

Accolade Support and Care 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

This inspection took place on 15 September 2017 and was announced. We gave the registered manager 48 hours' notice of our intention to undertake an inspection. This was because Accolade Care and Support provides personal care for people who live in their own homes and we needed to be sure that someone would be available at the office.

At the time of our inspection six people received personal care in their own homes.

There was a registered manager in place at the time of our inspection. 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.

People told us they received safe care, relatives who we spoke with felt staff were trained to support their family members in a way which kept them safe. Staff demonstrated good knowledge in how they were to protect people from harm. We found staff recognised the signs of abuse and knew how to report this. The registered manager had identified potential risks to people and had put plans in place to support staff to reduce the risk to people without taking away people's right to make decisions about their care. People and relatives told us the registered manager ensured there were enough staff to support their care needs. Staff told us that because the service supported a small number of people, they were able to deliver safe care and support to people. People were supported with their medicines in a safe way.

People received care and support which met their needs and preferences and was in line with their consent and agreement, and staff understood the importance of this. We found people were supported to eat a healthy diet which was tailored to their individual preferences. Staff worked with external healthcare professionals and where necessary followed their guidance and advice about how to support the person in the right way.

People's views and decisions they had made about their care were listened to and staff acted upon these in a dignified and respectful way. Relatives felt the staff team treated their family members in a kind and friendly way, which was done so respectfully.

The registered manager had provided people with information around how to raise a complaint should they need to. People and relatives we spoke with had not needed to raise any concerns but knew how to do this should they need to. The registered manager had not received any complaints at the time of our inspection. The registered manager told us that they had regular contact with people which they felt reduced the likelihood of people needing to complain about the service provision.

People and their relatives felt involved in the way the service was run. They felt they had the opportunity to share their views and discuss aspects of the service. Staff felt supported by the registered manager to carry

out their roles and responsibilities effectively, through training and daily contact. Staff felt involved in the service and felt able to influence their ideas in the way in which the service was run. People, relatives and staff felt the registered manager was approachable and listened to them. We found checks the registered manager completed on the service focused upon the experiences of people.

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.

People were cared for by staff who had the knowledge to protect people from the risk of harm. People were supported by sufficient numbers of staff to keep them safe and meet their needs. People received their medicines in a safe way.

Is the service effective?

Good ●

The service was effective.

People were supported by staff who had the knowledge and skills to do so. People received care they had consented to and staff understood the importance of this. People were supported with maintaining a healthy diet and supported with on-going healthcare support.

Is the service caring?

Good ●

The service was caring.

Peoples were involved in their care and made decisions about they were supported. People were supported by staff who were kind and caring towards them and their family members. People's privacy and dignity were maintained throughout.

Is the service responsive?

Good ●

The service was responsive.

People received care that was in-line with their individual preferences and needs. People and their relatives had information available to them should they need to raise a complaint.

Is the service well-led?

Good ●

The service was well-led.

People were included in the way the service was run and were listened too. Staff were supported by clear and visible leadership so people received quality care to a good standard.

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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.

This inspection took place on 15 September 2017 and was announced. We made telephone calls to people and their relatives after the visit to the office. The provider was given 48 hours' notice because the location provides a domiciliary care service; we needed to be sure that someone would be in. The inspection team consisted of one inspector.

As part of the inspection we reviewed information we held about the service including statutory notifications that had been submitted. Statutory notifications include information about important events which the provider is required to send us by law. We contacted the local authority to understand if they had any relevant information to share with us.

Before the inspection the provider completed a Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. The provider returned the PIR and we took this into account when we made judgements in this report. We also reviewed the questionnaire feedback that the CQC had sent to people who used the service prior to our inspection. Spoke with the local authority about information that may be relevant prior to our inspection of the service.

We spoke with two people who used the service and two relatives who supported their family member with the management of their care. We also spoke with three care staff and the registered manager. We looked at aspects of four people's care records and medication records. We also looked at the registered manager's complaints procedure and compliments, two staff recruitment record and checks of records completed by

the registered manager.

Is the service safe?

Our findings

People we spoke with felt the staff supported them in a way which kept them safe. One person told us how staff arrived when they expected them to and that staff provided care and support to them in a way which made them feel safe. A relative we spoke with said they felt staff who supported their family member knew their needs well and said, "Staff know when [the person] has had a bad night." The relative felt this good understanding of the person helped the staff identify if further action was needed to maintain the person's safety and well-being.

