

# George Springall Homecare Partnership George Springall Homecare Partnership

### **Inspection report**

Main Office, John Eccles House Robert Robinson Avenue Oxford Oxfordshire OX4 4GP

Tel: 07720781037 Website: www.georgespringallhomecare.co.uk

Ratings

### Overall rating for this service

Date of inspection visit: 15 January 2020

Date of publication: 27 March 2020

Outstanding  $\Delta$ 

Is the service safe?	Good	
Is the service effective?	Good	
Is the service caring?	Outstanding	☆
Is the service responsive?	Outstanding	☆
Is the service well-led?	Good	

### Summary of findings

### Overall summary

#### About the service

George Springall Homecare Partnership is a domiciliary care service providing personal care to people living in their own homes. The service was supporting 21 people at the time of the inspection.

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.

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

The registered manager was passionate about providing high quality care that centred on people. There was an extremely caring culture that respected and valued people as unique individuals and ensured they were in control of their lives. There were many examples of staff going over and above what was expected of them, often in their own time. People remained extremely complimentary about the care they received.

When people required end of life care it was delivered with utmost dignity and compassion. People's relatives praised the support using words such as 'amazing'. Relatives also praised staff and how they supported all of the family at this difficult time.

Everyone was respected by a management team who promoted an open and inclusive culture and went to exceptional lengths to ensure people and staff felt valued. There was a stable and committed staff team that enabled people to build positive, caring relationships with consistent staff. Staff knew people well and used their knowledge to support people to engage in activities and social interactions to prevent social isolation.

The registered manager had developed strong relationships with health professionals and went to exceptional lengths to ensure people received the support they needed. There were effective systems in place to monitor and improve the service. The registered manager ensured people and staff were involved in the development of the service and used a range of methods to gather feedback. There was a clear focus on continuous improvement and commitment to following the best practice to ensure the delivery of high quality care.

People felt safe when being supported by staff. There were effective systems in place to ensure people were supported to manage identified risks. People received support from consistent staff and told us staff were rarely late and people never felt rushed.

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 received effective training and were well supported. Staff were encouraged to develop their skills and

knowledge. The registered manager ensured they kept their skills and knowledge up to date and took the opportunity to share good practice with other social care providers.

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 outstanding (published 21 July 2017).

Why we inspected

This was a planned inspection based on the previous rating.

#### Follow up

We will continue to monitor information we receive about the service until we return to visit as per our reinspection 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 effective?	Good •
The service was effective.	
Details are in our effective findings below.	
Is the service caring?	Outstanding 🟠
The service was exceptionally caring.	
Details are in our caring findings below.	
Is the service responsive?	Outstanding 🟠
The service was exceptionally responsive.	
Details are in our responsive findings below.	
Is the service well-led?	Good ●
The service was well-led.	
Details are in our well-Led findings below.	



# George Springall Homecare Partnership

**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 homes.

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.

#### 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 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

We spoke with four people who used the service and two relatives about their experience of the care provided. We spoke with six members of staff including the registered manager, executive administrator,

senior care worker, and care workers.

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

The registered manager provided additional feedback from people and copies of records the inspector was unable to see on the day of the inspection.

We received feedback from four health and social care professionals who worked with the service.

### 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 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 told us they felt safe when being supported by the service. One person said, "I am definitely safe, especially when they help me into the shower. The carers I had before said they wouldn't help me have a shower, but [registered manager] said immediately they could help me."
- Staff understood their responsibilities to identify and report any concerns related to harm and abuse. One member of staff told us, "I'd go to [registered manager] straight away. If I thought she hadn't done anything I'd go outside (the organisation)."
- The provider had effective procedures in place to ensure the appropriate external agencies were notified of any potential harm or abuse.

#### Assessing risk, safety monitoring and management

- Care plans included risk assessments and where risks were identified there were plans in place to manage the risks. This included risks associated with mobility, falls, skin damage and the environment.
- Staff were knowledgeable about the risks to people and how to support them to manage risks. They had completed appropriate training to ensure they were able to support people safely.

#### Staffing and recruitment

- People told us staff were reliable and rarely late. People received a schedule of who would be supporting them and were notified of any changes.
- There were systems in place that enabled management staff to monitor all calls to ensure people received their calls as scheduled.
- The provider had effective recruitment processes in place to support safe recruitment decisions. This included preemployment checks to ensure staff were suitable to work with vulnerable people.

#### Using medicines safely

- Where people required support with their medicines, the level of support was recorded in their care plan.
- Staff completed training in managing medicines and their competencies were assessed before they administered medicines unsupervised.
- Medicine administration records (MAR) were fully completed. MAR were audited when they were returned to the office to ensure they were being completed fully and accurately.

