

Abbey Care Solutions Limited

Abbey Care Solutions Ltd

Inspection report

42 Howard Business Park
Waltham Abbey
Essex
EN9 1XE

Tel: 01992713011

Date of inspection visit:

11 January 2017

12 January 2017

13 January 2017

16 January 2017

Date of publication:

02 March 2017

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

Abbey Care Solutions Ltd is a domiciliary care agency. Care and support is provided to people in their own homes. On the day of our inspection, 85 people were using the service.

When we last visited the service it was rated good.

At this inspection we found the service remained good.

People were safe from abuse and bullying. Staff had knowledge of safeguarding and were aware of their responsibilities to report any concerns. The registered manager knew of their responsibilities regarding the Mental Capacity Act 2005.

Risks were assessed and suitable control measures put in place, which still enabled people to maintain as much independence as possible. There were sufficient numbers of staff to ensure that people's needs were met and recruitment practices ensured that staff were of good character and suitable for their roles. People were supported to take their medicines safely, if required. Systems were in place to record when medicines were given and were regularly checked to ensure there were no errors.

Staff received an induction and on-going training to make sure they had the right skills and knowledge to provide people with care in their own homes. Staff were well supported and had opportunities to discuss any concerns and training needs they might have.

People are supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service supported this practice.

There were positive relationships between people and members of staff. Staff treated people with kindness and took the time to get to know them and their interests whilst providing their care. The service had involved people in producing their care plans to ensure that care was provided in the way they wanted it to be. In addition, people and their family members were provided with information about the service and what they could expect from them.

The care plans we looked at were detailed. Staff could describe how individual people preferred their care and support delivered and the importance of treating people with respect in their own homes.

The service worked in partnership with community professionals and the local authorities to meet people's needs.

The provider had a system to regularly assess and monitor the quality of service that people received and identified and acted on areas for improvement.

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 remains Good

Is the service effective?

Good ●

The service remains Good

Is the service caring?

Good ●

The service remains Good

Is the service responsive?

Good ●

The service remains Good

Is the service well-led?

Good ●

The service remains Good

Abbey Care Solutions Ltd

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 checked 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 2014.¹ This was a comprehensive inspection.

This inspection took place between the 11 January 2017 and 16 January 2017 and was announced. The provider was given 48 hours' notice of our intention to inspect the service. This is in line with our current methodology for inspecting domiciliary care agencies to make sure the registered manager can be available. Before the inspection, we asked the Registered Manager to complete a Provider Information Return (PIR). This is a form that asks the provider to give us key information about their service what the service does well and if there are any improvements they plan to make. A PIR was returned to us.

We reviewed all the information we had available about the service including notifications sent to us by the manager. Notifications are information about important events, which the Registered Manager is required to send us by law. We also looked at information sent to us from others, including family members and the local authority.

We looked at the care records of ten people and reviewed records about how the service was managed. These included medicine records, staff training, recruitment and supervision records, accidents and incidents reports, complaints, quality audits and policies and procedures. Reviewing these records helped us understand how the registered manager responded and acted on issues related to the care and welfare of people, and monitored the quality of the service.

During the inspection, we visited the agency's office and spoke with the registered manager, two members of staff and a visiting professional. We visited the homes of two people who used the service and spoke with the staff supporting them on that day. We also spoke on the phone to an additional six people, four family members and two staff.

For a more comprehensive report regarding this service, please refer to the report which was published following our last visit

Is the service safe?

Our findings

At this inspection we found the same level of protection from abuse and harm and risks to people's safety as at the previous inspection and the rating remains Good.

Staff we spoke with had a good understanding of safeguarding procedures. They told us they had received training on safeguarding procedures and were able to explain these to us, as well as explain the types of concerns they would raise. People that used the service told us they felt safe, comments included, "I feel very safe when they are here, I do not want them to leave, and, "I feel safer when they are here, then when there not here."

Risk assessments and risk management plans were in place, and updated on a regular basis to reduce the risk of harm to people. For example, detailed guidance was in place from an occupational therapist for a new piece of handling equipment, all relevant staff were also sent a copy. A healthcare professional told us, "I have worked with this service in connection with challenging cases and they are always available to talk these through."

There were robust recruitment procedures in place to ensure staff were of good character and suitable for their role. There were enough skilled and experienced staff to provide the care people needed. Staff told us they had enough time in-between care calls to be able to get to people on time. People told us that if staff were late they would ring and let them know. One person told us, "Sometimes there are unforeseen circumstances but they do let me know."

There were effective systems in place to administer medicines to people safely. The service had a current medicine policy and, when assessed as required, people received appropriate support to assist them to take their medicines safely. Medicines were only administered by staff who had been trained and assessed as competent to do so. One member of staff told us, "The medicine training is really good I have never seen a gap, if I did I would phone and tell the office. "We saw systems were in place to monitor medication errors and action was taken to minimise the risk of the error occurring again.

Is the service effective?