Staff told us the registered manager had provided them with information about safeguarding and how to report concerns if necessary. Staff had a good understanding of different types of abuse they may see and what approach they would take to raise their concerns. Staff explained to us how they would report any concerns to the registered manager or other external agencies if they needed to. All staff we spoke with felt confident the registered manager would take action if they did raise any concerns. The registered manager had a good understanding of their responsibilities to protect people from harm. We saw how the registered manager worked with external agencies to ensure people were being kept safe from harm.

People told us staff had discussed with them their care needs to help understand if there were any particular risks staff would need to manage. One person told us their mobility was reduced and they needed more time to be able to move safely. Staff told us this had been identified and they ensured the person had two staff members to support the person. Staff confirmed they had enough time to support the person, the person confirmed that they did not feel rushed when they were being supported by staff.

Staff were able to share with us additional potential risks they had identified for other people they supported, such as pressure sores. Staff told us how they would check the person's skin to ensure it was healthy. One staff member told us and we saw from the person's care records that where a person's skin was becoming sore they had contacted the district nurses for additional support, and as a result the person's skin improved.

People who used the service and relatives told us because it was a small staff team, they had staff who they knew well and at arrived to support them times that suited them. People and relatives told us that when a new member of staff started working for the registered manager they worked alongside a longstanding staff member before they worked alone. We spoke with a newer staff member who confirmed they had been supported this way, which they told us helped them to understand not only the persons care needs, but the home environment in which the person lived. People and relatives told us they had no concerns around staffing levels. One relative told us how the staffing reflected the person's individual care needs, and said that where more time or staff were needed to meet the person's particular needs the registered manager ensured this happened.

The registered manager was involved in the care for people who they supported and understood the staffing levels required to support people safely. The staff team communicated with each other on a daily basis so the registered manager had good assurances that they had sufficient staff to meet people's needs.

We looked at two staff's recruitment records and saw checks were completed by the registered manager to ensure they were suitable to deliver care and support before they started work. Staff we spoke with told us they had completed application forms and were interviewed to assess their abilities. The registered manager had made reference checks with the staff's previous employers and with the Disclosure and Barring Service (DBS). The DBS helps employers make safer recruitment decisions and prevents unsuitable people from working with people who used the service. The registered manager used this information to ensure that suitable staff were employed, so people were not placed at risk through recruitment practices.

One person we spoke with did not raise any concerns about the management of medicines and two relatives we spoke with told us they managed their family member's medicine. Staff we spoke with told us, they had received medicine training and their practices were checked before they began working alone and on a regular basis. This approach supported staff members continued competency in supporting people with their medicines. Staff had a good understanding about the medicines they gave people and the possible side effects. The registered manager told us they also provided care to people they supported, so were able to check that any person's receiving medicines had been done so in the right way.

Is the service effective?

Our findings

People and their relatives felt staff knew their care needs and how to support them in the right way. One person told us, "I don't know how I've managed without them [staff]". While another person told us, "They are great and its working well". A relative told us, "Staff are most definitely trained in the right way. They are extremely good, and do all that is necessary, it's taken a weight off of my shoulders".

Staff told us they had received training that was appropriate for the people they cared for, such as understanding how to protect people from harm and safely moving and handling people who require assistance with their mobility. One staff member we spoke with told us the training was detailed and related to the people they supported. A newer staff member felt supported and gained their knowledge by working alongside more experienced staff to understand individuals needs better. They told us working alongside other staff members enabled them to spend time talking with people they would care for and get to know their care needs. Staff told us and we saw from people's care records, that information was detailed in how the staff were to support the person in the right way.

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 and where appropriate their relatives, told us staff had discussed with them aspects of their personal care so that their consent and agreement to the care was sought. People felt staff respected their wishes and listened to them. One relative told us, "They listen to what we say". Staff we spoke with understood their roles and responsibilities in regards to gaining consent and what this meant and how it affected the way the person was to be cared for. Staff told us they always ensured people consented to their care. Three staff members told us they assumed that people had the capacity to make their own decisions and would always seek consent from the person first. They told us that should the person declined, they would respect their choice. A staff member told us the registered manager had provided them with a useful MCA pocket guide which they kept with them, and felt that helped them in their practice.

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. We checked whether the service was working within the principles of the MCA. Any applications to deprive someone of their liberty for this service must be made through the court of protection. The registered manager had not made any applications to the Court of Protection for approval to restrict the freedom of people who used the service. They were aware of this legislation and were happy to seek advice if they needed to.

