

Care & Support Solutions (North East) Limited

Care & Support Solutions

Inspection report

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Date of inspection visit:
13 June 2023
29 June 2023
13 July 2023

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31 July 2023

Ratings

Overall rating for this service	Good ●
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Is the service safe?	Good ●
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Is the service effective?	Good ●
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Is the service caring?	Good ●
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Is the service responsive?	Good ●
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Is the service well-led?	Good ●
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Summary of findings

Overall summary

Care & Support Solutions is a domiciliary care agency providing personal care to people in their own homes. The service provides support to older people, people with physical disabilities and people with mental health conditions. At the time of our inspection there were 13 people using the service.

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 kind and caring support from staff who knew them well. Staff treated people with dignity and respect. People's independence was protected and promoted.

Medicines were managed safely. Risks to people were assessed and addressed. Staffing levels were monitored and safe recruitment processes were in place. The provider had effective infection prevention and control systems.

Staff were supported with training, supervision and appraisal. People's needs were effectively monitored on an ongoing basis. 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 received personalised support based on their assessed needs and choices. Staff supported people to communicate effectively. The provider had a clear complaints process in place.

Governance systems were used to monitor and improve standards. Feedback was sought and acted on. The provider worked effectively with other professionals to help people achieve good care outcomes.

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 8 September 2018).

Why we inspected

This inspection was prompted by a review of the information we held about this service.

Recommendations

We have made a recommendation about training.

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.

Care & Support Solutions

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

An inspector and an Expert by Experience carried out this inspection. 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 houses and flats.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

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 13 June 2023 and ended on 13 July 2023. We visited the location's office on 29 June 2023.

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 and professionals who work with the service. 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 1 person and 5 relatives about their experience of the care provided. We reviewed a range of records. This included 3 people's care records and 3 medicine administration records, with accompanying documentation. We spoke with 5 members of staff, including the registered manager (who was also the nominated individual) and support staff. 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; Learning lessons when things go wrong

- People were safeguarded from abuse and told us they felt safe. One person said, "I know the staff who come in, I feel safe with them."
- Systems were in place to respond to and address safeguarding concerns. Staff received safeguarding training and were confident in applying this to their roles.
- The provider monitored and reviewed accidents and incidents to see if lessons could be learned to keep people safe. The registered manager said, "We're very lucky as don't get many, definitely no trends. We'd monitor."

Assessing risk, safety monitoring and management

- Risks to people were assessed and action taken to address them. Care plans contained guidance for staff on how people could be supported safely. A relative told us, "[Named person] does feel very safe with the carers and she holds them in high regard."
- Plans were in place to support people in emergency situations. These included a business continuity plan to ensure a continuity of care in emergencies that disrupted the service.

Staffing and recruitment

- Staffing levels were monitored to ensure people received safe support. Sufficient staff were in place to ensure people received the support calls they needed punctually and in full. One member of staff said, "You can stay on the call the whole time. If we think we need more time management speak with social workers."
- People and relatives said they were usually supported by the same staff which helped provide a continuity of care. A relative said, "[Named person] does get consistent carers visiting."
- Staff were safely recruited. The provider carried out pre-employment checks to reduce the risk of unsuitable staff being employed. These included Disclosure and Barring Service checks and obtaining references.

Using medicines safely

- Medicines were managed safely. People received their medicines when needed and clear records of administration were kept.
- Systems were in place to promote safe medicines management. These included staff training in using medicines safely.

Preventing and controlling infection

- Effective infection prevention and control systems were in place. These included training and the effective

use of personal protective equipment. A relative told us, "Carers do wash their hands, I make sure they do. The carers wear a uniform and also gloves."

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 our last inspection we rated this key question good. The rating for this key question has remained good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Staff support: induction, training, skills and experience

- Staff received training to equip them with the knowledge and skills for their roles. Staff files contained certificates of completed training. However, records did not always contain information on the types of training needed or when training needed to be refreshed to ensure it reflected current knowledge and best practice.

We recommend that the provider reviews its systems to ensure training completion is effectively monitored.

- People and relatives said staff had the skills and experience needed to support them. A relative told us, "They do their job very well."
- Staff spoke positively about the training they received. One member of staff said, "I have had good training."
- Newly recruited staff were effectively inducted into the service. Training and working alongside other staff helped them settle into their roles.

