

South Manchester Care Limited

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Inspection report

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Date of inspection visit:

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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

South Manchester Care Ltd is a domiciliary care service providing personal care to 10 individuals at the time of the inspection.

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

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.

Right Support: Adults and children were supported by staff who received appropriate training which enabled effective support to be provided. Care plans and risk assessments supported each individual's care needs and staff could describe what actions they took to mitigate risk.

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.

Right Care: Care was person-centred and designed to meet the needs of individuals and their representatives. Staff were recruited safely and were given regular support from the management team.

Representatives of individuals supported felt the care and support was good and safe. Staff were described as caring, kind, knowledgeable and dignified.

Right Culture: The registered manager displayed good leadership skills and staff and representatives spoke positively about their support. Staff felt confident to raise any concerns they may have and were aware of safeguarding processes for both adults and children.

Ongoing work was being undertaken to further improve the recruitment, induction and training and embed quality assurance processes.

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 29 July 2022, and this is the first inspection.

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Why we inspected

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

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.	



South Manchester Care Limited

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

One inspector completed this inspection.

Service and service type

This service is a domiciliary care agency. It provides personal care to adults and children 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 24 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 7 June 2023 and ended on 13 June 2023. We visited the location's office on 8

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.

During the inspection

During the inspection we spoke to the registered manager, the training manager and 4 care workers. We also spoke with 4 representatives of people who used the service. We reviewed 5 staff recruitment records and induction and training records. We reviewed 4 care records and associated assessments. We reviewed policies and procedures in place and records relating to the management and oversight of the service.



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

- Systems were in place to safeguard vulnerable adults and children from the risk of abuse.
- All representatives spoken with, told us the staff provided safe care.
- Staff received training in safeguarding adults and children and felt confident to raise any concerns they had.
- One representative told us, "Yes, [Name] is safe and feel's safe." A staff member said, "I feel confident to raise concerns."

Assessing risk, safety monitoring and management

- Safe risk management strategies were in place to support each individual.
- Risk assessments described what action staff should take to ensure both adults and children were supported safely.
- Staff were able to describe what action they would take to keep each individual safe when in their care. Staff had access to the risk assessments via a secure electronic app and regularly reviewed the documents.
- One staff member told us, "The risk assessments are there to keep the children safe. We are also able to talk with them or their parents to understand the risks."

Staffing and recruitment

- Staff were recruited safely. Pre-employment checks were completed to ensure employees were suitable to support vulnerable adults and children.
- Adults and children received care and support from a regular staff team.
- Staff confirmed they regularly provided care and support for the same individuals which allowed them to build a relationship and provide continuity of care.

Using medicines safely

- The provider was not actively supporting any individuals with medicines management at this inspection.
- Staff were provided with training in the safe administration of medicines and there were policies available which underpinned how medicines should be safely managed.
- The provider had devised competency assessments to assure themselves of the staff's competence to safely administer medicines when this support was to be required.

Preventing and controlling infection

- The provider was pro-active in the management of infection, prevention and control.
- Staff received training in infection control and policies supported how infection control is managed.

• Staff had access to personal protective equipment (PPE) such as masks, aprons, and gloves. Representatives spoken with confirmed PPE was worn by staff when required.

Learning lessons when things go wrong

- The provider had processes in place for the reporting of accidents and incidents.
- There had not been any accidents or incidents since the provider began to provide a regulated activity. However, staff were aware of their responsibility to report any concerning information.



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.

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

- Adults and children received a full assessment of their needs prior to care and support being provided.
- Assessments captured each individuals need's including any personal and cultural considerations.

Staff support: induction, training, skills and experience

- Staff received an induction and training which was appropriate to their job role.
- Training was specific to the needs of the individuals being supported by the service.
- A 3-day induction was completed with the training manager. One staff member told us, "[Training manager] did the induction and they helped us to understand how we should care for vulnerable children."

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

- Individuals were supported to eat and drink if this was an identified need.
- Personal preferences were captured in the care plan.

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

- Health and social care professionals liaised with the provider to ensure care was streamlined and individuals received the right support at the right time.
- Any health and social care concerns were reported to health and social care professionals within a timely manner.

