

Gold Care Services Ltd

# Gold Care Services Ltd

## Inspection report

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Tel: 01883349282

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29 June 2023  
11 July 2023

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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

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

### About the service

Gold Care Services is a supported living service providing personal care to 11 at the time of the inspection. The service can support up to 16 people.

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

**Right Support:** 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. Staff supported people by promoting their independence through various activities and day to day tasks.

**Right Care:** People received person-centred care and staff respected people's privacy and human rights. We saw many examples of people making decisions in relation to their care and relatives making decisions, where appropriate.

**Right Culture:** Improvement has been noted since the last inspection. The culture within the service showed people felt involved with the running of their homes and staff encouraged people to make decisions. Through various meetings, records and through observations we saw staff include people in the general day to day of the home. People appeared more confident and happier with the service.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

### Rating at last inspection and update

The last rating for this service was requires improvement (published 04 March 2022).

The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

### Why we inspected

We undertook this inspection to review potential improvements made at the service. We received information that improvement had been made in relation to the safe and well-led key questions. As a result, we undertook a focused inspection to review the key questions of safe and well-led only. 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 changed from requires improvement to good based on the findings of this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Gold Care Services on our website at [www.cqc.org.uk](http://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.

# Gold Care Services Ltd

## 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

This inspection was completed by 2 inspectors.

#### Service and service type

This service provides care and support to people living in 3 'supported living' settings, so that they can live as independently as possible. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for supported living; this inspection looked at people's personal care and support.

#### 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 29 June 2023 and ended on 11 July 2023. We visited the location's service 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. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

#### During the inspection

We spoke with 3 people who used the service and 5 relatives about their experience of the care provided. We spoke with 7 members of staff including the registered manager, senior care workers and care workers. We also spoke with 3 professionals who work closely with the service.

We reviewed a range of records. This included 4 people's care records and multiple medication records. We looked at 3 staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

# 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 requires improvement. At this inspection the rating has changed to good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People and their relatives told us they felt safe being supported by Gold Care Services. A person said, "I like it here, I am always safe and the staff are very good at making sure of that." A relative said, "The staff are just great at keeping [person] safe. They know exactly what the needs are and are very good at managing these."
- Staff were knowledgeable about how to report safeguarding concerns. A staff member said, "My first port of call (if had safeguarding concerns) would be go to the manager, go higher, if I felt no one was taking any notice of me. Then I would go to the police or another professional such as CQC or the local authority."
- There were safeguarding protocol in place and a policy for staff to follow. We saw examples where the registered manager and management team had worked simultaneously with the local authority to ensure safeguarding concerns had been addressed.

Assessing risk, safety monitoring and management

- People's risks had been identified and were monitored on an individual basis. All risks were identified and detailed in people's care plans with advice and guidance for staff in how to manage them. These included risks relating to certain behaviours and choking.
- Where risks had been identified staff had thought of unique ways to manage these. For example, one person was at risk of picking things up and placing them in their mouth. There was a sensory room that had been added to the garden and within the garden staff had introduced edible herbs. Staff encouraged the person to eat plants known to be edible, rather than the risks of unknown weeds and other plants.
- Risks were regularly reviewed and updated. For example, we saw where a person's mobility had changed the risk assessments and care plans were regularly updated to reflect the most recent risks. This included updating advice and guidance for staff to follow to manage the change in risk.

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 Mental Capacity Act (MCA). In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS)

- We found the service was working within the principles of the MCA and if needed, appropriate legal authorisations were in place to deprive a person of their liberty. Any conditions related to DoLS

authorisations were being met.

#### Staffing and recruitment

- People and relatives told us there were enough staff to meet their needs. A person said, "Staff are always around to help me. Whenever I need help, they are always there." A relative also said, "I would definitely say they have enough staff, the people that need 1-2-1 have that and staff never seem rushed or too busy that I think they need more staff."
- The registered manager ensured staffing rotas were completed in line with a dependency tool. This meant staffing levels always covered all essential activities and 1-2-1 hours.
- The registered manager followed safe recruitment procedures. This included full reference checks, interviews and checks with the Disclosure and Barring Service (DBS). DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.