#### Preventing and controlling infection

- Staff completed training on how to protect people, others and themselves from the risk of infections.
- The provider ensured staff had access to personal protective equipment (PPE) to minimise the risk of

cross-infection. Staff understood how to use PPE effectively.

Learning lessons when things go wrong

• Accidents and incidents were recorded and investigated. The registered manager ensured that action was taken to minimise the risk of a reoccurrence.

• Where people or others were at risk as a result of incidents the registered manager engaged with outside agencies to ensure action was taken and lessons learnt.

### 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 the last inspection this key question was rated as good. At this inspection this key question remained the same. This meant people's outcomes were consistently good, and people's feedback confirmed this.

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

- People's needs were assessed prior to them using the service. Assessments were used to develop care plans that gave staff clear guidance in how to meet people's needs in line with current guidance and standards.
- People were involved in their assessments to ensure their care was provided in a way they chose.

#### Staff support: induction, training, skills and experience

- Staff completed training to ensure they had the skills and knowledge to meet people's needs. One relative told us, "Staff are clearly very well trained."
- Staff received regular supervisions and their competency was assessed through regular spot checks. This provided assurance to the registered manager that staff were skilled and competent.

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

- Where people required support to meet their dietary needs this was documented in their care plans.
- People told us where they were supported with meal preparation staff gave them choice.

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

- People were supported to access professional support when needed. One person said, "I was quite ill when I first came home, and they were always very quick to get me extra help if I needed it."
- Professionals told us the service contacted them appropriately. One health professional told us, "George Springall Homecare Partnership engage in conversations in relation to patient care and take action on advice."

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.

• Staff had completed training in MCA and understood how to support people in line with the principles of the act. One member of staff told us, "We are responsible to apply the MCA. We encourage them [people] to make their own decision and if we need to make a decision it must be in their best interest and the least restrictive."

### 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.

At the last inspection this key question was rated as outstanding. At this inspection this key question remained the same. This meant people were truly respected and valued as individuals; and empowered as partners in their care in an exceptional service.

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

• People continued to receive high quality care, that exceeded expectations from staff who were exceptionally compassionate and kind. Staff spoke with genuine kindness when speaking about people and their role in people's lives. One member of staff said, "I absolutely love my job. It's not like working. We make a real difference to people's lives and just going home knowing they are safe, and you have done your best for them is amazing."

• Without exception people and relatives told us staff remained extremely caring and they went 'above and beyond' to improve people's well-being. People's comments included: "We were so pleased we chose them, they couldn't have been better. So kind", "They are lovely. I was worried at first, having strangers in the house but they are all lovely and kind" and "They always ask if there is anything else they can do, over and above what they have to do." One relative told us, "They are all beautiful, amazing people who bring laughter into the home." One person told us how they missed having their hair washed. A staff member purchased a special bowl for the person and now supported the person to have their hair washed several times a week. The person laughed as they told us how special it made them feel having their hair washed and dried.

• Relatives told us of the positive impact on their lives of having care staff they could trust and rely on. One relative told us how they had taken their first holiday for a long time as they knew their loved one would be well looked after. "I trust them, they will do anything [person] asks them. They go above and beyond all the time."

• There were many examples of small things staff did for people, that meant a great deal to them and had a positive impact on their lives. One person said, "The carers are all lovely. They're chatty and friendly. They'll do anything I ask. They put my bins out, they don't have to, but they do. I just couldn't manage without them." One person was upset as they were unable to write Christmas cards to loved ones. A member of staff had visited the person and sat with them to help them write Christmas cards to family members.

• Staff were focused on building open and honest relationships with all those in their care. Staff understood the importance of developing a meaningful relationship with people and their families that ensured they felt valued and appreciated. One member of staff said, "There is a real bond with clients as you see them regularly. You can build a real relationship with them. We are like their family." Feedback from one relative stated, "[Person] got to build this amazing relationship with them [care staff]. In the end they were [person's] friends." One person liked to go to the garden centre or the local coffee shop for tea and cakes but their relatives had no means or time to take them. A member of staff who had built a close bond with the person went and took the person in their wheelchair so they could enjoy their favourite activity.

• The registered manager ensured people were treated equally and that staff were aware of protected

characteristics. One person's condition resulted in distressed behaviours, staff supported the person with kindness and compassion, understanding the impact the behaviour could have on the person. Staff understood the triggers to the person's distressed behaviours and used this understanding to distract the person, talking with them about things that interested them. Feedback seen from the person's relative said, "I know [person] could be challenging at times, when [person] was angry or frustrated, but nothing fazed you or the carers. You continued to be kind and caring and not once complained about [person]."

