

Care Standard Limited

The Enterprise Hub

Inspection report

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Date of inspection visit:

22 July 2019

24 July 2019

30 July 2019

05 August 2019

Date of publication:

02 September 2019

Ratings

Overall rating for this service	Inspected but not rated
Is the service safe?	Inspected but not rated
Is the service effective?	Inspected but not rated
Is the service caring?	Inspected but not rated
Is the service responsive?	Inspected but not rated
Is the service well-led?	Inspected but not rated

Summary of findings

Overall summary

About the service

The Enterprise Hub/Care Standards Limited is a domiciliary care agency. It registered in July 2018 and since registration has provided care to one person between April and June 2019. At the time of the inspection, the care package was currently suspended whilst the person was in receipt of healthcare services. As such, the service was not providing any care or support.

Because there was only limited care and support practice to review, we were unable to provide a rating for this service.

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

The relative of the person supported spoke positively about the service. They said it provided personalised care that met individual needs. They said staff were kind and caring.

Recruitment procedures needed to be more robust. We found one staff member had started work without a reference being received from their last employment in care.

People's needs were assessed prior to using the service. This was used to create a detailed care plan, however, more information was needed on the exact tasks needed to provide at each care call.

There had been a strong focus on compatibility between the person and staff. For example, matches had been made based on language and culture to help ensure the person's needs were met. The person's diverse needs were taken into account.

There had been enough staff to ensure the person's needs were met. Staff received a range of training and support relevant to their role.

The person was 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.

The person's independence was promoted by the service.

The registered manager was committed to providing a personalised and friendly service. They had a good oversight of the service and understood in detail the needs of the person they were supporting.

Audit and checking procedures were being put in place as the service developed.

Rating at last inspection

This service was registered with us on 27 July 2018 and this is the first inspection.

Why we inspected

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

We have found evidence that the provider needs to make improvements. Please see the Safe section of this full report. You can see what action we have asked the provider to take at the end of this full report.

Follow up

We will seek an action plan from the provider to ensure that robust recruitment procedures are followed in the future. We will follow up whether improvements have been made at our next inspection. 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?

We were unable to rate this domain.

Details are in our safe findings below.

Inspected but not rated

Is the service effective?

We were unable to rate this domain.

Details are in our safe findings below.

Inspected but not rated

Is the service caring?

We were unable to rate this domain.

Details are in our safe findings below.

Inspected but not rated

Is the service responsive?

We were unable to rate this domain.

Details are in our safe findings below.

Inspected but not rated

Is the service well-led?

We were unable to rate this domain.

Details are in our safe findings below.

Inspected but not rated

The Enterprise Hub

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. 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 our 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 22 July 2019 and ended on 5 August 2019. We visited the office location on 30 July and 5 August 2019.

What we did before inspection

We spoke with the local authority safeguarding and commissioning teams to see if they held any information on the service.

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.

During the inspection

During the inspection we spoke with the relative of the person who used the service. We spoke with the registered manager and another manager who worked for the service. We were unable to get in touch with any of the staff members who had provided regulated activities.

We reviewed one person's care file, two staff files and reviewed management documentation such as training records, policies and procedures.

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. We have been unable to rate this domain. The service had only provided a small amount of care and support to one person between April and June 2019. We would need evidence of sustained care practice to be able to rate the service against our characteristics.

Staffing and recruitment

- At the time of the inspection, there was no delivery of care and support. One person had received consistent staff who arrived on time during the two months they received the service. The service was also a recruitment agency, and this allowed them to have a bank of staff available to ensure people's needs could be met.
- We looked at the files of the two staff who had provided care and support. We saw staff had attended an interview and had some checks on their backgrounds including a Disclosure and Barring Service (DBS) check. We saw some evidence of references being sought, however, in one of the files we looked at a reference had not been received from their last employer in care, which is a requirement under the regulations.

We found no evidence people had been harmed as a result of this. However, it is a requirement that references are sought and retained from an employee's last role in care. This was therefore a breach of regulation 19 of the Health and Social Care Act (2008) Regulated Activities 2014 Regulations.

We raised this with the registered manager who contacted the person's previous employment to obtain a reference.

Systems and processes to safeguard people from the risk of abuse

- A relative we spoke with said staff were trustworthy and they had no safeguarding concerns.
- Policies were in place to help reduce the risk of harm and the registered manager had a good understanding of the correct procedures to follow to keep people safe.

Assessing risk, safety monitoring and management

- Where care and support had been provided, risk assessment documents were in place, assessing people's needs and providing guidance for staff. We noted a manual handling assessment was needed to provide more practical guidance to staff on how to safely deliver support. We raised this with the registered manager to ensure it was addressed.

Using medicines safely

- At the time of the inspection the service was not providing medicine support to anybody. We saw information about the medicines one person was prescribed were recorded within the care plan to help the service understand the person's full care and support needs.

Preventing and controlling infection

- Personal Protective Equipment (PPE) was available to staff and policies to support good infection control practice were in place.