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, whether appropriate legal authorisations were in place when needed to deprive a person of their liberty, and whether any conditions relating to those authorisations were being met.

- The provider followed the principles of the Mental Capacity Act and staff presumed individual's supported had capacity unless they were informed otherwise.
- Capacity was reviewed as part of the assessment process. No one at the service had currently been assessed as lacking capacity.
- Staff had received training in mental capacity and deprivation of liberty safeguards.



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

- Adults and children were well treated and supported and had their equality and diversity respected.
- Representatives spoken with told us the staff were respectful and kind to their relation and themselves.
- One representative told us, "I am really pleased with the staff. They are kind, caring, considerate, first class. I also feel really supported by them. If I need to be out of the house early, the staff will move heaven and earth to make sure they can accommodate me."

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

- Adults and children were supported to express their views and were involved in making decisions about their care.
- Care records captured both the individuals and representatives' views on decision making. A relative told us, "They (staff) listen to me and [Name] and we discuss the care required. Its working well and I am still involved in the care."

Respecting and promoting people's privacy, dignity and independence

- Adults and children were supported to maintain their privacy, dignity and independence.
- Staff were aware of how the children may require additional monitoring to keep them safe and described how they did this while ensuring privacy and dignity included ensuring any personal care promoted independence.
- Staff understood the importance of adhering to routines and told us, "It's very important to stick to a routine for the child's well-being. There is a lot of support from the parents to help to support and advise."



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

- Personalised care plans were in place which were reflected of each individual's needs.
- Care plans captured personal preferences as well as any cultural requirements.
- Representatives were involved in the planning of care and told us, "[Name] is really happy which makes me really happy. I am involved in the care."

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.

- The provider had begun to develop symbol cards for use with individuals who were unable to communicate their needs.
- Information could be provided in other formats such as large print.
- A representative told us staff had been working with signs and photographs to aid communication.

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 individuals were supported to take part in community activities such as visiting local parks.
- Each individuals preference of activity was captured in the care plan.

Improving care quality in response to complaints or concerns

- The provider was committed to responding to any concerns or complaints.
- No formal complaints had been received; however, the registered manager had built a positive relationship with individuals using the service and their representatives which allowed any low-level concerns to be dealt with promptly.
- Representatives told us they felt confident to raise any concerns and know they would be listened to. One representative told us, "[Registered manager] is so good, very effective and reliable and listens."

End of life care and support

• The provider was not actively supporting people who were at the end of their life. However, staff had

received training in end-of-life care and there were policies in place to support good end-of-life care and support.



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 provider promoted a positive culture which was person-centred and empowering.
- The service had given families support when they needed it the most and were able to provide short break interventions which enabled both adults, children and their families and representatives to have a period of respite while knowing their relation was safe and cared for.
- One representative told us; staff had given them support to help understand alternative strategies when supporting their relation.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

- The registered manager was clear about their role and the provider had recently appointed a training manager who was dedicated to improving the recruitment, induction, and training processes for staff to ensure they were able to provide good and effective to care to individuals who used the service.
- The provider had begun to provide a regulated activity in March 2023 so had not been able to embed audits to monitor and improve the service at this inspection. However, there were processes being developed to ensure the management team had oversight of the service and were able to begin to identify where areas may need to improve.
- Feedback about managers and staff was positive and included, "[Registered manager] is great. I really get on with them. Really knowledgeable."

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

- Individuals, their representatives, and staff felt engaged by the provider and registered manager.
- Representatives told us they were contacted each Friday by the registered manager to confirm the care and support required for the following week and included confirming the staff members who will be supporting each individual.
- Staff told us the registered manager was responsive and supportive and they felt the registered managers leadership was strong and they could seek advice and support from both the registered manager and the training manager.
- A representative told us, "Its hard as a parent to let your children go with another adult but I have learned to trust, and they listen to me."

Working in partnership with others

- The registered manager had built relationships with some local authorities and feedback from professionals was responsive.
- Professionals told us, the provider was very good and professional, and the registered manager has always been responsive.

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 was aware of their responsibilities under the duty of candour.
- Any notifiable incidents had been reported.