

Thornhill Care Services Limited

Thornhill Care Services

Inspection report

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Ratings

Overall rating for this service	Good ●
Is the service safe?	Good ●
Is the service well-led?	Good ●

Summary of findings

Overall summary

About the service

Thornhill Care Services provides personal care and support to people living in their own homes. This included people who had a learning disability and mental health needs. Some people using the service were living in supported living houses. At the time of our inspection 10 people were receiving the regulated activity – personal care.

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

People were happy with the care and support they received. Relatives said they would recommend the agency.

People received care from staff and an organisation who were committed to providing high quality care and support to people. There were systems in place to monitor standards and constantly look at ways to improve.

We expect health and social care providers to guarantee autistic people and people with a learning disability the choices, dignity, independence and good access to local communities that most people take for granted. Right support, right care, right culture is the statutory guidance which supports CQC to make assessments and judgements about services providing support to people with a learning disability and/or autistic people.

Based on our review of key questions safe and well led the service was able to demonstrate how they were meeting the underpinning principles of Right support, right care, right culture.

Right Support

People were supported to have maximum choice, control and independence. People and/or their representatives were involved in decisions about their care and support.

Staff supported people in their own homes and promoted their independence and choice.

People were supported by small staff teams who knew them well. People were comfortable with the staff who provided their care.

Right Care

People received kind and compassionate care. Staff knew people well which enabled them to provide

person-centred care in accordance with people's wishes and preferences.

People received care which met their individual needs. Staff worked with other professionals to make sure people received the right care and treatment.

People were supported to access their local area safely.

Right Culture

People were supported by a registered manager and provider who worked hard to promote a culture where people were valued and respected as individuals.

The registered manager and provider were open and transparent and took action to make sure people were protected from avoidable harm.

People were cared for by staff who felt valued by the organisation and supported by the registered manager.

Communication between staff was good which meant people received care and support in accordance with their up to date wishes and needs.

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 (report published 16 June 2019)

Why we inspected

We undertook this inspection as part of a random selection of services rated Good and Outstanding.

This was a focussed inspection which only looked at the key questions safe and well led. 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 not changed based on the findings of this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Thornhill Care Services 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 safe?

Good ●

The service was safe.

Details are in our safe findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-Led findings below.

Thornhill Care Services

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. An Expert by Experience made phone calls to relatives of people who used the service. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

This service is a domiciliary care agency. It provides personal care to people living in their own homes.

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

Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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.

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

Notice of inspection

We gave the service 24 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 21 June 2022 and ended on 22 June 2022. We visited the location's office on 21 June 2022.

What we did before the inspection

We looked at all the information we held about the service.

We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make.

We used the information gathered as part of monitoring activity that took place on 18 March 2022 to help plan the inspection and form our judgements.

We used all this information to plan our inspection.

During the inspection

We met with two people who used the service and five members of staff. This included office and care staff. We spoke with two relatives of people who used the service and a further three care staff by phone.

We looked at a variety of records including, minutes of staff meetings, three people's risk assessments, two staff files and quality assurance audits.

The registered manager and nominated individual were available throughout the inspection. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At our last inspection we rated this key question good. The rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- The registered manager took action to make sure risks of abuse were minimised. This included ensuring staff had the training they needed to recognise and report abuse. Staff spoken with were confident they would be able to recognise possible abuse.
- People were supported by an agency who worked transparently with appropriate authorities to make sure any allegations or concerns were fully investigated. This helped to make sure people were protected.
- People felt safe with the staff who worked with them. One person told us, "I feel very safe with them [staff]." Another person we met was unable to speak with us but appeared comfortable with the staff who were supporting them. One relative told us about the care their loved one had received from Thornhill Care Services. They said, "She was absolutely safe. They were kind and caring and we trusted them completely."
- People told us they would be comfortable to raise any concerns with staff, the registered manager or nominated individual. Relatives said where issues had been raised, they had been dealt with immediately.
- People were cared for by staff who were respectful of people and their property. One relative told us respect was demonstrated because, "They never leave early, never use their mobile phones when they are caring for my relative."

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- People lived safely and free from unwarranted restrictions because the staff assessed, monitored and managed safety well. People had personalised risk assessments which promoted independence and participation with minimum risk to themselves and others.
- People's risk assessments were regularly reviewed to make sure they continued to be relevant and respected people's preferences and needs.
- The registered manager acknowledged that people with capacity could choose to take risks. For example, one person wished to move to an environment which may carry higher risks than their current accommodation. The registered manager was supporting this person to fulfil their wish.
- Staff received the training they required to make sure risks to themselves and people were minimised. For example, all staff received practical training in moving and handling which included the use of equipment needed to help people to mobilise.
- The registered manager and provider worked in a transparent way to ensure that when things went wrong, they learnt from their mistake and made changes. This had included changes to how they assessed new clients.
- People were supported by an agency who made changes to ensure that mistakes were not repeated. For

example, providing additional training and de briefs to staff following any untoward incidents.

