

Spring Consult UK Ltd

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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

Spring Consult is a domiciliary care agency. It provides nursing and personal care to children and adults living in their own homes. This service specialises in supporting children and adults with complex healthcare needs. 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. At the time of our inspection they were providing care to 31 people who lived at home.

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

People and their relatives felt staff were caring and that support provided was safe. Staff knew people well and had training to understand their individual nursing and care needs. Care plans and risk assessments provided detailed information in relation to a range of people's conditions including, complex health care, nutrition and mobility needs. Medicines were managed as prescribed and in line with national guidance. Staff effectively followed infection control and prevention guidance, including those associated with COVID-19, to prevent people from catching and spreading infections. Individual to people fire safety guidance was not in place but the registered manager assured us that this will be actioned as necessary.

There was a good leadership at the service with shared responsibilities to ensure effective care provision. Quality assurance processes were in place and followed effectively making sure people's care was monitored regularly. Staff received on-going support to carry out their roles and responsibilities as necessary. The staff team worked closely with the health and social care professionals making sure people received the care that they needed.

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 09/05/2018).

Why we inspected

This was a planned focused inspection based on when we last inspected the service. This report only covers our findings in relation to 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 remained good. This is based on the findings at this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Spring Consult 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.

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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 an inspector and an Expert by Experience. 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.

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 48 hours' notice of the inspection. This was because we needed to be sure that the provider would be available to support the inspection when we visited.

What we did before the inspection

We reviewed information we had received about the service since our last inspection. We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We also reviewed intelligence information we held on our system including notifications about important incidents.

During the inspection

We spoke with three people who used the service and nine relatives about their experience of the care provided. We also spoke with the registered manager, quality assurance manager and two members of staff.

We reviewed a range of records. This included people's care and risk management plans, medicines management records, staff files in relation to recruitment and training data. A variety of records relating to the management of the service, including policies and procedures were also reviewed.

We contacted five healthcare professionals to find out their experiences of working with this 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 as Good. At this inspection the rating 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 were kept safe from avoidable harm because staff knew them well and understood how to protect them from abuse.
- Staff were provided with training and knew how to identify and report any potential abuse to people. Relatives' comments included, "My [relative] is safe because [staff] show a level of care, patience and understanding" and "I feel confident to go out when [staff] are here." One staff member said, "Safeguarding is about protection of vulnerable children. If I notice any negligence or abuse I would call the office and write the report."
- Staff had access to safeguarding children and adults from abuse policies and procedures.
- There was no safeguarding activity taking place during the inspection. Systems were in place to monitor the actions taken should a safeguarding concern be received.

Assessing risk, safety monitoring and management

- People were protected against the risk of avoidable harm.
- People's care plans were robust and included information to guide staff on how to support people with complex health conditions. Risks to people were identified and management plans were in place to support them safely. A healthcare professional told us, "The service has very knowledgeable and qualified clinical lead who risk assess situations and feedback to the local NHS Clinical Commissioning Group's (CCG) for action plan... Spring Consult has been very reliable, especially with the complex care needs children."
- Appropriately trained and regular staff were provided for people to ensure they knew people's care needs and routines well. One relative told us, "[Staff] are really aware of what my relative wants and take lots of time to work it out." Staff's training included a comprehensive induction programme and shadowing before they started supporting people. The registered manager said, "We only train from scratch, no matter what experience the staff member has. This way we make sure that everything is covered."
- Guidance for staff was provided to help them deal with emergencies. Environmental risk assessments were carried out by the management team to identify and assess the potential risks to staff and people in their homes. Staff completed fire safety training and had access to a fire evacuation policy and procedure to guide them on what actions to take in the event of a fire in people's homes.
- However, staff were not provided with individualised guidance on how to support people safely in the event of a fire in their homes. This was discussed with the registered manager who told us they would immediately take action to address this concern. We will check their progress at our next planned inspection.

Staffing and recruitment

- Staff recruitment processes promoted safety.

- Staff were required to complete an application form, attend an interview, provide references and where required, proof of right to work in the UK. They also undertook a Disclosure and Barring Service (DBS) check. DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.
- Provider used an electronic computer system that automatically flagged up when they needed a repeated check to be carried out, such as the DBS check.
- The provider had enough staff to support people safely. They did not take care packages if staff were not available to provide cover. The registered manager told us, "We never want to let the [local authority] down. We train staff before we say 'yes' to the care package." Systems were in place to monitor staff's attendance.