Our findings

At this inspection people continued to be supported by staff that were trained and effective in their role. The rating remains good. The senior team had attended a training session providing guidance and training resources to enable them to deliver their induction in line with the care certificate. The care certificate is designed to help ensure care staff have a wide theoretical knowledge of good working practice within the care sector. The senior responsible for training told us they also provided additional training related to need. For example, training was provided to support staff to care for a person with a PEG fitted. PEG stands for percutaneous endoscopic gastroscopy which is a way of introducing food, fluids and medication directly into the stomach.

Staff confirmed that they benefitted from support to understand their roles and responsibilities through regular supervision, on site observations, spot checks and an annual appraisal. Staff comments included, "Managers are supportive, and we all get on", "We also have meetings and they listen to us," and "I do feel supported, if I have a problem then [named registered manager] will listen."

The provider was working within the principles of the Mental Capacity Act (2005) when supporting people to make decisions about their care. Care plans were signed by the person to confirm their agreement related to the care and support provided. The registered manager liaised with other professionals whenever they identified a concern related to capacity and consent. Staff understood the importance of consent and explained to us how they gained people's consent to their care and helped people to make choices on a day to day basis. The registered manager was planning to introduce an additional training session for staff related to implied consent.

People were supported at mealtimes to access food and drink of their choice. The support people received varied depending on people's individual needs. Whilst some people lived with family members who prepared meals, other people required more support. On visits to people in their own homes, we observed staff asking people what they would like for breakfast. One person told us, "They always ask me what I want for breakfast; they do me a salad with cold meat for lunch and whatever I fancy in the evenings."

Information reviewed during the inspection showed the involvement of health and social care professionals. Advice and guidance provided by external health and social care professionals were reflected in people's care records. This meant staff had the correct information available to work with professionals to ensure the individual needs of the people were met. One healthcare professional told us, "I find this service excellent and clients I visit always have positive feedback about the service even if there are issues. The referrals they send to me are always required and they are very willing to try things to keep people mobile."

Is the service caring?

Our findings

At this inspection we found people were still happy with the service provided to them and the rating remains good. People told us that staff were kind and caring, comments included, "They are more like friends", "They always have a chat to me," and "They are all very good, they are very kind to me and helpful."

Relatives and people told us that they and their family members were involved in making decisions and planning their own care as much as they were able. People and their representatives had the opportunity to discuss their care and support during the review of their care. All the staff we spoke with were able to demonstrate a good knowledge of how people wished to be supported. One relative told us, "We have a really good relationship with carers and the service and communicate well. I am happy as they always let us know if there is a problem."

People's privacy and dignity was respected. Staff demonstrated a good understanding of privacy and dignity and described how they protected and respected people's dignity such as closing doors, shutting curtains and covering people. One person told us, "My carer is absolutely wonderful, and very respectful of my privacy and dignity."

People were encouraged to be as independent as they were able to be. One relative told us: Yes, [family member] is still dressing herself but carers do offer to help, but at the moment I think she is managing and they respect that."

Is the service responsive?

Our findings

At this inspection we found staff were as responsive to people's needs and concerns as they were during the previous inspection. The rating continues to be Good.

Care plans reflected people's likes and dislikes and helped staff to care for people in a way in which met their individual needs. The care plan clearly recorded what support the person needed and their background, likes, dislikes, hobbies, interests and religion. Regular reviews of people's care were held to ensure it was still meeting their needs.

People told us that staff knew them well; one person said, "I have the same every morning, but occasional different ones in the evening, but I like seeing different people sometimes." Relatives also confirmed that care was provided by regular care workers and this meant that they knew people well and understood their preferences, likes and dislikes. A relative told us, "[family member] mainly has the same carers."

People told us they knew the procedure for making complaints and said if they had any concerns they would feel comfortable raising them with the appropriate staff. Comments included, "I would contact [registered manager]", and "I know everyone in the office." We also noted the service had received a number of compliments about the quality of the service.

The registered manager demonstrated to us how the service ensured people could have good care and support and described how they worked with other agencies to achieve this. This was confirmed by a healthcare professional who told us that the service had worked extremely well with them to help prevent hospital admissions. They went on to say, "Whenever I ring they respond in a timely manner and will help out with short notice."

Is the service well-led?

Our findings

At this inspection we found the service was as well-led as we had found during the previous inspection. The rating continues to be Good.

The service had a registered manager. 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 we spoke with told us they felt the service was well managed. One person told us, "It is excellent and I would not change it." Another person told us, "I am satisfied with the service." A relative told us, "It is a godsend as we all live quite a distance and work full time so it is not easy but this has helped as at least we know [family member] is getting their medication."

Staff told us they felt supported and valued and enjoyed working at the service. Comments included, "I like going to work, we all try to help each other out and work as a team," "I feel valued by the service, it is a small company and things get done quickly, " and, "We give good care, people are usually happy."

The registered manager actively sought the views of people who used the service. The manager had purchased an impartial feedback service from the local care providers association, which questions were aligned to the measures considered during a CQC inspection. The service had received the results of a survey undertaken in 2016, which had scored them over 90% in all areas, with caring scoring 99%.

The agency had systems in place to monitor the safety and quality of the service. Medication audits were being undertaken and staff practice monitored. The quality of care records was monitored. There were systems in place to record any accidents or incidents.