

Gims Care Solution Limited

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Inspection report

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Date of inspection visit:

07 June 2021

08 June 2021

Date of publication:

24 June 2021

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

Gims Care Solution Limited is a domiciliary care agency, providing a personal care support service to people who may have a mental health condition, learning disabilities, autistic spectrum disorder, dementia, physical disability, sensory impairment, older people, younger adults and children in their own homes and in supported living. Not everyone using Gims Care Solution Limited received regulated activity. CQC only inspects the service being received by people provided with 'personal care'; help with tasks related to personal hygiene and eating. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for supported living. At the time of the inspection, the service was providing personal care support to six adults and two children.

People's experience of using this service and what we found

We received positive feedback from people and relatives and commissioners of the service. One person told us, "No issues or problems since we started, I cannot fault them as a service."

Safe recruitment processes were in place to ensure staff were suitable for their roles. Staff received induction, training and supervision to carry out their role effectively and safely. Staff had received safeguarding training and knew how to act on any concerns. Risks to people's safety and wellbeing were assessed and monitored. Medicine practices showed people received their medicines as prescribed. Staff carried out infection prevention and control measures to minimise the risk of the spread of infection.

The registered manager and provider had good oversight of the service. Quality assurance systems had been developed to monitor the service. Feedback from people, relatives and commissioners demonstrated they were happy with all aspects of 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 the service at the previous premises was Good (published on 26 February 2019). You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Gims Care Solution Limited on our website at www.cqc.org.uk.

Why we inspected

This inspection was carried out to check the safety and quality of the care people received.

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.

Gims Care Solution Limited

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 was carried out by 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 also provides care and support to people living in 'supported living' settings, so that they can live as independently as possible. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for supported living; this inspection looked at people's personal care and support.

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. Due to the pandemic, we gave a short period notice of the inspection to enable us to collate as much information as possible virtually to minimise the time spent by the inspection team visiting the provider's office.

Inspection activity started on 7 June 2021 and ended on 8 June 2021. We visited the office location on 7 June 2021.

What we did before the inspection

We sought feedback from the local authority and professionals who work with the service. We used the information the provider sent us in the provider information return. This is information providers are

required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all of this information to plan our inspection.

During the inspection

We spoke with one person who used the service and four relatives about their experience of the care provided. We spoke with four members of staff including the registered manager, operations manager, team leader and a care worker.

We reviewed a range of records. This included three people's care records and multiple 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 reviewed.

After the inspection

We reviewed feedback about the service from four healthcare professionals and the local authority.

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 has now remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People and their relatives felt safe using the service. One person said, "[staff name] looks after me well." A relative told us, "The staff are very compassionate and have formed a good bond, I feel my relative is safe with them."
- Staff had received training in how to safeguard people from abuse. The provider had a policy for staff to follow on safeguarding and whistleblowing. One member of staff told us, "If there were any concerns, I would contact my supervisor immediately and discuss this them."
- When the provider had safeguarding concerns, these had been alerted to the appropriate authorities. The registered manager had worked with the local authorities to investigate these and provided all information required.

Assessing risk, safety monitoring and management

- Risks assessments were carried out, and regularly reviewed, to identify risks associated with people's care and support needs. Risk assessments provided guidance to staff to mitigate any identified risks.
- Risks covered included environmental risks, personal care, medicines, moving and handling, falls, mobility, and equipment used.
- Staff knew how to access people's properties. One member of staff said, "There is a key safe which I use if needed but most of the time I call out hello and they let me in."
- Staff knew what to do in an emergency. One member of staff told us, "Depending what the emergency was if it was an immediate risk and someone was unwell, I would call for an ambulance. If it was not immediate, I would call the GP or a relative and inform my supervisor of the issue."

Staffing and recruitment

- There were sufficient staff to meet people's needs. People were supported by the same regular staff who knew them well and provided consistent care and support. One relative told us, "We have the same two staff who worked alternately, they have become like family now."
- Staff told us they had a consistent team which had benefitted people they looked after as people knew them well and knew each day who was going to be supporting them.
- Appropriate recruitment procedures were in place. The registered manager had carried out all the necessary checks on staff suitability before they began to work at the service. This included undertaking a check with the Disclosure and Barring Service (DBS).

Using medicines safely

- People were supported to take their medicines safely.

- Staff had received training in the administration and their competency was regularly checked to support people with medicines.
- Medication risk assessments were in place and best practice guidance was available to staff.
- A relative told us, "The staff monitor the medication and when a new prescription is needed they let me know."
- Regular audits were completed by the registered manager to ensure people received their medicines safely.

Preventing and controlling infection

- The provider had an infection control policy and procedures to prevent the spread of infection.
- Staff had received training in infection control, Covid-19 and food hygiene.
- Specific attention had been given to meeting good infection prevention and control guidelines so people and staff were protected from COVID-19. All the necessary guidance and personal protective equipment (PPE) was available.
- Staff were being tested regularly for Covid-19 and the registered manager was following the government guidance to support staff and people.
- One member of staff told us, "We have been supported with everything we need including PPE and hand sanitiser."

Learning lessons when things go wrong

- The registered manager shares lessons learned during staff meetings. They also update staff on best practice and lessons learned from other organisations as part of a provider network they belong too.

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 last 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.

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

- The provider supported people with person centred care that was inclusive and achieved positive outcomes.
- Relatives and commissioners were very complimentary of the support people received. One relative told us, "The staff have been really good even through Covid-19 giving me respite." Another relative said, "The care workers have been absolutely brilliant, I can't fault them. [relatives name] feels so safe and secure with them, it has taken all the worry away for me."
- A commissioner told us, "I am happy with the support Gims Care provided at short notice and would not hesitate to use their services again."

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

- The registered manager and staff were clear about their roles and worked within regulatory requirements. We received multiple positive feedback about how professional the staff were. One commissioner told us, "Staff are committed to supporting and ensuring people are as independent, engaged and happy as possible."
- Staff told us they felt very supported by the management team. One member of staff said, "We get very good support, they check in with us every day and the manager is always available on the phone." We saw from records staff received regular support in the form of spot checks and supervision to discuss any issues they may have or training needs."
- The registered manager understood the duty of candour and their duty to be open and honest about any incident which caused or placed people at risk of harm.
- The registered manager was aware of their responsibilities to report notifiable events to CQC.

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

- The provider had good systems in place to continuously engage with people, relatives and commissioners using the service. One relative told us, "Every month I get a call to check everything is okay or [staff names] comes to see me and check everything is working alright."
- The registered manager worked in partnership with people to ensure their support needs were being met and they were living full and active lives. We saw where appropriate people were empowered to follow

activities they enjoyed in the community.

Continuous learning and improving care; Working in partnership with others

- The registered manager had a good oversight of the service, and continuously learned and improved care. The registered manager completed regular monitoring checks and audits to ensure the quality and safety of the service. The checks included monthly telephone monitoring calls and audits of care plans, risk assessments, medicines administration charts, daily care logs and staff files.
- Staff were supported with training and we saw from the training matrix staff were kept up to date. The registered manager ensured staff received training that matched the needs of the people they supported such as how to support people with epilepsy.
- The registered manager worked in partnership with others to support people including relatives, parents, learning disability teams and commissioners. One commissioner told us, "They are consistent and work in partnership with the family and should there be any suggestion or issue raised by client, GIMS Care always consider this and make immediate change. This is a demonstration of good practice."