Learning lessons when things go wrong

- There were no examples of lessons learnt following incidents or adverse events in the two months the service had been provided.

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. We have been unable to rate this domain. The service had only provided a small amount of care and support to one person between April and June 2019. We would need more evidence of sustained care practice to be able to rate the service against our characteristics.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- There was a clear pre-assessment process in place where the registered manager visited people prior to using the service and completed an in-depth assessment. People's individual likes, dislikes and preferences were considered as part of this.
- Policies and procedures were in place which ensured staff worked to recognised standard and guidance.

Staff support: induction, training, skills and experience

- Staff who had delivered care and support had received training in subjects relevant to their role caring for the person. This included a full induction to the service and its ways of working.
- Staff had only been supporting one person for two months and had not received any supervision or appraisal in this time. Policies were in place that these would take place every three months.

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

- The service had not provided any support to help people eat or drink.

How do staff work together to ensure that people receive consistent, timely, coordinated, person-centred care and support when they are referred to, use, leave, or move between, different services? Supporting people to live healthier lives, access healthcare services and support;

- The service had not had to work with any other health professionals over the person's care and support. However, we saw when a family had contacted professionals this was recorded so the service was aware of action taken to address any health concerns.

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 and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- The service had supported one person for a short period of time who lacked capacity to make decisions themselves. We saw that the service had liaised with their family to ensure any decisions were made in their best interest.

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.

We have been unable to rate this domain. The service had only provided a small amount of care and support to one person between April and June 2019. We would need more evidence of sustained care practice to be able to rate the service against our characteristics.

Ensuring people are well treated and supported; respecting equality and diversity

- A relative told us that staff were kind and caring and treated their relative well.
- We saw the person's diverse needs had been taken into account prior to using the service. Staff working at the recruitment agency had been matched with the person based on shared language and culture to help ensure a good relationship developed between the person and staff. The relative told us this had been effective.
- All staff had been introduced to the person prior to using the service and the person had received care and support from a consistent group of care workers.

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

- The relative we spoke with said they felt involved and their views were taken on board. The care package had been designed around them and their relative's needs.

Respecting and promoting people's privacy, dignity and independence

- A relative said staff respected their relative and their house, for example, ensuring things were kept tidy.
- The registered manager explained how independence had been promoted for example encouraging the person to do as much of possible themselves when mobilising.

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. We have been unable to rate this domain. The service had only provided a small amount of care and support to one person between April and June 2019. We would need more evidence of sustained care practice to be able to rate the service against our characteristics.

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

- The relative we spoke with said appropriate care had been provided which met the person's individual needs.
- A care plan was in place which provided information on the person's care needs. However, there was a lack of clear instruction for staff on what to do at each visit. Only two staff had ever delivered care and staff and the registered manager had an in-depth knowledge of the person and what they needed which reduced any risk. The registered manager agreed to include clear instructions for staff in the person's care plan, making it clear what care and support staff were to deliver at each visit.

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.

- The service had assessed the person's communication needs and had ensured carers were in place who spoke the same language as them.
- Documentation such as care records needed to be made available in a more accessible format to support involving people in the creation and review of their care documents.

Improving care quality in response to complaints or concerns

- A complaints policy was in place and information was provided to people within the service guide on how to make a complaint. No complaints had been received about the service.

End of life care and support

- No end of life support had been provided by the service. The care plan we reviewed needed to contain more details on the person's future wishes.

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.

We have been unable to rate this service. The service had only provided care and support to one person between April and June 2019. We would need more evidence of care practice to be able to rate the service against our characteristics

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- The registered manager demonstrated a commitment to providing high quality, person centred care. They were keen to ensure people received a personalised service in line with their choices and preferences. For example, in matching the right staff to support people and ensuring consistency.
- The relative we spoke with said they were happy with the service provided and would recommend the service.
- The registered manager had good oversight of the service and understood how it operated including detailed knowledge of the care needs of the person they had supported.

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

- The relative we spoke with said they felt involved in the creation and review of their relative's plan of care. Their equality characteristics had been fully considered.
- Plans were in place to do more formal review, monitoring and feedback when further care packages were provided.

Continuous learning and improving care

- At the time of the inspection there were no formal audits and checks undertaken. Spot checks, supervisions, appraisals and more formal auditing were planned as the service developed. However, the service needed to ensure records such as daily records were brought back into the office for review in a prompt way.
- Checks on the recruitment system needed to be made more robust to ensure the lack of proper references for one staff member was identified through the provider's own checking systems.

This section is primarily information for the provider

Action we have told the provider to take

The table below shows where regulations were not being met and we have asked the provider to send us a report that says what action they are going to take. We will check that this action is taken by the provider.

Regulated activity	Regulation
Personal care	Regulation 19 HSCA RA Regulations 2014 Fit and proper persons employed 2) (3) Robust recruitment procedures were not always operated to ensure staff were of suitable character to work with vulnerable people. Information relating to a person's conduct in their last role in care was not present.