

Trust Care Solutions Ltd

# Trust Care Solutions Ltd

## Inspection report

434 Manford Way  
Chigwell  
Essex  
IG7 4AS

Tel: 02085000541  
Website: [www.trustcaresolutions.co.uk](http://www.trustcaresolutions.co.uk)

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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:

Trust Care Solutions Ltd provides personal care to people living in their own homes. At the time of our visit, they were providing personal care to two people.

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

People using the service told us they felt safe with the staff. The provider had procedures in place to inform staff of how to protect people from abuse and avoidable harm. Risks to people were assessed and management plans were in place where risks were identified. The provider had a system in place to record and monitor accidents and incidents. There were sufficient numbers of staff to meet people's needs and safe procedures were followed when recruiting new staff. People were protected from the risks associated with the spread of infection. Medicines were managed safely.

People were supported by staff that had received appropriate training and support to do their jobs and meet people's needs. They were supported to eat and drink and maintain a balanced diet based on their needs and preferences. People's needs were assessed before they started to use the service. People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service supported this practice.

Staff had developed positive caring relationships with people who used the service. People were encouraged to remain as independent as possible and to do as much as they could for themselves. Staff maintained people's dignity and respected their privacy. People were able to express their views about how their care was provided and staff helped them accordingly. The importance of confidentiality was understood and respected by staff.

People received care and support that was personalised and responsive to their individual needs. Care plans provided staff with clear and detailed guidance about the individual care and support needs of people who used the service. Staff had a good understanding of people's needs, choices and preferences, and were aware of how to meet people's individual needs as they changed. Complaints were listened to and action was taken to address concerns or issues.

There was an open and inclusive culture in the service, with staff, people, relatives and other external professionals encouraged to help improve the service provided to people. Effective systems were in place to quality assure the services provided, manage risks and drive improvement. Staff were aware of their responsibilities in ensuring the quality of the service was maintained. The registered manager worked closely with other external organisations to ensure people needs were met.

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:

This service was registered with us on 25 November 2016 and this is the first inspection.

Why we inspected:

This was a planned inspection based on when the service started operating.

Follow up:

We will continue to monitor intelligence we receive about the service until we return to visit as per our re-inspection programme. If any concerning information is received, 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?

The service was safe.

Details are in our safe findings below.

Good ●

### Is the service effective?

The service was effective.

Details are in our effective findings below.

Good ●

### Is the service caring?

The service was caring.

Details are in our caring findings below.

Good ●

### Is the service responsive?

The service was responsive.

Details are in our responsive findings below.

Good ●

### Is the service well-led?

The service was well-led.

Details are in our well-led findings below.

Good ●

# Trust Care Solutions 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 Care Act 2014.

#### Inspection team:

The inspection was carried out by one inspector.

#### 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 24 hours' notice of the inspection. This was because the service is small, and people are often out, and we wanted to be sure there would be people at home to speak with us.

The inspection took place on 17 and 22 July 2019. The inspection was conducted over two days as the provider was not available on the first day due to an important appointment that they had to attend. The registered manager was on leave on both days.

#### What we did before inspection:

Before the inspection, we reviewed the information we held about the registered provider, including previous notifications. A notification is information about important events, which the registered provider is required to send to us by law.

We used the information the provider sent us in the provider information return (PIR). 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.

During our inspection:

We spoke with the provider and a member of the office staff team. We reviewed a range of records. This included two people's care records and two staff files in relation to recruitment, training and staff supervision records. We checked records relating to the management of the service and a variety of policies and procedures during and after the inspection.

After the inspection:

We continued to seek clarification from the provider to corroborate evidence found. We looked at training data. We spoke with two people who used the service and one relative by telephone to obtain their views of the service. We also contacted one member of staff to ask them questions about their roles and to confirm information we had received about the service during our inspection.

# 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 for 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

- Safeguarding procedures were robust, and staff understood how to safeguard the people they supported. People and their relatives commented that they felt safe when the staff visited them, and they did not have any concerns. One person said, "Yes, I do feel safe."
- Staff knew what actions to take if they thought a person might be at risk. They also had received training in how to recognise and report abuse. One member of staff told us, "I will report any allegations of abuse to the manager."
- The provider understood their responsibilities of how to respond to any allegation of abuse. There were procedures in place to inform staff of how to protect people from abuse and avoidable harm.
- The service had a whistle blowing policy. Staff knew they could report concerns within the service or to outside agencies. One member of staff said, "I know about whistle blowing, I can contact social services if the manager does not do anything about a concern."

