

Emma Way Associates Ltd

Emma Way Associates

Inspection report

The Old Stable
South Croxton Road, Barsby
Leicester
LE7 4AG

Date of inspection visit:
23 June 2022
01 August 2022

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19 September 2022

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

About the service

Emma Way Associates is a case management service, designing tailored care packages and supporting the provision of personal care to people. The service provides support to people who have sustained a life changing injury such as orthopaedic, spinal cord or brain injury. This service is commissioned directly by lawyers and at times, directly by individuals to support people rebuild their life and address all their therapy, care, equipment, housing and transport needs. The service also support people through litigation processes to aid a successful outcome.

At the time of our inspection there were three people using the service who received support with regulated activities.

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 received safe care. Staff had required support and guidance to recognise and respond to risks associated with people's care and wellbeing. There were systems within the service to safeguard people from avoidable harm and abuse.

Staff were employed directly by people who received care. Emma Way Associates provided support with the recruitment and on-going training and support of staff. Staff were skilled and experienced to meet the individual needs of people. They worked collaboratively with health and care professionals to ensure people's health needs were met promptly and consistently.

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.

People were supported to maintain their independence. The systems within the service promoted their rights and choices and ensured they were treated with respect.

Each individual's care and support was tailored to their needs. They directed their own care and were supported to follow the interests and meet their desired outcomes.

The service was well-led. The registered manager provided support and guidance to case managers. People had easy access to managers. They told us managers were proactive and promptly took action in response to their feedback or request. There were systems in place to monitor and improve the service.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection

This service was registered with us on 06 August 2020 and this is the first inspection.

Why we inspected

This was a planned inspection based on the date of registration.

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 effective?

Good ●

The service was effective.

Details are in our effective findings below.

Is the service caring?

Good ●

The service was caring.

Details are in our caring findings below.

Is the service responsive?

Good ●

The service was 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.

Emma Way Associates

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

The service is a case management company. The service provides support with designing and co-ordinating support needs for people who have sustained a life changing injury such as orthopaedic, spinal cord or brain injuries.

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 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 June 2022 and ended on 01 August 2022. We visited the location's office/service on 23 June 2022.

What we did before the inspection

We reviewed information we had received about the service since its registration. 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 two people who used the service and one relative for feedback about their experience of the care provided. We spoke with five members of staff including the nominated individual, registered manager and a case manager. This included face to face and telephone conversations. 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.

This is the first inspection of this newly registered service. This key question has been rated Good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were protected from the risk of abuse and avoidable harm. They were supported by a team of staff who had good knowledge of how to keep people safe. Staff also were proactive to respond to concerns about people's care.
- People were provided with information relating to safe care and treatment. This supported them to raise any concern with the management team. They told us the service responded promptly to any concerns.
- There were systems within the service to refer people to other organisations to support their safety if needed.

Assessing risk, safety monitoring and management

- Each person's care record included information about risks that may be associated with their care and support. This included steps staff would take to mitigate risk through their care and support or by seeking further specialist advice and guidance.

Staffing and recruitment

- The service supported people to recruit their own staff. This included support with advertising vacancies, interviewing, checking staff suitability to meet the needs of the person and ensuring staff were of good character and have the right level of support and training to fulfil their role.
- Each care package was bespoke and directed by the person who received care and support. The service supported them with designing and recommending the right level of staff numbers required to provide safe and person-centred care.

Using medicines safely

- Staff were trained to deliver the bespoke needs of each individual including medicines support and management.
- People told us their medicines were delivered according to their needs and as directed by their health professionals and personal preferences.

Preventing and controlling infection

- We were assured that the provider was meeting shielding rules.
- 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 was making sure infection outbreaks can be effectively prevented or managed.

- We were assured that the provider's infection prevention and control policy was up to date.

Learning lessons when things go wrong

- The provider demonstrated they used incidents that occurred to provide advice, guidance and support to each individual in order to support them with making decisions about their care and prevent a risk of reoccurrence. They also used these for service improvement and planning.

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.

This is the first inspection for this newly registered service. This key question has been rated Good. 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 received a robust assessment of their needs before they received care and support from the service. Case managers completed assessments in line with relevant guidance which ensured people would be supported with their physical, mental and social needs.
- Assessments by case managers included support where needed to access a range of assistive technology and equipment which would enhance people's lives and promote their independence.

Staff support: induction, training, skills and experience

- People were supported by skilled and trained staff. Emma Way Associates supported people who used the service by ensuring their staff received relevant training to provide a good standard of care to them. This included bespoke training tailored to the specific needs of each individual as needed.

