

MADeBA Care Ltd

Excalibur Serviced Offices

Inspection report

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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 :

Excalibur Serviced Offices is registered to provide personal care to people in their own homes. Excalibur Serviced Offices is a domiciliary care agency. It provides personal care to people living in their own homes. At the time of this inspection visit, three people received personal care.

The care service has been developed and designed in line with the values that underpin the Registering the Right Support and other best practice guidance. These values include choice, promotion of independence and inclusion.

People's experience of using this service:

- People were safe using the service because staff understood how to protect people from abuse and harm. There were procedures to keep people safe and manage identified risks to people's care.
- People received support from staff who had the knowledge and skills to provide safe, effective care. Staff felt they had access to relevant training and were supervised and supported in their roles.
- Staff encouraged people to follow a healthy diet. People made their own decisions or were given support to do so in their best interests.
- Staff promoted people's privacy, dignity and diversity and had caring positive relationships with the people they supported.
- Relatives and staff were happy with how the service was managed. There were systems in place to monitor the quality of the service and any risks or incidents.
- Staff felt supported in their roles. They were fully supported by the registered manager and were included in any developments of the service.

More information is in the Detailed Findings below.

Rating at last inspection:

Requires Improvement (report published 8 December 2017).

Why we inspected:

This was a planned inspection based on the rating at the last inspection which was requires improvement. We found the provider had made improvements since the last inspection and the overall rating is now Good.

Follow up :

We will continue to monitor intelligence we receive about the service until we return to visit as per our

inspection programme. If any concerning information is received we may inspect sooner.
For more details, please see the full report which is on the CQC website at www.cqc.org.uk

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.

Excalibur Serviced Offices

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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Inspection team: One inspector carried out the inspection.

Service and service type :

Excalibur served offices is a Domiciliary Care Agency which provides personal care for people living with learning disabilities or autistic spectrum disorder in their own homes. CQC regulates the personal care and support only.

The service had a manager registered with the Care Quality Commission. 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.

The care service has been developed and designed in line with the values that underpin the Registering the Right Support and other best practice guidance. These values include choice, promotion of independence and inclusion.

Notice of inspection:

We gave the service 48 hours' notice of the inspection visit because it is a small care service which provides support to people living in their own homes and we needed to be sure that they would be in.

What we did:

We reviewed information we had received about the service since the last inspection. This included details about incidents the provider must notify us about, such as abuse. We also sought feedback from the local authority and professionals who work with the service. We assessed the information we require providers to send us at least once annually to give some key information about the service, what the service does well and improvements they plan to make. We used all of this information to plan our inspection.

During our inspection visit we spoke with four members of staff and the registered manager. Following our inspection visit we received feedback from two relatives of people that used the service.

We reviewed three peoples care records to see how people's needs were assessed and met. We also looked at records relating to the management of the service. These included systems for managing any complaints, and minutes of meetings with staff.

Is the service safe?

Our findings

Good: People were safe and protected from avoidable harm. Legal requirements were met.

Safeguarding systems and processes

- Relatives told us that they felt people were safe.
- The provider had safeguarding systems and processes and staff had a good understanding of what to do to make sure people were protected from harm or abuse. All staff received training in safeguarding people and knew what to report, who to report to and when.
- The registered manager was aware of their responsibility to liaise with the local authority if safeguarding concerns were raised and also when to inform CQC. .

Assessing risk, safety monitoring and management; using medicines safely; learning lessons when things go wrong;

- Risks to the safety and welfare of people had been assessed and were detailed in risk assessments and care plans for staff to follow. Staff we spoke with had knowledge of people's individual risks.
- Risks around specific health conditions had been assessed. For example, where a person was living with epilepsy, details of their seizures and what staff should do was contained in their care plans.
- People were receiving their medicines when they should. The provider was following safe protocols for the receipt, storage, administration and disposal of medicines.
- Staff communicated information about incidents and accidents. The registered manager and provider monitored these events to help prevent further occurrences.

Staffing and recruitment

- Robust recruitment practices ensured only staff suitable to work with vulnerable people were employed.
- The registered manager made sure there were always sufficient staff on duty to cover the agreed hours and to meet people's needs. For example, some people required two staff for supporting them with their care needs and this was consistently provided.

Preventing and controlling infection

- Relatives told us staff kept people's homes clean and demonstrated effective infection control by the appropriate use of gloves and aprons when providing personal care.
- Staff followed their infection control training they had received to reduce the likelihood of the spread of infections and ill health.

Is the service effective?

Our findings

Effective – this means that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

At the last inspection this area was rated as Requires Improvement as staff did not always have adequate training. At this inspection we checked to make sure the provider had taken measures to improve. The rating has now changed to Good.

Good: People's outcomes were consistently good, staff had access to relevant training for their roles. Legal requirements were met.

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

- People had an assessment of their needs before they started to use the service. This made sure people's needs could be met by the service.
- People's complex needs were recorded and followed by staff, however the assessments did not always contain information gathered from other relevant health professionals. For example, a plan to manage a person's anxieties only contained information given by their relatives. The plan did not include information from other professionals who were involved in the ongoing management of their anxiety which meant, some aspects of their care and treatment could be missed. The registered manager acknowledged this and made arrangements to consult and record with other professionals in future.

Staff skills, knowledge and experience

- Staff received a detailed induction at the start of their employment and staff new to care completed the Care Certificate. The Care Certificate is a national approach to ensure staff receive thorough training related to a career in care. The last inspection identified gaps in staff knowledge and training. At this inspection we found improvements had been made. One member of staff told us, "Training has been updated and improved."
- Staff felt confident their training was enough to enable them to fulfil their roles safely.
- There was a system that provided details of what training and refresher training staff required.

