

Elite Care Solutions Ltd

Elite Care Solutions Ltd

Inspection report

15 Beechway
Ashby
Scunthorpe
South Humberside
DN16 2HF

Tel: 01724855582

Date of inspection visit:
12 January 2016

Date of publication:
09 February 2016

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

Elite Care Solutions Ltd is a domiciliary care agency located in Ashby, close to the town centre of Scunthorpe in North Lincolnshire. The registered office is located in a privately rented block of shops. The office is provided on one level, offers access for wheelchair users and provides car parking space at the front of the premises.

The service provides personal care and support to people living in their own homes. The service supports children, young people and adults with a range of conditions including learning disabilities, autistic spectrum disorder, physical disability and dementia related conditions. At the time of our inspection the service was supporting 60 people.

This announced inspection took place on 12 January 2016. The last inspection took place on 3 October 2013 and the service was compliant with all of the areas that we assessed.

The service had a registered manager in post. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

The service was safe. There were policies and procedures to guide staff in how to safeguard people from the risk of harm and abuse. Staff understood how to report potential abuse and had received training to reinforce their understanding.

People received support from adequate numbers of staff who had been recruited safely and had received a comprehensive induction when they first joined the service. Staff had completed a range of training to ensure they had the skills and knowledge required to meet people's assessed needs effectively.

People were referred to appropriate health professionals when there was a change in their needs and staff followed recommendations and guidelines from professionals. Staff organised and supported people to attend healthcare appointments when required.

People told us staff treated them with respect and were kind and caring. Staff had a good understanding of people's preferences and staff demonstrated they understood how to promote people's independence whilst protecting their privacy and dignity. People were consulted and involved in decisions about their care and staff had completed training and understood the Mental Capacity Act 2005, which helped to protect people's rights.

People who used the service were involved with the planning and delivery of their care. Care plans and risk assessments were updated as required. People were encouraged to be active members of the community and staff supported them to access a range of activities and social events to ensure they led busy and

fulfilled lifestyles.

The service had a complaints procedure in place and people felt they could raise concerns and they would be addressed. The service completed regular audits to ensure practice remained safe and effective.

Staff felt supported and listened to by the registered manager. Staff told us it was a nice place to work and there was a culture of being fair and flexible across the organisation. Staff received supervision and were consulted if changes were taking place in the organisation.

Questionnaires were completed by people who used the service, their relatives and staff and the feedback we saw very positive. The registered provider was also the registered manager and was involved in the day to day running and management of the service.

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.

People were protected from harm. People had confidence in the service and felt safe and secure when receiving support.

Sufficient numbers of staff were employed to meet people's needs and staff had been recruited in a safe way.

Staff supported people to take their medicines as prescribed, where necessary.

Is the service effective?

Good ●

The service was effective.

People received effective care that met their needs and wishes. Staff monitored people's health and wellbeing and gained support and advice from relevant health care professionals, where necessary.

People experienced positive outcomes as a result of the service they received and gave us positive feedback about their care and support.

Staff were provided with a range of effective training and support to ensure they had the necessary skills and knowledge to meet people's needs effectively.

People were consulted over their care and staff asked for consent, where possible.

Is the service caring?

Good ●

The service was caring.

The registered manager and staff were committed to providing a person centred service that ensured people were at the centre of planning, delivery and review.

People felt care workers always treated them with kindness and respect and went above and beyond their roles. Staff built

meaningful relationships with people who used the service and were given ample time to meet people's needs.

Staff promoted people's independence and choice. People were included in their care and felt in control of their live.

Is the service responsive?

Good ●

The service was responsive.

People's care was person-centred and took into account people's choices, wishes and feeling.

People were encouraged to give their views and raise concerns or complaints to assist the service with any improvements needed.

People were encouraged and supported to participate in a range of community activities to prevent social isolation.

Is the service well-led?

Good ●

The service was well led.

An open culture was promoted which was person centred, inclusive, fair and transparent.

Staff said it was a supportive environment to work in and staff incentives were available to encourage good practice and help staff feel valued.

There were robust systems in place to assure quality and identify any potential improvements needed to the service.

Elite Care Solutions Ltd

Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the registered provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

This inspection took place on 12 January 2016 and was carried out by one adult social care 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.

The inspection was announced and we provided the service with 48 hours notice of our intention to visit. The reason we announced the inspection was to ensure someone would be available at the registered office.

Before the inspection, the registered provider was asked to complete a Provider Information Return (PIR). This is a form that asks the registered provider to give some key information about the service, what the service does well and improvements they plan to make.

We also reviewed the information we held about the service. We contacted the local authority's contracts monitoring and safeguarding teams. There were no concerns raised by these teams regarding this service.

