

Mr & Mrs S Wortley

Wisteria Care

Inspection report

The Forum
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Yeovil
Somerset
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Tel: 01935823495

Date of inspection visit:
22 December 2022

Date of publication:
13 January 2023

Ratings

Overall rating for this service

Good ●

Is the service effective?

Good ●

Summary of findings

Overall summary

About the service

Wisteria Care is a domiciliary care agency. It provides personal care to people living in their own houses and flats. It provides a service to older adults and younger disabled adults. At the time of the inspection the service supported 99 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.

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

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

The service was able to demonstrate how they were meeting the underpinning principles of right support, right care, right culture.

Right Support

Improvements had been made. The service was now working within the principles of the Mental Capacity Act 2005. People were supported to make individual decisions. Where they lacked capacity, the service ensured those important to them were involved and acted in their best interest.

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.

Staff supported people to access specialist health and social care support in the community when required.

Right Care

Care plans reflected a good understanding of people's needs. This included their needs, abilities and preferences. Training and refresher courses helped staff continuously apply best practice. This included training in how to support people with a learning disability and autistic people. Staff encouraged people to eat a healthy and varied diet to help them to stay well.

Right Culture

People and those important to them, including advocates, were involved in planning their care. People received good quality care and support because trained staff could meet their needs and wishes.

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 this service was good (published 27 October 2022).

Why we inspected

This was a focused inspection to see if the service had improved under the Effective domain. This domain was rated requires improvement in 2018 (published 16 May 2018). At this inspection we found improvements had been made.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

The overall rating for the service has remained good based on the findings of this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Wisteria Care on our website at www.cqc.org.uk.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service effective?

Good 

The service was effective.

Details are in our effective findings below.

Wisteria Care

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 Health and Social Care Act 2008.

Inspection team

The inspection was carried out by one inspector.

Service and service type

This service is a domiciliary care agency.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

Notice of inspection

We gave the service 48 hours' notice 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.

Inspection activity started on 22 December 2022 and ended on 03 January 2023. We visited the location's office on 22 December 2022.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority. The provider was not asked to complete a Provider Information Return (PIR) prior

to this inspection. A PIR is information providers send us to give some key information about the service, what the service does well and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with seven people who use the service and one relative about their experience of the care provided. We spoke with and received feedback from seven members of staff including the registered manager, deputy manager, care planner and care staff. We spoke with two health professionals who work with the service.

We reviewed a range of records. This included three people's care records. We looked at three staff files in relation to recruitment, induction and training. A variety of records relating to people's capacity to consent to care were reviewed.

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.

At our last inspection we rated this key question requires improvement. At this inspection the rating has changed to good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

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 MCA 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.

- At the last comprehensive inspection the service was not working within the principles of the MCA as people who lacked capacity to make specific decisions did not always have them made in line with current legislation. At this inspection there were detailed decision specific mental capacity assessments and, when required, best interest decisions with input from relevant persons.
- People's care plans noted if they had a representative with the legal authority to make decisions on their behalf should they lack capacity. Records included the scope of any legal authority for example health and welfare and/or property and finance.
- Staff understanding of the MCA informed the way they supported people. This included the importance of seeking consent before offering help. One person said, "They always ask my permission before helping me." Another said, "They get my consent all the time." A staff member told us, "Consent is very important as the client has to fully understand what is going to happen."

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

- People had an initial assessment prior to them receiving a service. This captured their individual needs, interests, abilities, preferences and intended outcomes. One person told us, "Before the care started, they came out and asked me what I needed. I felt listened to." Another person said, "They did an assessment and all areas were covered." A member of staff explained, "The assessment is important because it gives clients a choice of the care they require, and everyone has different needs."
- People received care and support which was planned and delivered in line with current legislation and

good practice guidance for example with regards support with medicines. One person said, "I can't fault them. I would recommend them."

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

- The service made timely referrals to health and social care professionals such as GPs, occupational therapists, district nurses and social workers. Where people could do this themselves, such as making appointments to see a doctor, staff encouraged them or provided them with reminders. One person told us, "My ankle swelled up and a carer encouraged me to contact the GP. They spot things in good time."
- Professionals' views of the service included: "They follow advice and information given" and, "They attend care huddles (meetings with care staff and health professionals). They give regular updates. They do what they say they are going to do and do their care assessments in good time."

Staff support: induction, training, skills and experience

- New staff had an induction which included shadow shifts with more experienced staff and practical competency checks in line with the Care Certificate. The Care Certificate is an agreed set of standards that define the knowledge, skills and behaviours expected of specific job roles in the health and social care sectors. It is made up of the 15 minimum standards that should form part of a robust induction programme. A staff member said, "My induction was very informative as to what is expected of my role and what the clients' needs are."
- Staff received a range of training. This included first aid, food hygiene, medication, safeguarding, mental capacity and autism awareness. One person said, "I have no worries about the carers. I think they are well trained." Another person told us, "Oh yes, the carers know what they are doing. They are well up with knowing how to change my catheter bag." A staff member said, "I have regular training to ensure my mandatory courses are up to date. I do have specialised training to meet the needs of the clients."
- Staff received supervision where they could raise issues freely and were encouraged to think about their professional development and how they could improve their practice. A staff member said, "Supervision allows me to talk about further training I feel I might need." Another said, "I have supervision regularly throughout the year."

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

- People were encouraged to eat and drink sufficiently to maintain their well-being and support was given where this was required. For example, one person told us, "They help me eat my yoghurt and don't rush me. They are always making sure I have enough to drink."
- People's dietary needs were known and met. This included their likes, dislikes and any known food intolerances or allergies.