Supporting people to eat and drink enough with choice in a balanced diet

- Staff supported people to eat a balanced diet to maintain their health. Where people needed additional support to eat and drink safely, staff were trained and experienced enough to do this safely. One relative said, "[Person] has feeding difficulties and each carer (staff) has adapted to this. They each know what to feed [person], the consistency and how to assist her with her meals."

Staff providing consistent, effective, timely care

- Where people had been unwell or of concern to staff the relevant health professionals had been contacted. For example, a doctor had been contacted when staff felt following their observations that a person may be due for a medicine review.

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 Act 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.

- Care staff understood the principles of the MCA and offered people choices about how they lived their lives. People made their own decisions or were given support where necessary in their best interests.
- Staff told us the importance of supporting people to make decisions for themselves and promoting choice. For example, one person was supported to access transport. Staff told us that if the person chose not to access transport on a particular day they would support them to do what they wished.

Is the service caring?

Our findings

Caring – this means that the service involved people and treated them with compassion, kindness, dignity and respect.

Good: People were supported and treated with dignity and respect; and involved as partners in their care. Legal requirements were met.

Ensuring people are well treated and supported

- People had caring, kind supportive relationships with the staff who supported them. One relative told us, "They are absolutely cared for, 100%." Another relative said, "They only employ staff who actually want to care."
- Staff told us how they enjoyed the job they did and how much pleasure they got from spending time with people.
- Staff understood people's individual ways of communication. They told us that understanding the functions of people's behaviours and how this may indicate a person is unhappy or unwell was an important aspect of caring.
- One relative said, "They [staff] have allowed me to relax in the knowledge that when [person] is being cared for they do so with the highest standard of care and she is treated with the utmost respect."

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

- People were supported to make choices about the care they received.
- Relatives felt staff treated people as individuals and all assessments and care plans were individually tailored to their needs. They said staff knew about the preferences of the people they supported and treated people with dignity and respect. Our inspection visit showed it was clear that the provider's approach was person centred.

Respecting and promoting people's privacy, dignity and independence

- Staff told us how they encouraged independence and how if people could carry out tasks they were encouraged to do so. One staff member said, "It is not about always doing everything for the person, we should be there to enable and encourage people."
- Staff demonstrated an approach that was non-discriminatory, and we were assured that regardless of people's abilities, race, culture or sexuality they would be treated equally.
- One relative said, "The relationship between the carers (staff), [person] and ourselves has grown into one of trust and mutual respect."

Is the service responsive?

Our findings

Good: People's needs were met through good organisation and delivery. Legal requirements were met.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control.

- Relatives told us how the staff and the registered manager involved them and the people they supported in how their care and support was planned and reviewed. One relative said, "The team (registered manager and staff) have been nothing but supportive and very willing to listen and to provide advice on different management techniques and strategies which we have had to work at together."
- Three people's care records had assessments of people's care and support needs. There were regular re-assessments of people's needs and these involved the person themselves as well as people important to them, including family members. All aspects of a person's needs were detailed in their care plans.
- People participated in activities linked to their hobbies and interests. One person was supported to access college. Also people were given opportunity and support to access clubs and activities held by other services that were run by the provider. Staff told us that this widened people's circles of friendship and encouraged positive relationships.
- People and relatives told us staff were punctual staying for the expected length of time. The registered manager told us they always aimed to maintain a service that was reliable. The registered manager was proud that they had not yet had any missed calls.

Improving care quality in response to complaints or concerns

- There had been no complaints recorded by the registered manager, however there was a system in place to ensure complaints would be dealt with effectively. Relatives were aware of how to make a complaint. All relatives we spoke with were confident that any concerns would be dealt with promptly.

End of life care and support.

- No one received end of life care at the time of our visit. The registered manager said they would support people to receive the right care at the end of their lives if required. They would seek guidance from other healthcare professionals to make sure people received the most effective care to manage their symptoms.

Is the service well-led?

Our findings

Well-Led – this means that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

At the last inspection this area was rated as Requires Improvement as the systems to audit the quality of the service were not adequate. At this inspection we found improvements had been made.

Good: 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 and support with openness; and how the provider understands and acts on their duty of candour.

- The registered manager was committed to providing a specialised service for people with learning disabilities. They told us that the aim was to, "Provide a sensitive, nurturing service to people who have a learning disability and/ or complex needs."
- The registered manager understood their responsibilities under the Duty of Candour. This places an obligation on providers and registered managers to be open and honest and take accountability when things go wrong.
- Relatives and staff spoke highly of the registered manager and told us that they were always available and supportive.

Managers and staff are clear about their roles, and understand quality performance, risks and regulatory requirements

- The provider and registered manager had established robust governance systems which enabled the management team to have effective oversight and monitoring of areas such as daily records, care plans, risk assessments and medicine records. There was a system to identify and learn from any mistakes or areas of concern.
- Staff understood their roles and responsibilities. They felt confident to whistle blow and report poor practice if they needed to.

Engaging and involving people using the service, the public and staff

- Relatives told us they were encouraged to share their views and provide feedback about the service. There was regular contact from the staff and the management team to monitor how well people felt the service was doing.
- Staff felt that they had the opportunity to be fully included in any decisions that were made about the service.
- The registered manager and staff gathered people's views on the service daily through their interactions with people.

Continuous learning and improving care

- The registered manager used information from quality checks to improve the quality of care people

received.

- The registered manager and provider had worked to improve on the last inspection and improvements had been made.

Working in partnership with others

- The registered manager and staff team worked in partnership to ensure people received the relevant support from other agencies as required; such as the local authority and community health care professionals.
- The registered manager acknowledged that an increase in liaising with professionals was needed in some aspects of planning for people' s care. They told us that they would strengthen and improve the assessment process to account for professional advice and input.