and disposed of it correctly.

Safe staff recruitment processes were in place. Staff followed an induction programme, which included shadowing experienced staff. Staff training was up to date and the registered manager was in the process of accessing further specialist training.

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.

People appreciated receiving care from the same staff group, who visited at the planned time and had not missed a call. If staff were going to be late, people were informed. People told us staff were kind, friendly, treated them with dignity and promoted their independence.

Care and support plans provided guidance for staff on how to support people with their care.

People knew how to raise a concern and were confident it would be dealt with appropriately.

Quality assurance audits were undertaken by the registered manager which provided oversight of the service.

The registered manager was passionate when speaking about the service, people they provided care for, and acknowledged the importance of valuing staff. Staff told us the registered manager was approachable

and they were confident in their management skills.

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 June 2017 and this is the first inspection.

Why we inspected

This was a planned inspection as a new service.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our reinspection 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.

Classic ResourcesUK 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 Care Act 2014.

Inspection team

The inspection team consisted of one inspector.

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 who was also the provider. This means that they are legally responsible for how the service is run and for the quality and safety of the care provided. For this service the provider was also the registered manager.

Notice of inspection

We gave a short notice period 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.

The inspection took place on Monday 26 April 2021.

What we did before the inspection

We reviewed information we had received about the service since they were registered. We sought feedback from the local authority who commission the service for some people who use the service and Continuing Health Care (CHC). We used all this information to plan our inspection. 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 the registered manager who is also the provider.

We reviewed a range of records. This included two people's care records. We looked at three 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 reviewed.

After the inspection

We spoke on the telephone with one person who used the service and one relative about their experience of the care provided and with two members of staff. We continued to seek clarification from the provider to validate evidence found.

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 who used the service said they felt safe with the staff who attended to their care. One person told us, "I feel safe, she is there when I need her."
- The service had policies and procedures in place for safeguarding and whistle blowing.
- Staff had received training in safeguarding. They told us they were confident to raise an allegation of abuse and that the registered manager would take appropriate action.

Assessing risk, safety monitoring and management

- Care plans contained various risk assessments relating to personal care and mobility, and measures were put in place to mitigate risks.
- External and internal environmental risk assessments were carried out.
- The registered manager conducted regular reviews of the risk assessments and care plans to ensure they were current and continued to meet people's needs.

Staffing and recruitment

- The service had a robust recruitment policy and procedures in place.
- Recruitment checks had been completed to ensure new staff employed were suitable to work at the service.
- People confirmed that staff wore uniform and had photographic identification badges.
- There were enough staff employed to meet people's needs.

Using medicines safely

- At the time of our inspection no one was receiving support with their medicines.
- The service had a medicine policy in place and staff were trained to administer medicines if this changed in the future.

Preventing and controlling infection

- The service had an infection prevention and control policy in place. Additional guidance in relation to infection prevention and control during the pandemic was introduced to provide staff with current information about COVID-19.
- Staff had received training in infection prevention and control including donning and doffing of PPE.
- Staff told us they were supplied with enough PPE to undertake their work safely. People confirmed that staff always wore PPE.
- We were assured that the provider was accessing COVID-19 testing for staff.

Learning lessons when things go wrong

- The registered manager told us when things went wrong, they shared lessons learned with staff and made changes to improve the service. For example, on first visits staff sometimes struggled to find people's addresses. A lesson learnt was to always leave for the call 15 minutes earlier.

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 needs were assessed by a social worker or the hospital team prior to discharge. People's needs were reviewed after the first call and any changes or updates were shared with the wider teams.
- People's needs and choices were identified and provided guidance for staff on how to support people. One staff member said, "I always get the care plan before I go to a call. After the call I have to send a summary to the manager to say how it went and what could be added to the care plan etc. She also rings me later on to see how it has gone and if everything is alright."