#### Using medicines safely

- People received correct medicines at the times they required them. We saw evidence of this by reviewing Medicine Administration Records (MARs). All MARs had been completed clearly, thoroughly and in line with all guidance.
- Medicine was stored appropriately and in a safe way. The registered manager ensured this standard was maintained by completing regular medicine audits.
- There were regular competency checks completed by the registered manager. This ensured all staff were competent in their role and if they required additional training this was identified in a timely way.

#### Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was supporting people living at the service to minimise the spread of infection.
- We were assured that the provider was admitting people safely to the service.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was responding effectively to risks and signs of infection.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- 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 registered manager and management team were keen to learn from lessons when things had previously gone wrong in the service. Where concerns had been identified, the management team had made improvements to the service. These were also detailed in improvement plans that showed the implementation of new systems to ensure sustainability of the positive changes made.
- Staff were aware of their responsibilities to follow the service's accident and incident protocol following any incident. This ensured clear, accurate details were taken down. The registered manager then reviewed all incidents to ensure any trends or patterns were identified. We saw evidence of identified trends and patterns having led to action taken to prevent any recurrence.

# 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 requires improvement. At this inspection the rating has changed to 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; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- People and relatives told us how improvements had been made. A relative said, "It seems more organised and professionally run since special measures." Another relative said, "The culture of the home has improved dramatically. [Person] seems a lot happier and enjoys his life more."
- People and relatives were involved in the care people received. We saw evidence of staff actively asking people how they wanted to receive their care and following people's leads. We saw this documented in people's care plans also.
- People and relatives felt more empowered by the new culture within the home. We saw a person being encouraged to prepare a meal and people were completing laundry tasks and moving around the home freely. This created a homely atmosphere and people looked comfortable with this change.
- A lot of people being supported by Gold Care Services have lived in the supported living accommodations for a number of years. We saw a positive change to people's behaviours in comparison to previous visits. People appeared happier and the environment seemed calmer than previous inspections.
- Staff meetings and resident meetings were happening frequently. This gave people and staff the opportunity to voice concerns or ideas. Staff spoke positively about meeting. A staff member said, "I like the meetings because you feel listened to. They (management team) will often take the ideas and let us know how we can implement them to improve the service. They're really keen to hear from us."

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; Continuous learning and improving care; Working in partnership with others

- There was a duty of candour policy. We saw evidence this had been followed after any relevant incidents.
- Notifications had also been made to relevant professionals when appropriate. For example, following certain incidents the CQC had been notified, in line with regulations.
- There was evidence of positive partnership working in recent years with the local authority. This ensured improvement had been driven at the service.
- We saw continuous improvement plans being implemented in various areas of the service to ensure an overall improvement continued within the service.
- Staff and the management team were working well with other professionals. We saw evidence of referrals, follow up information and guidance being shared with staff. We then saw staff following this guidance in line with care plans.

- Professionals provided us with positive feedback about Gold Care Services, the staff and the management. A professional said, "I have had email correspondences with managers from just prior to the move into the home which have been responsive and thoughtful, and which indicated that they see the client as an individual and understand some of his complex circumstances and history. They have been able to take on board ideas about support through the moving in period, this has included encouraging the client to make their own choices within the living environment, finding out what they can do for themselves and offering support with day to day living."

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

- People and relatives spoke positively about staff and the manager. A relative said, "[Registered manager] is great, they know what they're doing and the improvements are obvious between [registered manager] and [general manager] a lot of changes for the better have been made."

- The registered manager was very involved with all individual packages of care to ensure quality of care was for every person. A professional told us, "[Registered manager] has been very responsive and has come to meet me to talk about art therapy sessions and how the client is getting on, she was clearly wanting to maximise the support from funding and has also worked with my Occupational Therapy (OT) and Speech and Language Therapy (SaLT) colleagues to support this client. {Registered manager} also told me that she is trying to maintain funding for the client to support the development of an activity schedule moving forward.

- There were clear audits that were now implemented at the service. These audits were effective in highlighting any improvement needed or any change that was needed to ensure a good level of care.