

Wellspring Recruitment and Care Services Limited

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Inspection report

16 Patmore House
Mathias Road
London
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Date of inspection visit:
08 April 2022

Date of publication:
10 May 2022

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

Wellspring Recruitment and Care Services Limited is a domiciliary care agency that was providing personal care to one person at the time of the inspection.

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

People told us people they were happy with the care and support they received because they felt safe and all their needs were met by kind and caring staff.

Risks to people were assessed and regularly reviewed. Staff understood the actions needed to minimise the risk of avoidable harm including the prevention of avoidable infection. Staff had completed safeguarding training and understood their role in identifying and reporting any concerns of potential abuse or poor practice.

People praised the registered manager of the service and agreed that they were approachable, knowledgeable, fair and did their job well. The staff worked well together and supported the registered manager.

Staff were committed to providing a high-quality service. They had undertaken training so that they were skilled and knowledgeable to effectively meet people's needs. Staff understood their responsibilities to report any concerns.

Staff encouraged people to be as independent as possible and respected people's privacy and dignity. Staff knew people well.

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 given choices about the way in which they were cared for. Staff listened to them and knew their needs well. Care plans contained information about the person's individual support needs and preferences in relation to their care and we found evidence of good outcomes.

Recruitment practices were safe and relevant checks had been completed before staff worked at the service.

People told us that staff were able to meet their needs and were respectful of their individual preferences.

People confirmed the service did not miss any care calls and that staff were always on time.

People received care and support from a small group of staff, which provided consistency.

The registered manager of the service actively sought the views of people and their relatives about the running of the service and they dealt promptly with any concerns that people raised.

The provider had systems in place to monitor and improve the quality and safety of the service provided.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Why we inspected

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

Rating at last inspection

The service was unrated at the last inspection because of insufficient evidence (13 March 2019.)

Follow up

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

Wellspring Recruitment and Care Services 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 planned this inspection 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

The inspection team consisted of one inspector.

Service and service type

Wellspring is a domiciliary care agency. It provides personal care to people living in their own homes.

Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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.

At the time of our inspection there was a registered manager in post.□

Notice of inspection

We carried out the inspection visit on 8 April 2022. It was announced. We told the provider two days before our visit that we would be coming. We did this because the registered manager is sometimes out of the office supporting staff or visiting people who use the service. We needed to be sure that they would be available at their office.

What we did

Before our inspection, we reviewed the information we held about the home which included statutory notifications and safeguarding alerts and the Provider Information Return (PIR), which the provider completed before the inspection. The PIR is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make.

During our inspection we went to the service's office and spoke with the registered manager and one of care staff. We looked at one care record and two staff records; we also looked at various documents relating to the management of the service. After the inspection visit, we spoke with one person who used the service and another care worker.

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 this key question was unrated. At this inspection the rating has changed to good.

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

Systems and processes to safeguard people from the risk of abuse; Assessing risk, safety monitoring and management.

- The agency had systems in place to protect people from abuse and avoidable harm. Staff knew what to do and to whom to report if they had any concerns about people's safety
- People we spoke with, told us they felt safe using the service. One person told us "I feel very safe they always take extra care to ensure I am safe and take a lateral flow test before each visit."
- A member of staff told us, "We protect people's well-being, their safety is a high priority, we discuss with our manager anything that raises a concern."
- The staff assessed all potential risks to people and put guidance in place so that the risks were minimised. Risk assessments were developed that maximised people's independence and ability to remain in control of their life.
- Environmental risks and potential hazards within people's homes had been identified and were managed appropriately.

Staffing and recruitment

- The service followed a recruitment policy so that they were as sure as possible that people were suitable to work at this service. They carried out checks, such as criminal record checks and references.
- People were supported by enough staff to meet their needs. Staffing arrangements provided the flexibility to meet people's changing needs whilst ensuring consistent care.
- People described the staff as reliable and confirmed that they stayed for the agreed length of the visit and only left earlier if asked to do so.
- People told us they knew the staff well and had built good working relationships with them. A person told us "They have never let me down, always reliable and helpful, really lovely people."