Assessing risk, safety monitoring and management

- Risk assessments were completed, and guidance was in place to minimise risks when supporting people. These were regularly reviewed and updated as needed to consider changes in people's needs. Staff were able to describe to us in detail how they supported people to keep safe on a day to day basis.

Staffing and recruitment

- There were sufficient numbers of staff to meet people's needs and staff recruitment processes were robust. The provider undertook safe recruitment procedures. New employees underwent relevant employment checks before starting work. For example, references from past employers were taken up and Disclosure and Barring (DBS) checks carried out.
- People felt there were enough staff to ensure they received continuity of care and to ensure that staff came at the time they were booked to come. One relative told us, "We have the same carers, they are very reliable."

Using medicines safely

- People received support from staff with their medicines to ensure they were managed safely. People told us they received their medicines on time. One person told us, "The carer makes sure I take my medicines."
- There were policies and procedures in place to ensure medicines were managed and administered safely. One member of staff told us, "I remind them [people] to take their medicines at the right time."
- People who required assistance with their medicines had an individual medicine administration record sheet (MAR) which clearly stated their name, date of birth and allergy status and also identified what the

name of the medicine was and how often it should be taken.

#### Preventing and controlling infection

- The provider had policies and procedures regarding the prevention and control of infection. Staff had received training in infection control and were aware of their responsibilities in the prevention of infection. There was personal protective equipment such as aprons and gloves available to staff.

#### Learning lessons when things go wrong

- We saw there were processes in place to record any accidents and incidents, so any patterns or trends could be identified, and action taken to reduce the risk of reoccurrence. There had not been any accidents or incidents at the time of our inspection.



# 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. 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

- The provider had a process in place to ensure that people's needs were assessed before they started to use the service. The assessments contained information around people's physical and mental health needs, their relationships, their preferences and their life style choices.
- During this process the registered manager ensured they had as much information as possible about the person before they agreed to provide a service.

Staff support: induction, training, skills and experience

- People received effective care from staff who had the knowledge and skills to carry out their job roles. Staff were supported by a system of induction, training and supervision. One person said, "The carer is very good and know what they are doing."
- Staff received appropriate professional development. They completed training in several areas, for example, infection control, safeguarding, moving and handling, medicines management and food hygiene. Staff felt the training helped them in their roles.
- When new staff started working for the service they were provided with an induction programme, which included training and getting to know the needs of people who used the service.
- Staff had regular one to one meetings with their line managers. We looked at some of one to one meeting records which showed staff had an opportunity to discuss any issues they might have and any training requirements as well as discussion around people's needs.

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

- People were supported to have enough to eat and drink and at the times they wanted. One relative said, "Sometimes the carer would help with the meals, but I do it most of the time."
- People were offered a choice of what they would like to eat at breakfast, lunch and dinner. We saw that care plans included information about people's dietary needs.

Staff working with other agencies to provide consistent, effective, timely care

- People were supported to access other health and social care services when required. When people needed referring to other health care professionals, staff understood their responsibility to ensure they passed the information onto the management team.
- There was information about people's health conditions in their care plans so staff knew about people's health needs.

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 and found that they were compliant.

- We saw the registered manager had assessed people's capacity to make particular decisions. Staff had a good knowledge on how to support people and how to act in their best interests. A relative told us, "The carer lets us know what they are going to do, they have a very good routine, they work in harmony."
- Staff knew people might have fluctuating capacity to make decisions. They always ensured they gained the consent from the person before carrying out any tasks for example when assisting them with personal 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.

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

- People's human rights and diversity were respected. People were not discriminated against their gender, disability, sexual orientation, religion, belief, race and age. Staff treated people equally and they were respectful of and had a good understanding of all people's care needs, personal preferences, their religious beliefs and cultural backgrounds.
- People and their relatives commented positively about the care and support provided by staff. One person said, "The carer is very good."