Staff had identified which people required support with their meals. One person told us staff supported them with their drinks and ensured they had one to hand. Staff spoke of one person whose appetite and weight had increased, which meant they were now having a healthy balanced diet and with that their overall

health had improved. One relative told us, "They support [family members name] by making the breakfast and drinks, they even make sure I have a cup of tea as well". Relatives told us that staff checked to make sure their family members had enough to drink. One staff member said, "If I felt someone wasn't eating or drinking I would let the [registered] manager know". All staff we spoke with confirmed the registered manager listened and took action.

A relative told us staff were very good at looking for signs of ill health and recognised when their family member was not well. They continued to tell us staff had sought assistance from the district nurses where this has been necessary, to support the person's healthcare needs effectively. A further relative told us staff had been supportive in sign posting them to gain further assistance with a physiotherapist and worked with the person to improve the person's physical well-being.

Is the service caring?

Our findings

People and relatives we spoke with told us, staff were kind and caring. One person told us, "Staff are great". One relative told us, "Staff are marvellous, polite and considered. I hear laughter when they are getting [person's name] ready". They told us this made them feel happy that staff were meeting their family members' needs in a caring and respectful way. A further relative told us, "Staff are very understanding, very friendly. [The person's name] smiles when they come through the door". Both relatives we spoke with felt staff not only supported the person with their care and support needs, but also understand their emotional needs and offered comfort and reassurance.

Staff spoke about people with compassion and felt they knew people well because they had time to get to know them. Staff told us caring for the same people on a regular basis meant they got to know people and their families well. One staff member said, "Each person has their own routine, their likes and dislikes. I've really been supported by my manager to be able to take the time to get to know each person I'm supporting". They continued to say, "I never feel too rushed, I have time to talk with them [people who use the service]. Social contact can be more important to them, so you can make them feel you have all the time in the world." A further staff member said, "It's not just the person we are supporting, it's the whole family. The family's life has been turned upside down, their tired and need our support. Looking at the bigger picture, if the main carer is ill, then who's going to look after them?"

People and relatives felt staff maintained independence as much as possible. One relative said, "They [staff] really do promote [the person's name] independence". The relative continued to tell us how the person's health needs had improved, which had meant they needed less staff input. They felt they had the right balance of support from staff and staff recognised when it was the right time to reduce their input.

Staff spoke about people as individuals and told us about how they promoted people's independence. One staff member said, "Keeping people's independence is important. I feel I can provide a service which supports and encourages people's independence". The registered manager shared an example of how they encouraged one person's independence. The registered manager explained that as the person became stronger, they worked with the person to reduce the amount of support being offered. They told us this was important as the person was gaining more independence and it also increased their confidence.

People and where appropriate their relatives, felt staff supported them to make their own decisions about their care and how their support was to be delivered. For example, staff arrived to support the person at a time that was suitable for the person. Staff told us they were not only there to provide personal care, but to also provide a social aspect for people, to help maintain a positive well-being. They told us they wanted to make their time with people meaningful and would spend any extra time talking with them.

People told us they were treated with dignity and respect. One person felt staff were kind to them and would, "Recommend them to anyone". Relatives felt their family members were treated with privacy and dignity. One relative said, "It's always very dignified. And they help [the person] in a very kind way". They continued to say staff maintained their family member's privacy at all times. Staff provided us with examples

of how they promoted people's dignity. Staff spoke respectfully at all times about people when they were talking to us.

Is the service responsive?

Our findings

One person told us they had been involved in their care from the beginning. They told us, "It's going okay; they [staff] are doing a good job. We're getting used to each other, they [staff] are trying and its working well". Both relatives told us their family member and where appropriate, themselves, were involved in the development and review of their care from the start. Relatives confirmed the registered manager discussed with the person and themselves how they would like their care provided. Relatives told us communication with the registered manager was very good following this to ensure people received care that was appropriate to their needs. Relatives said where there were any changes in care, such as changing the times of calls, or increasing the length of calls this was done in agreement with all involved. Both relatives told us how they could talk to staff at any time, if they needed to.