Using medicines safely

- At the time of this inspection the service was not supporting anyone with their medicines.
- However, policies and procedures were in place to support the safe management and administration of medicines, when this support was required.
- Where people self-administered, records confirmed a medical risk assessment had been completed to show the person was able to manage their own medicines without support from the service.

Preventing and controlling infection

- The agency had systems in place to make sure that infection was controlled and prevented as far as possible.
- Staff had undertaken training and were fully aware of their responsibilities to take appropriate measures to

protect people from the spread of infection.

- Care staff had access to the required PPE including gloves, aprons and masks. Staff also participated in the organised testing regime to minimise the risk of transmission of COVID-19 to people

Learning lessons when things go wrong

- The service had a system in place to monitor incidents and understood how to use them as learning opportunities to try and prevent future occurrences.
- At the time of this inspection there had been no recorded accidents or incidents..
- The registered manager explained that following any incident or accident, a review would be undertaken so that any learning or improvements could be considered to prevent any future re-occurrences.

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 our last inspection this key question was unrated. At this inspection the rating has changed to good.

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 preferences and care needs had been recorded and those who used the service and their families were given the opportunity to be involved in the care planning process.
- A person told us, "My daughter and I were involved in my care plan, the manager visited us several times to make sure we were happy with it."
- The registered manager considered protected characteristics under the Equality Act. For example, they asked people about any religious or cultural needs they had so that they could plan for those needs to be addressed. Staff were aware of equality and diversity issues.

Staff skills, knowledge and experience

- Staff had undertaken training in a range of topics so that they could do their job well. Most staff had achieved nationally recognised qualifications in care.
- New staff completed an induction which included, completing mandatory training and working alongside experienced members of staff before working alone.
- Staff felt very well supported. One staff told us "We are very well supported the manager is always available to us."

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

- People were encouraged to get involved in decisions about what they wanted to eat and drink.
- Staff demonstrated a good understanding of how to ensure people had adequate nutrition and dietary preferences were set out in people's care plans.

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

- The service documented people's health conditions in the care plan and carried out observations during each visit to check for improvement or deterioration.
- People's care plan had details of their GP and any other health professional's involvement.
- The registered manager explained that as yet they had not really been involved with any specific healthcare professionals. However, going forward they were hoping to establish relationships with professionals when required.

Ensuring consent to care and treatment in line with law and guidance.

The Mental Capacity Act 2005 (MCA) provides a legal framework for making 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 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 them liberty. We checked whether the service was working within the principles of the MCA.

- Staff knew about people's individual capacity to make decisions and understood their responsibilities for supporting people to make their own decisions.
- People told us they were encouraged to make decisions for themselves and felt involved in making choices wherever possible.
- People had signed their care records to show that they consented to the care and support they were being provided with.
- Staff confirmed that they had undertaken training in relation to the MCA.

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 our last inspection this key question was unrated. At this inspection the rating has changed to good.

People were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; equality and diversity

- People told us that staff were kind and caring. One person told us, "They are very kind, humble and courteous" and "They treat me with dignity and respect, they never let me down."
- Staff we spoke with were knowledgeable about people's preferences, personalities and things that were important to them. This indicated staff had caring relationships with the people they looked after.
- People told us their individual needs and wishes in respect of their values, culture and religion were respected.