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

- People's support was delivered in line with their assessed needs and choices. These were reviewed on an ongoing basis to ensure support remained effective. One person said, "I told them what I wanted and that is what I get."

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

- People received effective support with eating and drinking where needed. Care plans contained guidance to staff on the support people needed and wanted with eating and drinking. A relative said, "They do take into account her preferences."

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

- Staff worked with other agencies and external professionals to ensure people received effective healthcare. Care plans contained information on other professionals involved in people's care. A relative told us, "Carers work well with the district nurses and GP."

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.

- Care plans recorded people's consent to their care and staff were knowledgeable about the principles of the MCA. In one case this knowledge was being used to explore one person's mental capacity, alongside other professionals involved in their care.

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 our last inspection we rated this key question good. The rating for this key question has remained 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 were well treated and received the care they wanted. One person told us, "We get on fine, they know what I need and they help me as I need it."
- Relatives said people received the support they wanted from staff who cared. Comments included, "The carers are very kind, caring and do listen to me and [named person]" and, "To be honest they are all lovely."
- Staff supported people as individuals and ensured their personal needs and choices were reflected in their care. One relative said, "The carers are excellent."

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

- People were supported to express themselves and take control of the care they received. People and relatives confirmed that regular discussions took place with people on whether they were happy with their support or if anything needed changing. A relative said, "[Named person] is listened to."

Respecting and promoting people's privacy, dignity and independence

- People were treated with dignity and respect. Feedback from people and relatives confirmed that staff had close but professional relationships with people. A relative said, "They (staff) all know what [named person's] likes and dislikes are and they always respect her choices."
- People were supported to maintain and extend their independence by doing as much as they safely could for themselves. One person told us, "They help me to do things for myself, but also help out with anything I want."

Is the service responsive?

Our findings

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

At our last inspection we rated this key question good. The rating for this key question has remained 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

- People received personalised support based on their assessed choices and needs. People and relatives were involved in creating and reviewing care plans to ensure they responded to their choices. One person said, "They do everything I want."
- Staff were knowledgeable about people's support needs and preferences. Effective systems were in place to update staff on any changes to these. One member of staff said, "The care plans are informative, easy to follow and always easy to pin point necessary information."

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.

- Systems were in place to ensure people were given information in the most accessible format for them. Staff were knowledgeable about people's communication support needs and how these could be met.

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

- Some people were supported to access social activities and maintain relationships. Where this was the case guidance was in place for staff on how people wanted to be supported with this.

Improving care quality in response to complaints or concerns

- Systems were in place to investigate and respond to complaints. The complaints policy was made available and people and relatives were aware of it. One person said, "I know who to speak to about complaints."

End of life care and support

- At the time of our inspection nobody was receiving end of life care. Systems were in place to provide this should it be needed.

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.

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

- The registered manager and provider regularly reviewed the service to maintain and improve quality. However, these checks were not always recorded. We spoke with the registered manager about this, who said all audits would be recorded in future.
- Staff understood their roles and enjoyed working at the service. Comments from staff included, "It is a brilliant company" and, "There is nothing I would improve."

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; 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 and relatives spoke positively about the service and said it helped people to achieve their care outcomes. Relatives gave us examples of how staff had empowered people to live as full and independent lives as possible.
- The provider and registered manager instilled a caring culture. Staff spoke positively about the leadership and culture of the service. One member of staff said, "Management are very supportive, compassionate and approachable regarding any issues, including personal real life issues."
- The registered manager and staff had open and transparent communication with people and relatives, including when things went wrong. One relative said, "The manager has an open door policy."

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

- Feedback was sought and acted on. People and relatives were encouraged to give their views on how things were going and what might be improved. One person said, "They do ring to keep in touch."
- Staff felt valued and involved in how the service was run. Staff meetings were held and regular communication took place. One member of staff said, "The management is always on the telephone. They ask for feedback regularly."

Continuous learning and improving care; Working in partnership with others

- The registered manager and staff worked in effective partnership with external professionals to help people get the support they wanted and needed. Care records contained evidence of collaborative working to achieve positive care outcomes.
- The provider, registered manager and staff were committed to ongoing learning and development. Staff

were supported to achieve their professional goals, including advanced levels of training. One member of staff said, "If I have wanted to train in a particular area, they have always come back with opportunities and supported me."