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

- People were independent with their meal choices. Some people received support from their family for their meal preparation. Staff had the training to support individuals with eating and drinking according to the needs and preferences of the individual.

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

- Case managers supported people through a multi-disciplinary approach. They ensured people who used the service and their staff had access to health and care professionals to meet any specific needs of each individual, and provided training and guidance to staff in order to meet those needs.
- There were systems in place to support staff to follow through training and guidance to ensure people's needs were met promptly and consistently.

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

- People's needs were met within the principles and requirement of the MCA. The systems within the service supported this.
- People directed their own support. They had complete choice and control over their care and support. Staff worked within the directives and preferences of the person receiving support. One person told us, "All the decisions are still made by me."
- At the time of this inspection, all the people who received the regulated activity of personal care were independent with making their own decisions.
- There were systems within the service which would support people who may not have the capacity to make their own decisions. The service would work collaboratively with such person's legal representatives to ensure support they received in this area was in the person's best interest. This included the appointment of a litigation friend and an independent psychologist as part of this process.

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.

This is the first inspection for this newly registered service. This key question has been rated Good. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

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

- People employed their own staff with support from Emma Way Associates. The support they received from the service ensured their needs would be met by their staff including meeting the requirement of their support in relation to the Equality Act.
- People told us their staff were kind and caring.
- People's care records included information and guidance to support staff to communicate effectively with people taking into account the needs of the individual.

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

- At the time of our inspection, people who used this service directed their own care and support.

Respecting and promoting people's privacy, dignity and independence

- People's care and support was designed to maximise their independence.
- Care plans included guidance on how staff would support people in a way that promoted people's rights and dignity. People's feedback was that staff practices followed their care plans.

Is the service responsive?

Our findings

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

This is the first inspection for this newly registered service. This key question has been rated Good. This meant people's needs were met through good organisation and delivery.

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

- Emma Way Associates is appointed by the individual receiving care and support or through their legal representatives to manage and co-ordinate their care and support needs. This means the person had choice and control over their care. Case managers personalised each person's care planning to meet the individual's needs and preferences.
- A case manager told us, "Case management is about the client, it's about their goals; we've moved heaven and earth to make that happen." People's feedback and documents we reviewed supported this.

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- At the time of our inspection, one of the people who received care was partly funded through public care organisations. There were systems within the service to support people to receive information in a format that would be suited to their communication needs.

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

- People directed staff on how to support them with their social needs and interest. One person told us, "If I decide I want to do something, I speak to [registered manager] and work out the best way to do it and they go out and sort it."
- Case managers supported people and their staff to access reasonable adjustments which would support them to follow their interests and take part in activities that support social inclusion.

Improving care quality in response to complaints or concerns

- At the time of our inspection, the provider had not received any formal complaints about the service.
- People told us they could easily reach the registered manager or case managers to discuss anything about their care. They told us any concerns they had were dealt with promptly.
- There were systems within the service for people to feedback about their experience of their care and support. People's feedback showed their experience was positive.

End of life care and support

- This service is designed on a reablement and rehabilitation model. This means their purpose is to support people to maximise their outcomes and independence following a life changing incident.
- Case managers had the experience and skills to work collaboratively with other health and care professionals to ensure people received dignified, pain free care should this be required.

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.

This is the first inspection for this newly registered service. This key question has been rated 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 service was person-centred. Each person's care was tailored to their individual needs and preferences.
- The culture and ethos of the service was inclusive and empowered people and staff to work together to achieve good outcomes for each person.
- Managers ensured staff were well supported. Staff had access to robust training and support. Speaking of the support they received, a case manager told us, "There's a growth mindset at Emma Way Associates (EWA). I feel like I'm a better practitioner at EWA."

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 provider understood and acted within the requirements of the duty of candour. This included how concerns raised were dealt with and how lessons were learnt from feedback or incidents at the service. Duty of candour is a requirement for providers to be open and honest with people when things may or could have gone wrong with the care they received.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- We found improvements were required in supporting people with recruiting their staff in relation to maintaining robust records of reference checks. Following our inspection, the provider sent us documents which showed changes had been made to their systems to make this improvement.
- The service was led by a competent registered manager. They demonstrated good understanding of regulation and their regulatory requirements in relation to leading a case management organisation.
- People spoke highly of the support they received from the registered manager and the organisation. One person told us, "It's nice to have [a team] that support you in everything."

Continuous learning and improving care

- There were systems within the service for monitoring and improving the care and support people received. These included systems for peer to peer review at organisational level and for case managers. The provider also completed checks and audits to monitor the service.

Working in partnership with others

- The service was delivered collaboratively. They worked with a variety of professionals mainly medical, allied health care, social care and legal professionals.