Respecting and promoting people's privacy, dignity and independence

• Dignity and respect remained at the heart of the service. There were many examples of staff ensuring people were supported and their views listened to. This ensured they received care in the way they wished. One person told us, "I am never rushed, they take their time and take however long I need."

• Staff understood the importance of promoting people's independence. One person was no longer able to prepare and cook their own meals which was an activity they had previously enjoyed. Care staff encouraged the person to cook with them to maintain their independence and to enable them to continue to enjoy the activity.

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

• People were at the centre of care deliver and fully involved in all decisions about their care. One person told us, "They [staff] always talk to me first before they do anything."

### Is the service responsive?

# Our findings

Responsive – this means we looked for evidence that the service met people's needs.

At the last inspection this key question was rated as outstanding. At this inspection this key question remained the same. This meant services were tailored to meet the needs of individuals and delivered to ensure flexibility, choice and continuity of care.

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

• People continued to benefit from an exceptionally personalised service that was responsive to their needs. There were many examples of the positive impact the support people received had on their lives. One relative told us how a person's confidence had improved when they started receiving care and support from the service. The relative's feedback stated, "[Person's] health condition improved so he could do a lot more for himself knowing that he is safe with you. The service was truly outstanding. Nothing was too much or too difficult to resolve for you guys, and that made my life so much easier. You undertook responsibilities well beyond your contract and that allowed me more time to spend being [relative] rather than carer."

• One person had declined all care, and remained in bed. The person's relative was extremely concerned and didn't know how to resolve the issue. One member of staff who had developed a very good relationship with the person, sat with them and explained why the care was important and made some suggestions as a compromise. The person was now accepting support every other day and gets out of bed once a week on a set day. The person and their relatives are extremely pleased with the outcome as the person is receiving the care they need and the person has remained in control of their life.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

• The registered manager ensured people were supported by consistent staff which enabled people to develop valuable relationships with staff. One person told us, "They know me well now and I see the same staff. We have a laugh and a giggle, it's lovely to see them." A relative said, "They have developed a relationship with [person] which means she trusts them."

• Staff willingly gave up their own time to support people to follow interests and prevent social isolation. One person wanted to attend a 50th anniversary celebration for a sports club they had been a member of. Two staff went in their own time to help the person get ready, then took them to the event. Staff stayed with them and returned them home after the celebration. This had clearly been a significant event for the person.

• Staff were creative in finding solutions to issues which enabled people to continue to enjoy activities that were important to them. One person liked to leave food out for a stray animal. This was causing malodours in the person's home. A member of staff worked with the person in their own time to build a large outside box that the food could be placed in. This enabled the person to continue to enjoy the visits from the animal.

• Staff looked for ways to support people to maintain relationships which were important to them. One person was unable to communicate with their loved ones and had become quite isolated. A family member

arranged for the person to buy a computer. A member of staff went in their own time to teach the person to use the computer to communicate with their family. The member of staff also taught the person how to listen to their favourite music. This enabled the person to enjoy both activities and live a fuller life

• One person's relative had moved into a care home. This had been a difficult period for the person. Care staff understood the impact on the person and took time to help them buy flowers and send cards. They also gave their own time to take the person to visit their relative and spend time with them.

End of life care and support

• The service provided exceptional end of life support to people and their relatives. People's relatives praised the support received. One relative told us, "George Springall continued to adapt the care delivery and support not just for [person], but [relative]. The care needed to change further to end of life support and [person] continued to be looked after with dignity and respect by all staff that visited [person], and [relative] was provided with much support and love during this very difficult time in [their] life. [Person] and relative] wanted to stay at home and George Springall helped them to ensure they could. We are very grateful for all they have done. We would highly recommend their team to others as we believe the company and the service were outstanding."

• The registered manager ensured people and their families were involved in decisions about their end of life care and that their wishes were followed. One relative's feedback stated, "In person's final few weeks, we had amazing care from the team. The management were exceptional giving professional, sincere and dignified care to [person]. They ensured the team were fully trained to be able to deal with individual needs. They understood [person's] personality and treated them as an individual respecting all requests with understanding and respect. [Person] was given the same staff most days who became to know [person] and their little traits. They made [person's] final days comfortable and certainly helped me deal with his end of life care."

Improving care quality in response to complaints or concerns

• The provider had a complaints policy and procedure in place. There had been no complaints since the last inspection.