Using medicines safely

- People were supported to take their medicines as prescribed.
- Staff had completed training and their competency was assessed regularly for safe management of people's medicines.
- The completed medicines administration record (MAR) sheets were kept in the office which we saw being correctly completed and up to date. Systems were in place for the MAR sheets to be audited regularly making sure people were provided with the support needed to take their medicines safely.

Preventing and controlling infection

- The service used effective infection, prevention and control measures to keep people safe, and staff supported people to follow them.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was promoting safety through the hygiene practices they applied when supporting people in their homes.
- We were assured that the provider's infection prevention and control policy was up to date.

Learning lessons when things go wrong

- People received safe care because staff learned from safety alerts and incidents.
- Systems were in place to ensure that incidents and accidents taking place were promptly recorded and investigated. The provider had carried out quarterly analysis for the incidents and accidents that took place to identify any actions needed so that similar incidents would be prevented. This included the information of concern being shared with the relevant health care professionals to support a person who was experiencing periods of distress.

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 as Good. At this inspection the rating has remained the same. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care

Planning and promoting person-centred, high-quality care; Duty of Candour

- The provider had a clear vision for the direction of the service which demonstrated ambition and a desire for people to achieve the best outcomes possible.
- Where people had cultural and religious care needs, these were reflected in their care plans so that staff could protect people's rights and support their wishes.
- Staff felt supported and valued by the management team. One staff member told us, "Very good and understanding management. Very supportive. Very good communication, either via phone or email. They have a telephone number for urgent calls if needed and it can be used at any time for advice." The registered manager said, "Some shifts can be very socially and clinically demanding... Reassurance and support for staff is provided where they work with difficult and complex care packages."
- The provider gave honest information and suitable support, and applied duty of candour where appropriate. The management team was aware of their responsibilities under the Duty of Candour and were open and transparent if things went wrong in care delivery. This included the service using feedback as an opportunity to improve the quality of service provision. One healthcare professional told us, "The service responds well to feedback and there are regular meetings with the clinical commissioning group to ensure the service is well provided. In some instances when a carer was late, and parents complained the care provider changed the carer and sent them on training."

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- The registered manager had the skills, knowledge and experience to perform their role and a clear understanding of people's needs and oversight of the service they managed.
- People and their relatives told us that the service was well managed. Comments included, "I think it is well managed because I inform them if something is wrong; they listen to me and try to fix it" and "I speak to [the registered manager] rarely but she does seem approachable and I think she listens to me. I haven't made any complaints or raised concerns." A healthcare professional told us that the management team was "responsive and proactive."
- There was a clear management structure in place with shared responsibilities to support staff on the job. Regular staff meetings were held to discuss changes necessary in policy and provider procedures.
- The management team understood their responsibilities in relation to regulatory and legislative requirements, including when they required to notify the CQC about the events that affect the care provision.

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

- People and their relatives described staff as "always smiley", "friendly", "caring" "amazing people", "very loyal and diligent" and "willing to help".
- However, some family members told us that service's communication needed attention to ensure good care delivery. Comments included, "Better communication would improve things. Better communication with both the family and to the carers." We discussed this with the registered manager who told us they faced staffing shortages during the pandemic and that since the start of this year they added three new staff members to the team aiming to improve communication between the office staff and the clients.
- The provider sought feedback from people and those important to them and used the feedback to develop the service. We viewed the annual satisfaction survey completed by adults and the parents of children using the service which provided positive feedback about the care being delivered by the service.
- The registered manager listened to the views of the staff team which they used to develop the service. The registered manager said, "Everybody in the team has strengths and weaknesses, I try to understand these. I listen to strengths."

Continuous learning and improving care

- Quality assurance processes were in place to ensure good care delivery. Audits viewed included on-going monitoring of people's records, health and safety and medicines management practices.
- Systems were in place to monitor staff's performance on the job. Staff were supervised, appraised and spot checked to ensure they provided safe and effective care for people.

Working in partnership with others

- The provider worked in partnership with various health and social care professionals.
- The staff team followed advice from the children's and adults' GPs, occupational therapists and social workers aiming to achieve the best outcomes possible for the people they supported.
- The healthcare professionals told us they had good working relationships with the provider and that update was provided when people's care needs changed. Comments included, "Spring Consult has taken on with success some complex cases that other care providers struggled and has demonstrated good skills in supporting the people they care for and their families" and "Spring Consult have an effective communication system that enhance the effective management of the cases under them. They inform the CCG if the client is admitted to hospital and follow up on discharge to ensure care will be ready at home upon discharge."