

Ideal Community Care Solutions C.I.C.

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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 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

The service was part of a non-profit organisation based in Brigg called The Carer's Support Centre, a charity to support carers in the community. The service, but not the charity, required registration with the Care Quality Commission, as it provided personal care and support to people living in their own homes whose carers needed a break. At the time of our inspection there were 53 people who received personal care.

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

Since our last inspection there was now a registered manager in post. Governance and leadership had improved.

People and their family members told us they felt safe being supported by the care staff, who were polite and caring. Staff understood how to report any safeguarding concerns.

Medicines were managed and administered safely. Staff were recruited safely. Staffing was provided consistently by staff who knew people well and stayed the right length of time.

Assessments were carried out thoroughly before people started to use the service and advice and guidance from healthcare professionals was followed where needed. Staff told us they were well trained and supported.

People told us they usually knew who was arriving to provide their support. Staff provided good nutritional support where this was required for people.

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 treated with kindness, dignity and respect. The service had worked to share understanding of gender equality with the staff team.

People told us they knew how to make a complaint. There was a clear management structure and staff were supported by the registered manager. People's feedback was sought regularly and acted upon. We received positive feedback about how the service was managed. Quality assurance systems were completed. Team meetings were held regularly to pass on key information and involve staff in the running of 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

The last rating for this service was good (report published 30 September 2017).

Why we inspected

This was a planned inspection based on the previous rating.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

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.

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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 Care Act 2014.

Inspection team

The inspection was carried out by one 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.

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.

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 registered manager would be in the office to support the inspection.

Inspection activity started on 5th March and ended on 6th March 2020. We visited the office location on 5 March 2020. The Expert by Experience spoke with people and relatives on the telephone on 5 and 6 March 2020.

What we did before the inspection

We reviewed information we had received about the service since their registration. We sought feedback

from the local authority and professionals who work with the service. 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 used all this information to plan our inspection.

During the inspection

We spoke with 17 people who used the service and eight relatives about their experience of the care provided. We spoke with five members of staff including the registered manager, the co-ordinator, one senior personal support assistant and two personal support assistants.

We reviewed a range of records. This included four people's care plans and associated documentation. We looked at three staff files in relation to recruitment and three to review staff supervision records. Multiple records relating to the management of the service and a variety of policies and procedures developed and implemented by the provider were reviewed during the inspection.

After the inspection:

We continued to seek clarification from the registered manager to validate evidence found.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At the last inspection this key question was rated as good. At this inspection this key question has remained good. This meant people were safe and protected from avoidable harm.

Safeguarding systems and processes, including recruitment

- People we spoke with said they felt safe. Comments included, "I feel safe with them [care staff]," and "Very professional, I trust all of them."
- Relatives and carers we spoke with said they were kept informed in relation to any concerns regarding safety.
- The provider had effective safeguarding systems in place and all staff spoken with had a good understanding of what to do to make sure people were protected from harm or abuse. They told us they received robust training and records confirmed this.

Assessing risk, safety monitoring and management

- Risk assessments were in place to reduce the risks to people. These included environmental and individual risk assessments and provided staff guidance on actions to take to reduce the risk of harm.
- The service used an electronic monitoring system which minimised risks associated with lone working in the community.

Staffing and recruitment

- There were enough staff to meet people's needs. People told us that staff generally arrived on time and always stayed the required length of time.
- The provider had arrangements in place to carry out checks on staff to assess their suitability before they were employed in the service.

Using medicines safely

- People told us that they required support to take medicines this was done considerately. One person told us, "They give me my tablets on time and always wait for me to take them."
- Records showed, and staff confirmed they had received training in medicines management and they had been assessed as competent in this area.

Preventing and controlling infection

- Staff had received infection control training. They told us plenty of gloves and aprons were available to them.
- The service carried out regular checks in relation to infection control best practice.

Learning lessons when things go wrong

- The service was committed to driving improvement and learning from accidents and incidents. At every team meeting the whole staff team reviewed any incidents to see what learning could be taken from them.

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 the last inspection this key question was rated as good. At this inspection this key question has remained 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's needs and their home environment was assessed prior to starting the service by a trained senior staff member.
- The assessment developed into a care plan that was reviewed regularly in line with best practice guidance.

Staff support: induction, training, skills and experience

- New staff were supported through a period of induction and training that included the Care Certificate. This is a recognised set of standards for people working in social care.
- Staff confirmed they were supported using training and supervision. Supervision records were very detailed and addressed issues of attitude and performance clearly. One staff member said, "The support is fantastic, there is always someone there at the end of the phone."
- The service had regular meetings to ensure staff were kept informed about developments at the service.