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

- People had the opportunity to contribute and have their say about the care and support they received. Where people were able to, they were involved in planning the care and support staff gave to them. Staff were aware of their needs and their wishes and what was important to them.
- Relatives were kept informed about any changes in their family member's health and or well-being. They told us, they were able to discuss any issues with the management of the service, for example, any forthcoming health appointment of their loved ones.

Respecting and promoting people's privacy, dignity and independence

- People were treated with respect and their privacy was upheld. Care plans described how people needed to be supported to protect their dignity. Staff had developed positive caring relationships with the people who used the service. People told us that the staff always let them know what they would be doing. They also mentioned that staff provided them with care and support in an unhurried manner.
- People were supported to maintain as much independence as possible and make choices such as what they wanted to wear, eat, drink and how people wanted to spend their day. One member of staff told us, "If a person is able to get changed by themselves, I will encourage them to do it and help them with other things they can't do."
- People's right to confidentiality was protected. Staff had a good understanding of how to maintain people's confidentiality. They were aware not to discuss any information about people in public and to disclose them only to people who had to have them. The provider had a confidentiality policy in place.

## 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

- People received care and support that was personalised and responsive to their individual needs. People told us they were happy with the service and the way staff cared for them. One person said, "I am very happy with the carers."
- We saw care plans were focussed on areas of care people needed. Staff felt the care plans were informative and this helped them to meet people's needs fully. They were knowledgeable about people's needs and took time to ensure they were met as the person wished.
- Care plans were reviewed and updated when people's needs changed, and this could be at any time. This meant that people's ongoing and changing needs were kept under review.

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.
- People's communication needs were assessed to ensure staff knew how best to communicate with people. For example, one care plan mentioned that the person was able to verbally communicate their views and needs without difficulty.

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 supported to maintain relationships with the people who mattered to them. They were supported to pursue their interests. This helped to ensure people were not socially isolated.

Improving care quality in response to complaints or concerns

- The provider had a complaints policy in place which provided a clear process to record and investigate any complaints received. One person told us, "I will talk to [provider] if I am happy about something."
- People and their relatives told us they would talk the staff or the registered manager if they were not happy about something. They were confident that any issues raised would be listened to and addressed. We saw complaints had been investigated and responded to accordingly.

End of life care and support

- Staff had the skills and knowledge to provide support at this sensitive time should this be required. The registered manager was in the process of consulting relatives regarding people's final wishes to ensure they

would be met.

# 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

- People and their relatives were happy with the way the service was run and managed. One person told us, "The manager is good, all seems to be working well." Staff told us the registered manager was approachable and easy to talk to. The registered manager and provider made themselves available to staff if they needed any support or advice.
- The registered manager took an active role in the running of the service. They encouraged an open and transparent culture within the service. A relative said, "I am very happy with the agency."

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

- The management team was aware of their responsibilities to inform CQC of reportable incidents as required under the Health and Social Care Act 2008.
- Staff were clear about their responsibilities, expectations and culture and values of the service. They had access to a range of policies and procedures which gave them guidance about how to care and support people in a safe manner.

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

- There were meetings held for staff to share their views and experiences and for the registered manager to let people know about things happening in the service. Staff were able to discuss any issues and make suggestions about the service.

Continuous learning and improving care

- There were audits and systems in place to monitor the quality of care people received and to drive improvements.
- The provider continually sought feedback about the service from people and relatives and they were acted on. This was done through phone calls and home visits. We saw that the management team carried out spot checks to ensure staff were adhering to the service's policies and procedures and providing quality care to people. One person told us, "Someone from the office comes and visit me and see if I am happy with the carers."
- The registered manager carried out audits to ensure the service was operating to expected standards. Care plans, risk assessments, daily notes were checked regularly to ensure the information included in them was

up to date. Where areas for improvement had been highlighted, the registered manager acted to address them.

#### Working in partnership with others

- The management team worked closely with other health and social care professionals and external organisations to ensure people needs were met. We saw correspondence that had been sent to and from healthcare professionals where people's needs were discussed, and advice received accordingly. They had regular contact with the multi-disciplinary team to discuss people on-going needs or any concerns they might have.