• People and relatives understood how to make a complaint and were confident action would be taken to resolve any issues. One relative told us, "Any issues I know I can call [registered manager] and she would put it right."

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.

• People's communication needs were assessed, and care plans detailed how communication needs were met. One person's care plan identified they had hearing impairment and guided staff to speak to person in their less impaired ear.

### 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 remains 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 registered manager provided motivational leadership that encouraged an open and transparent culture. The service was centred on ensuring people received exceptionally high-quality care that valued them as unique individuals. People and relatives told us the registered manager was always available and took action to ensure people received the support they deserved. One relative told us, "The registered manager is very knowledgeable and is not afraid to challenge the other professionals. I have seen at least two instances when she did this for [person]. She is outstanding at her job."

- Everyone was complimentary about the registered manager. One person told us, "I see [registered manager] at least once a week and I can ring her if I need her. I can talk to her about anything. She's wonderful, full of beans." A relative said, "[Registered manager] is absolutely amazing."
- The registered manager ensured that people were at the forefront of everything the service did. Relatives gave examples of how the registered manager would constructively challenge professionals to ensure people received the care and support they needed. One relative told us how the registered manager had worked tirelessly to liaise with the funding authority to ensure their loved one was able to return to their own home as quickly as possible as they were extremely unhappy in the environment they were in. The relative said, "[Registered manager] was so supportive, she was amazing."
- Staff were highly motivated, passionate and proud to work for the provider. There was strong team work which resulted in staff feeling valued and listened to. One member of staff told us, "[Registered manager] is amazing. She has made me feel so much better about myself. I feel so valued by her."

• The registered manager was extremely supportive of staff and ensured they were truly valued for their work and commitment to people using the service. One member of staff told us, "We are like an extended family. It's an amazing company to work for. I'm really valued. [Registered manager] really cares about us, always gives you any feedback she gets about us and always giving us praise. It gives you confidence in yourself."

• Staff told us about the practical ways the registered manager made sure they felt appreciated and valued. This included a staff bonus scheme, a carer of the month award and the use of a car if theirs was in need of repair. One staff member said, "We have a company car that is available if our car breaks down. Registered manager] has even driven out to meet us when our car breaks down so that we can still get to our clients."

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

• The registered manager looked for ways to continuously improve the quality of the service and outcomes

for people. Following concerns about people's hospital admissions the registered manager had developed a hospital passport document. This was completed and held in each person's file. This information was sent with people when they were admitted to hospital to ensure professionals had key information about the person. This included information about their communication needs, health conditions and end of life wishes. One professional told us, "George Springall are always seeking new ways to approach health and social care issues and develop new ways of working. Most recent is their use of the hospital passport which we discussed last year promoting the value of communication when clients may be admitted to hospital."

• There were effective systems in place to monitor and improve the service. The registered manager carried out a range of audits and spot checks on staff to ensure people received high quality care.

#### Working in partnership with others

• The registered manager worked closely with other professionals to achieve improved outcomes for people. One person was ready for discharge from hospital. The registered manager immediately identified that changes to the person's care package would be needed. The registered manager liaised with the funding authority and the pharmacist to enable the required changes to be made and the person to be discharged home. The registered manager also arranged for immediate training for staff to ensure they had the skills and knowledge to ensure the person's changed needs could be met.

• Professionals were extremely positive about the service and management. One professional said, "I highly rate this care company and I have always had a good working relationship with their management and staff."

• There were many examples of the registered manager involving professionals to ensure the best possible outcomes for people. One professional who had worked with the service told us, "The staff and management were very good at providing de-escalation techniques as well as recording information accurately. The organisation had an understanding of the client's mental wellbeing and offered support to meet the needs. They had good knowledge of their own professional boundaries and understood when it was appropriate to contact other services and professionals when it was out of their remit."

• The registered manager was actively involved in encouraging and supporting improvements across the social care sector. They were invited to speak at a national conference about the service and their CQC rating of outstanding. Feedback from the event showed the presentation had been valuable to other providers.

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

• Staff felt involved in the running of the service. One member of staff told us, "We have staff meetings. It is a very open meeting and we can talk and share concerns. We are definitely listened to."

• The registered manager sent out regular surveys to people, relatives and staff. Feedback was extremely positive. Where any individual issues were raised the registered manager took immediate action to find a resolution. One member of staff had difficulty with their working hours. The registered manager spoke with them and adjusted their working patterns to ensure they were able to manage their work and family life.

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 understood their responsibilities in relation to their duty of candour. There was an open culture that ensured learning when things went wrong.