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

- People were regularly asked for their views on their care and their plans. A person told us, "They call me at least once a week to check if everything is ok and the manager checks on the staff."
- Staff told us that they had enough time to engage with people to make sure that each person had everything they needed, and that travel time was kept to a minimum.
- People who used the service confirmed that they usually had their needs met by a small group of regular staff and that they always knew who was going to be visiting them

Respecting and promoting people's privacy, dignity and independence

- Respect for privacy and dignity was at the heart of the service's culture and values.
- People were supported to be as independent as possible. Care plans reflected what people were able to do for themselves and how to encourage them to do this.
- One person told us, "They encourage me as much as possible and my confidence has increased."
- People's personal information was kept secure and staff understood the importance of maintaining secure documents and care records to ensure people's confidentiality was maintained.
- People had no concerns about the way staff treated them. Staff described ways they protected people's privacy and dignity, such as knocking on doors and closing the curtains.

Is the service responsive?

Our findings

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

At our last inspection this key question was unrated. At this inspection the rating has changed to good.

People's needs were met through good organisation and delivery.

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

- Care plans were personalised and detailed clearly how the person wanted their needs and preferences met

- People told us they were happy with the care and support provided.
- Staff confirmed they checked people were happy and had everything they needed before they left them.
- Each person's plan was regularly reviewed and updated to reflect their changing needs. People confirmed that staff either knew how they liked things to be done or they felt very able to guide staff in how they wanted things.
- When people's needs changed this was quickly identified and prompt, appropriate action was taken to ensure people's wellbeing was protected.

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 registered manager told us they were aware of the AIS and would ensure that if needed, people had access to the information they needed in a format they could understand.

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

- Staff explained the importance of developing and maintaining relationships with people they supported to avoid social isolation.

Improving care quality in response to complaints or concerns

- People were given information about the service and how to complain when they first started to receive support from the service.
- People told us they knew how to complain if they needed to and felt confident that they would be listened to.
- The complaints procedure explained how to make a complaint and set out how people could expect any concerns or complaints to be dealt with.
- The service had not received any complaints to date.
- The registered manager told us they expected staff to report complaints back to them so they could be

investigated.

- The service received compliments on the service from people who used the service. Some of the comments included, "thank you for being with me always."

End of life care and support

- At the time of the inspection end of life care was not provided. Care plans documented whether people wanted to be resuscitated in the event of an emergency.

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 this key question was unrated. At this inspection the rating has changed to good. 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; 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.

- People and staff had confidence that the service was well run
- We received comments from people such as, "It's run very efficiently", and "I would have no hesitation in recommending the service."
- The registered manager and staff were clear about their roles and responsibilities. Staff said there was a clear management structure in place and that they were always responsive to any issues raised.
- The registered provider continually monitored the quality of the service provided to people. Regular telephone calls were made as well as unannounced spot checks on staff. This meant they were continually checking to ensure that people received the best possible care and support.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- The registered manager and staff were motivated to provide the best possible person-centred care and support for people.
- People and staff told us the registered manager was very approachable and that they would have no hesitation in raising concerns or making suggestions.

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

- The registered manager and staff demonstrated a good understanding of their responsibilities when managing overall and day to day risks and the requirements around meeting the regulations.
- Care staff knew the registered manager very well and felt confident in speaking with them if they had any concerns.
- The registered manager carried out periodic unannounced spot checks and audits to monitor the quality of care and support people received. Checks looked at records, care delivery and medicines administration.
- Where issues were identified, the registered manager made sure that these were addressed immediately, and processes put in place to learn, develop, improve and prevent any future re-occurrences.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- The registered manager explained that as the service was still quite small in the number of people they

supported, they were quite involved with all the people they supported, even delivering care and support to some people.

- This level of regular contact meant that the registered manager was able to monitor the quality of care people were receiving and where improvements were required implement these immediately.
- The registered manager told us that they had not yet organised any formal staff meetings with the staff team due to them being a very small team. Communication with staff was maintained through regular one to one catch ups, and telephone calls. Care staff we spoke with confirmed this and told us, "[Registered manager} communicates with us often and keeps us updated too."
- The registered manager had not yet needed to work with other agencies or health professionals to ensure people's care and well-being was supported. They told us that they were keen to establish relationships with a wide range of professionals going forward to ensure people were supported with their health and care needs.