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

- People were supported with their nutrition. One person told us, "[Staff name] always ask me what I would like, she says 'Shall you have some porridge for a change, porridge is good for you' and then she makes it in the microwave,"

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

- Relatives were positive in their views that people received prompt healthcare support.
- Care records detailed when people had support from healthcare professionals and guidance was written into care plans.

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.

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.

- The service obtained copies of lasting power of attorney (LPA) to ensure people had the right to make decisions on behalf of someone who lacked capacity.
- Staff understood capacity and consent. People told us staff always sought permission before offering care and support.

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 the last inspection this key question was rated as good. At this inspection 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

- Relatives were complimentary about the attitude of the staff to provide comfort and reassurance.
- People looked well cared for and staff offered appropriate support to make sure people were well presented.
- There was a positive culture at the service and people were provided with care that was sensitive to their needs and non-discriminatory. The registered manager had put on an awareness session for the staff team led by a member of the transgender community.

Respecting and promoting people's privacy, dignity and independence

- Staff respected people's privacy and dignity when delivering care and support. Relatives we spoke with said, "They are all very kind and considerate," and "They are very kind and use gentle humour to jolly [Name] along."
- Staff encouraged people to be as independent as possible. People told us, "I like to do bits for myself and they help me do that," and "They do help me stay independent."

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

- People commented how there was mutual respect between staff members and themselves which allowed for an appropriate laugh and a joke. One person said, "We always have a chat, a cup of tea together and a laugh, I look forward to them coming."
- People were very clear in their opinion that they received a good quality of care and support and had no concerns. The majority of people spoken with said they would recommend the service.
- Staff treated people as individuals and respected their choices.
- The registered manager explained how they would support people to access the services of an advocate if they felt the person needed someone to act on their behalf.

Is the service responsive?

Our findings

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

At the last inspection this key question was rated as good. At this inspection 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 were supported by staff who had a good understanding of their care and support needs and their personal preferences. People's care plans contained detailed information about how staff should best support them for example, with their personal care, eating and drinking, mobility, communication and medicines.
- One staff member told us, "The care plans are really well laid out, you cant go wrong if you follow them." One person we spoke with said, "I talked about my care plan with [senior personal support assistant], she talked me through everything."

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 were able to access information and advice from the provider's charitable arm based at the location. This acted as a hub in the community to support carers.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- The service was working within the AIS. People's care records included information about their communication needs. For example, staff used a white board to communicate with a person who was hard of hearing.
- Information about the AIS and how the service could provide people with information in different formats, such as braille and large print, was displayed in the location office.

Improving care quality in response to complaints or concerns

- The service had a clear system for recording, investigating and responding to any complaints or concerns. There was a regular review of complaints to see if there were any reoccurring issues.
- People told us if they had any concerns, they would not hesitate to discuss them with the registered manager and were confident they would be acted on. One person told us, "Yes, office were very professional and acted straight away, I was happy about this."

End of life care and support

- Support was provided for people who were at the end of their lives. Staff worked closely with community nursing services to provide compassionate care and support for the person and their family members.
- The service was working to ensure people were comfortable in choosing to state their wishes to the staff carrying out their assessment as they recognised this may be difficult for people to discuss.

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 the last inspection this key question was rated as requires improvement. At this inspection this key question has improved to 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

- Since our last inspection there was a registered manager now in post who had been at the service for three years.
- There was a clear organisational structure including the registered manager, coordinator, and community care staff. Staff understood their roles and responsibilities in relation to the provision of care and everyone had a shared understanding of good quality care.
- Quality of care was checked by methods including spot checks and observed visits.

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

- There was a shared vision for the organisation to provide person-centred, individual care that was of good quality and met people's needs and preferences.
- Everyone we spoke with described the organisation as being well-managed and their views were heard. One person told us, "The managers are all very approachable."
- Duty of candour was understood by the management team. The service actively reviewed incidents and near misses for learning opportunities.

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

- People were involved in the service by way of regular reviews of care, initially after six weeks, then or in response to changes or annually.
- Surveys were completed and reviewed quarterly. People were given the opportunity to feedback about care staff and the management of the service.
- The organisation had an active community presence and was a hub for carers in the local community.

Continuous learning and improving care; Working in partnership with others

- Partnership working alongside healthcare professionals was evident. The registered manager attended local provider forums and fed back learning to the staff team.
- The registered manager had systems and procedures to monitor and assess the quality and safety of their service. Audits were used to assess standards and drive up improvements. We saw these were regularly completed and reviewed.

- The management team were very receptive to feedback from the inspection and shared ideas for further development and improvement.