

Tracscare Lifestyles (South West) Limited Embrace Lifestyles (South West) Limited

Inspection report

Cornwall Services
Holmbush Business Centre, Wheal Northey
St Austell
Cornwall
PL25 3EF

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Tel: 01214574400
Website: www.embracegroup.co.uk

Ratings

Overall rating for this service

Good ●

Is the service effective?

Good ●

Summary of findings

Overall summary

We carried out a comprehensive inspection on 27 August 2015. A breach of the legal requirements was found. This was because the information held at the service's office including people's care records, staff contact details and service user contact details were not always up to date and accurate. There were shortages of staff at the time of the last inspection which were leading to staff working long hours. This had led to the cancellation of some training, supervision and staff support meetings. This meant some staff had not had regular supervision and support provided. Some training updates were overdue for some staff. The service was not using the Care Certificate for staff who were new to the role. The Deprivation of Liberty safeguards policy had not been updated to take account of changes to the criteria when this legislation should be considered. This meant staff were not provided with accurate current best practice guidance.

We undertook a focused inspection on the 2 March 2017 to see what actions the provider had taken to address the concerns from the last inspection and to confirm they now met legal requirements.

This report only covers our findings in relation to these topics. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Embrace on our website at www.cqc.org.uk

Embrace is a community service that provides care and support to adults of all ages, in their own homes. The service provides help with all aspects of people's personal and social care needs in the Cornwall area. This includes people with learning and physical disabilities. The service provides some 24 hour live-in care for people in their own homes. The service also provides outreach support for people who require support with accessing the local area and work placements.

At the time of this focused inspection the service was supporting 37 people.

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.

At this focused inspection we found the registered provider had taken the necessary action to meet the legal requirements. The care plans held at the service office were up to date and provided current information on the needs of each person. Daily records were regularly returned to the office for auditing and filing. The service was able to provide an accurate contact list for all the people receiving a service and also all the staff currently providing support to them. Staff had received regular supervision and appraisals since the last inspection. Training updates were now recorded for each member of staff and held on a record that was monitored by the registered manager. This meant that updates were provided in a timely manner. All staff were up to date with their training requirements. The Deprivation of Liberty safeguards policy had been reviewed and now reflected current guidance.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service effective?

The service was effective. Staff were provided with regular supervision and training support.

Records held at the service relating to people who used the service and staff were accurate and up to date.

Management and staff had a clear understanding of the Mental Capacity Act 2005 and the policy had been updated.

Good ●

Embrace Lifestyles (South West) Limited

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.

We undertook an announced focused inspection of Embrace on 2 March 2017. We announced this inspection in line with the current CQC methodology for the inspection of domiciliary care services and to ensure someone would be present at the service offices to see us. This inspection was completed to check that improvements had been made to meet legal requirements following our comprehensive inspection on 27 August 2015. We inspected the service against one of the five questions we ask about services; is the service effective? This is because the previous concerns were in relation to this question.

The inspection was carried out by one adult social care inspector. Before our inspection we reviewed the information we held about the service. This included the information from the service regarding what steps they would take to meet the legal requirements.

We spoke to the registered manager, the operations manager, the administrator and four staff. We looked at the care plans for three people, the staff training and supervision records and other records relating to the running of the service.

Is the service effective?

Our findings

At our comprehensive inspection on 27 August 2015 we were concerned that the records held at the service relating to the care and support needs of some people using the service, were not always accurate and up to date. One care plan was missing. Some care plans were in need of updating. The contact lists for people who used the service and staff were not accurate and had not been updated. This meant that the service would not have been easily able to contact people if necessary.

The service had staff vacancies. There were shortages of staff at the time of the last inspection which was leading to staff working long hours. Staff told us that they had experienced the cancellation of some training, supervision and staff support meetings due to having to cover shifts. This meant some staff had not had regular supervision and support. Mandatory training updates were due for some staff. The service was not using the Care Certificate for newly recruited staff who had not worked in the role before. The Deprivation of Liberty safeguards policy, part of the Mental Capacity Act 2005, had not been updated to take account of changes to the criteria when staff should consider this legislation. This meant staff were not provided with accurate current best practice guidance.

At this inspection we found care plans held at the service offices were up to date and had been regularly reviewed. Daily records were regularly returned to the office for auditing and filing. We were provided with a contact list for all staff which was accurate and up to date. The service also provided us with an up to date list of all the people using the service. The registered manager was knowledgeable about the support needs of each person using the service. The service was recruiting new staff to fill an increased package of care required by one person. Two staff had been interviewed and were in the process of being recruited for this work. Staff confirmed there were sufficient numbers of staff to cover the shifts and that they were not having to work extra shifts.

Staff received regular supervision and appraisals. Comments included, "This is the best job I have had in terms of the training, its often face to face training which is better for me than e-learning" and "I love this job we get good support, staffing levels are good and support is always available." Staff meetings took place in each of the teams regularly. The agenda for these meetings covered a set template including safeguarding, training of staff, supervisions and any changes in the needs of people they supported. The minutes for these meetings were seen at the service.

The staff training records showed staff had attended mandatory training subjects such as safeguarding adults and medicines management. Further training related to the specific needs of people who they supported was also provided, such as Autism training.

We spoke with some staff who were new to the organisation. They confirmed that they had been provided with a thorough induction and shadowed experienced staff until they felt confident to work alone. Staff who had not worked in this role before were provided with training on the Care Certificate. There was support provided for these new staff to complete this certificate within the first few months of their post. Open sessions were provided at the service's office where computers were set up for them to use and senior staff

and management on hand to offer any guidance needed. Most staff were specifically recruited to meet the needs of individual people. Families were often involved in the interview process to help ensure they were suitable and would get on and fit in with their family life.

Staff had been provided with training on the Mental Capacity Act 2005 and the associated Deprivation of Liberty Safeguards. The service now held a current and updated policy for staff to refer to if needed. Care plans contained details of the agreement of family members to the contents of the care plans. Some people had needed to have best interest meetings held with their family and healthcare professionals, to make specific decisions relating to risks identified in their home. Care plans contained details of the decisions made which led to actions being taken to help ensure any risks to the person or staff were reduced. This meant the service were clear on how to ensure people's rights were protected and decisions made on other people's behalf were made in an appropriate way.

People were supported to have a balanced diet. Some people were supported to prepare their own meals if they wished. Where there was concern about people's weight this was monitored and recorded in their care plan.

Due to the healthcare needs of most people who used the service, the staff supported people to access healthcare appointments as needed. Staff liaised with health and social care professionals involved in their care, if their health or support needs changed. Care files contained completed Hospital Passports. This travelled with the person to the hospital when appropriate and gave important information about what care and support needs the person had, and their preferences and wishes.