People and relatives found the registered manager was responsive to their requests. They told us they had the opportunity to meet the registered manager as they also visited to provide care and check that everything was going well. People and relatives told us they appreciated the regular contact. One relative said, "They [staff] are extremely good at reviewing care, they listen to what we say and they work very hard to get it right". Another relative told us how the registered manger was responsive to any "last minute" changes. The relative told us, "They are very reliable"

Staff we spoke with knew about the needs of people they cared for. Staff told us they would always speak with the person to ensure they were providing care to them the way in which they preferred. When new people began using the service staff told us they were aware of people's care needs before they visited them, they told us the registered manager always introduced them first, so they never visited alone. They told us this worked well, as the person had the opportunity to meet them before any personal care began. Staff told us the registered manager updated them as soon as possible of any changes. For example, one person's skin had become a little red in one area, staff had been made aware so ensured the person was being turned to reduce the redness and reduce the likeliness of a pressure sore from developing. A staff member told us, "We contacted the district nurse, and discussed the matter with them. We let the other carers know what has happened and update the care plans so it is clear". A relative we spoke with confirmed the care plans that were in the person's home were up to date and reflected the person's current care needs.

The provider had a complaints procedure for people, relatives and staff to follow should they need to raise a complaint. People and relatives told us the provider had given them information in their welcome pack about how to raise a complaint if they needed to. Both people and relatives we spoke with told us they had no concerns about the service provision. We looked at the provider's complaints over the last twelve months and saw no complaints had been received. The registered manager told us that because of the close working links with families and open communication it reduced the likeliness of receiving a complaint as they were able to deliver a personalised service.

Is the service well-led?

Our findings

People and their relatives we spoke with felt enabled to make decisions in how the service was run. Everybody we spoke with told us they felt included and that the registered manager listened and responded to them. One relative told us, "We always have a resume of the staff member, with their picture, qualifications and a little bit about them." They told us the registered manager introduced the new staff member to them and their family member before their care commenced. The relative told us that this approach gave them the opportunity to discuss any aspects of the service delivery with the new staff member and the registered manager first. And continued to say, "I don't feel like they're a stranger and I don't feel uncomfortable. [The registered manager] has chosen the best; they are all very similar in their outlook in life".

We saw the registered manager had received compliments from people they had supported. One compliment we read said, "We cannot express enough our thanks. Very comforting, as they kept us informed with every little detail and worked very closely with the district nurse. Truly lovely people doing a wonderful job in a very difficult time for us".

Staff we spoke with told us they felt that all staff worked as a team. Staff told us that as they were supporting more people and the geographical area had become larger, they had been involved in the decisions to separate the team. This was to ensure the areas were being covered without long travelling distances. One staff member said, "We've ventured into the separate teams and we've been involved throughout". Staff confirmed this new approach was working well, and had reduced the amount of travelling.

People and their relatives felt the registered manager was approachable. One relative said, "[The registered manager] works very hard". While a further relative said, "I would say they are outstanding. We have no complaints; I can't give them anything but a glowing report". Staff told us the registered manager provided personal care for people they supported, so knew people's needs very well, they felt this knowledge helped when there maybe changes with people's care. Staff told us the registered manager was very approachable and supportive. One staff member said, "[The registered manager] is absolutely amazing. She provides the training straight away, always asks how I am. She bends over backwards, fantastic as a boss, she always listens". While a further staff member said, "There isn't anything I would change about the Accolade. [The registered manager] is always very approachable, always listens to me. I've felt very supported, she has asked me throughout, if I don't feel comfortable with something, to just ask". All staff told us they felt the registered manager had equipped them with the right knowledge to understand the role of external agencies that were available for additional advice.

Accolade support and care was a small service which supported six people with personal care, because of this the registered manager knew people who used the service and their families well. They had recruited staff based on their values and approach to people. The registered manager told us managing a small service meant they were able to meet people's needs in a way which suited the person's needs and not the needs of the service. Relatives felt this small personalised service meant their family members received good care from a service provision which had the right values. Both relatives we spoke with knew the registered

manager really well, who maintained contact with them frequently which ensured people were happy with the service provision.

We spoke with the registered manager about the checks they made to ensure the service was delivering high quality care. They told us they spoke with staff daily to ensure they were aware of any potential concerns, for example, if they were unable to make the call, or whether they required further support while attending to a person. They told us all people and their relatives had their direct number so they could contact them if they needed to. The registered manager told us communication with people, their relatives and staff was key to ensuring the service was delivering good quality care. They also supported people with their personal care where they would ask if they were happy with their support. They told us this also gave them an opportunity to see how their staff interacted and supported people.

The registered manager completed monthly checks on people's care records, to identify any shortfalls in records. They also gave staff the opportunity to discuss matters and areas for development through regular supervisions and team meetings. The registered manager explained that communication was the key to ensuring the service ran smoothly. The registered manager researched different resources for guidance along with working with external agencies to ensure they were up to date with best practice, they ensured this was shared with their staff group.