Staff support: induction, training, skills and experience

- Staff undertook an induction programme when first joining the service which included training and shadowing experienced colleagues for a minimum of 36 hours. Staff completed the Care Certificate. The Care Certificate is an identified minimum set of standards that sets out the knowledge and skills expected of specific job roles in health and social care.
- Staff had completed refresher training and observational checks were conducted by the registered manager to ensure staff were competent and to identify any further training requirements.
- Staff had recently received ventilator training and been face fit tested for respiratory protective equipment.
- Staff supervisions and annual appraisals were carried out and staff confirmed this and told us they found them to be supportive. One staff member said, "We are asked for feedback and the service users provide feedback on us."

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

- As the majority of the calls were for night shifts the main food source was cereal, snacks and drinks.
- Care plans identified people's nutrition and hydration requirements as well as their likes and dislikes.

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

- Due to the nature of the service, staff consistently worked with local authority's, social workers and other external healthcare professionals, to ensure care was coordinated.
- Constant clear communication took place prior to the emergency call and after to discuss how the person had been.
- Where necessary staff supported people to healthcare appointments.

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.

- The service was working within the principles of the MCA and had policies and procedures in place.
- Staff had received training and had a good understanding of MCA.
- Care plans identified people's ability to make choices.

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 their relatives were positive about the service. Comments included, "I am happy with the service" and "The staff were very obliging and also aware of the family's needs, and helped us as well, they were excellent I couldn't fault them."
- Care plans considered the person's cultural and spiritual needs where needed.

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

- The care plans identified what the person was able to undertake themselves and how the staff should support them.
- Staff told us people were offered choice at every visit. People confirmed they were given a choice and staff always asked if there is anything else they could do for them.

Respecting and promoting people's privacy, dignity and independence

- Staff spoke with compassion when they described the people they had cared for. One staff member said, "It is very important to make sure we communicate well and understand their needs."
- People confirmed that staff supported them to maintain their independence. One person said, "I am fairly independent, and this is supported very much, I get support when I need it."
- Staff told us they promoted people's independence through encouragement. One staff member said, "I always get them to try first and if they need support, I help them, I encourage them by saying you do this whilst I do this. I never just step in and do."

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

- Care plans identified people's preferences, wishes and interests. For people who came to Classic Resources in an emergency, these were continuously added to as the staff got to know the person more. One staff member said, "We always get a care plan before we go in and it provides us with all the information we need."
- Where possible people received care from the same staff group. One person said, "I have a regular person and it works really well and we get on really well."

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 documented. Where glasses or hearing aids were required, the care plan identified the appropriate support the person needed.
- Specific communication aids were used if a person was non-verbal.

Improving care quality in response to complaints or concerns

- Although no complaints had been received, the service had a complaints policy and procedure in place, which provided guidance on making a complaint.
- People told us they would be confident any concerns they did raise would be acted on appropriately. One person said, "I have no complaints whatsoever."

End of life care and support

- Staff had received training on end of life care.
- No one was receiving end of life care at the time of the inspection.

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

- The registered manager promoted an honest and open culture. Staff told us the registered manager was approachable and supportive. One staff member said, "[Registered manager's name] is very good, very supportive, she always asks how you are coping."
- People and their relatives praised the registered manager and appreciated the level of communication they received. One relative said, "We have had lots of conversations with [Registered Manager's name], she is a good manager and communication is very important at a time like this."

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 registered manager understood duty of candour and were aware of their legal responsibilities. They knew when notifications were required to be sent to the Care Quality Commission and how to make referrals in the event of a safeguarding concern.
- We found a positive and inclusive atmosphere within the service and all staff were dedicated to providing fast and responsive support. Staff we spoke with were committed to ensuring people received high quality effective support. One relative said, "The staff are all brilliant."

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

- Staff understood their role and the standards expected and spoke positively about providing care to meet the individual person's needs.
- The registered manager had systems and procedures to monitor and assess the quality and safety of their service.
- Audits were used to assess standards and drive up improvements.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- The service worked in partnership with health and social care professionals who were involved in people's care.
- The registered manager sent surveys to people and their relatives four times a year, to check they were happy with the service provided.

Continuous learning and improving care

- The registered manager was committed to continuously improve the service.
- The registered manager was open and responsive to our inspection feedback.