Staffing and recruitment

- People were cared for by staff who had been safely recruited. New staff went through a robust recruitment procedure to make sure people were kept safe. This included seeking references and carrying out appropriate checks.
- People were cared for by small teams of staff who they got to know well. All new staff shadowed more experienced staff to enable them to get to know people and for people to become comfortable with them. One member of staff told us they always visited new people with a member of the management team before they began to provide care to them.
- Relatives said they saw the same staff. One relative, who's relative had received end of life care from the agency, commented, "There were four carers who would rotate so she always had someone she knew."
- The agency had experienced difficulties in recruiting staff locally. They had therefore been pro-active in recruiting from overseas to make sure people were supported by sufficient numbers of staff. This recruitment had been accompanied by support and training for new staff to make sure the care they provided was culturally appropriate for people.
- All staff had access to on-call managers throughout the day and night. This meant they could seek support or guidance at any time. Staff said they felt well supported and could always call on a manager. One member of staff told us that when they had phoned the registered manager during the night they had answered immediately. They commented, "So supportive, never alone."

Using medicines safely

- People who required help to take medicines received support from staff who had completed specific training and had their competency assessed.
- People's needs regarding taking medicines were assessed. This enabled them to receive a level of support which promoted their independence.
- Clear records were kept when medicines were administered or refused. This enabled the effectiveness of prescribed medicines to be monitored.
- People were happy with the way they were supported with medicines. One person told us, "Staff do meds with me. I am reducing the medicines I take, and staff are helping me with that."

Preventing and controlling infection

- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was accessing testing for people using the service and staff.
- We were assured that the provider's infection prevention and control policy was up to date.
- People were supported by staff who had received training in the prevention and control of infection. This ensured staff were practising in accordance with up to date best practice guidelines.

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 our last inspection we rated this key question good. The rating for this key question has remained good. 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 led by example to promote a culture which was open and inclusive. People could talk to the management team or staff if they had any worries or concerns.
- People were happy with the care they received and said they would happily recommend the agency to others. One relative told us the best thing about the service was, "How human they are - open, honest, loving people."
- People were cared for by an agency where the registered manager took time to listen to people. This helped to make sure care provided was in accordance with people's wishes and person centred. One relative told us they thought the registered manager went, "Out of her way to come and see my relative, she comes and sits down and chats with my relative."
- People were supported by small teams of staff who were able to get to know them well. This enabled staff to provide person centred care. Staff spoken with had a good knowledge of the likes and preferences of people they worked with.
- New staff, including those who had come from overseas, had felt welcomed by the agency and other team members. One staff member said, "We all work as a team to provide the best quality care."
- People and/or their representatives were involved in all decisions about their care and support. One person said, "I'm happy with my care plan. I was fully involved."

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

- People were supported by an agency who acknowledged when things went wrong and took action to address any issues raised. For example, issues were reported to the Local Authority safeguarding team when they felt their care may have placed someone at risk.
- The service welcomed feedback both negative and positive. They wrote in their Provider Information Return (PIR), "We encourage a 'no blame', honest culture to support open and truthful staff and supportive management response to mistakes."

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

- The registered manager had the skills, knowledge and experience to perform their role. They had a clear understanding of people's needs and had systems in place to monitor the quality of care provided to each person. This included unannounced spot checks and more formal audits of practice and records.
- People were cared for by an agency who used audits to identify shortfalls and make ongoing improvements. The registered manager told us that audits also showed what the service was doing well which supported other quality monitoring.
- The registered manager worked alongside staff to seek people's views and monitor the quality of care provided.
- The registered manager and provider ensured staff had the training and support they needed to provide high quality care to people. Staff said this had given them the confidence and skills needed to carry out their role well. One member of staff said, "Everything is about giving the best care we can."
- The registered manager and provider kept up to date with national policy to inform changes and improvements to the service. They communicate well with the Care Quality Commission and are aware of their legal obligations.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- The staff worked in partnership with other organisations, such as commissioners, to make sure people received care and support which met their needs. This included regular meetings with other professionals to discuss care and raise concerns.
- The registered manager worked with multi-disciplinary teams to make sure care and support provided was appropriate to people's needs. For example, the registered manager had carried out joint assessments with social workers to plan packages of care with people.
- The registered manager made sure people's legal rights were protected when they were unable to make decisions for themselves. They met with people's personal and professional representatives to ensure any decisions made were in the person's best interests.
- People were involved in planning and reviewing their care and support. Staff supported people to achieve their goals and wishes. This included supporting a person who wished to move to enable them to be more independent.
- People and their representatives had opportunities to give feedback on the service they received. The service sent out satisfaction surveys and all spot checks, to monitor care provided by staff, included interviews with the people using the service.
- People were cared for by an agency where staff felt valued and involved. There were regular meetings to enable staff to share their views. One member of staff said, "The difference between Thornhill and other agencies I've worked for is the communication. Communication is excellent, you always know what is going on."