During our inspection we spoke with six staff including the registered manager and support workers. We spoke with five people who used the service and six relatives. After the inspection we contacted and received feedback from a number of local health and social care professionals involved with the service.

We looked at the care records of six people who used the service which included support plans, risk assessments and medication records. Records relating to the management of the service including policies and procedures, quality assurance documentation, accident and incident reports and complaints were also reviewed. We looked at staff rotas, training records, supervision and five staff recruitment files.

Is the service safe?

Our findings

Everyone we spoke with told us they felt safe with the staff who visited them and that the care and support they received was provided in a safe way. Comments included, "I have learnt to trust them so much that I have a key safe now so I don't even have to get up to let them in, its brilliant" and "They [staff] understand me, they let me do as much as I can. They don't let me struggle but encourage me to stretch myself. They never judge me, they support me. I know my quality of life is better since Elite Care have been supporting me." A community health care professional told us, "I have witnessed safe practice by carers when I have attended [people's homes] and I have had no concerns."

People were supported by staff who were of good character and were suitable to work in the care environment. All carers employed at the service had been through a rigorous recruitment process which involved obtaining two satisfactory references and background checks with the Disclosure and Barring Service (DBS) had been cleared before staff commenced work at the service.

Risk assessments were completed on the properties of the people who used the service. This ensured people were cared for and staff worked in safe environments. For example, checks were made to ensure people's homes had working smoke alarms, carbon monoxide detectors, adequate hand washing facilities and planned escape routes were in place in the event of an emergency. The service also checked the MOT and car insurance of staff who used their vehicles to transport people. This ensured the vehicles were suitable and safe to use.

Care records we reviewed contained risk assessments to support the health and wellbeing of people who used the service. These included medication, moving and handling, use of equipment, behaviours, infection control and community engagement. Risk assessments included information about action to be taken to minimise the chance of harm occurring. When accidents and incidents had occurred they were recorded and reviewed to ensure lessons could be learnt and preventative measures could be put in place.

People were supported to stay safe and staff recognised that people were able to take positive risks. One relative told us, "The staff are good with [person's name]. They encourage [name] to do lots of things they wouldn't normally have done for themselves. They are growing up, becoming confident and becoming a different person, it's fantastic to see."

The staff we spoke with could describe different types of abuse and were familiar with the signs to look for if they thought potential abuse was taking place. One staff member told us, "We get to know people really well supporting them day in day out and when something is not right you pick up on it. I'd report anything suspicious immediately to the office, I couldn't live with myself if someone was being hurt and I did nothing about it." Training records confirmed that staff had completed training about safeguarding people from harm and abuse. Children's safeguarding training was also available for staff who supported children and younger people. The service had a safeguarding policy which staff read and became familiar with as part of their induction.

People who used the service were supported by sufficient numbers of staff. One person told us, "They [staff] are very good. They arrive on time and I've never had a missed call it just doesn't happen. If there is a delay I get a call to inform me." The registered manager told us that staffing levels were determined by the needs of the individuals and whether people were assessed as needing one to one or on some occasion's two to one support. The registered manager confirmed that people and their families were involved, where possible in choosing the staff team they preferred to support them, especially for people with more specialist, complex 24 hour packages of support. A staff member told us it was important to ensure that people had the right personality and rapport with some of the people they supported and a lot of work went into making sure people and their carers were a good match. A healthcare professional also told us, "I am aware of the manager making changes to staff attending people if they are concerned that a patient/staff relationship is not working well. They do their best to keep people happy."

Staff were provided with uniforms, identity badges for security purposes and used personal protective equipment such as gloves, aprons and antibacterial hand gel. One person told us, "Staff always have their uniform on when they come to visit. They also wear gloves and always wash their hands when they are supporting me." A staff member told us, "The company are good at providing us with what we need to do the job. We wear uniforms most of the time but on some occasions we don't wear them especially if we are supporting people in the community and we don't want to draw attention to the fact we are supporting people."

People told us they were happy with the support they received with managing their medicines. The service had a medication policy in place to support staff and to ensure that medicines were managed in accordance with current guidance. Staff had received medication training and this was updated on a regular basis along with observations of practice and competency assessments. Peoples care records detailed their prescribed medicines and how and when they were to be taken. We checked a number of medication administration records (MARs) and saw they were completed accurately.

Is the service effective?

Our findings

Everyone we spoke with said the staff were well trained and competent in their role. Comments included, "I never have to worry about any of the staff with [person's name], they really care and know what they are doing" and "The carers [person's name] has, are brilliant. I don't know if they have special training in communication but they just seem to be able to get on with and understand [person's name] so well." A health care professional also said, "Very good, no criticisms at all."

We looked at the training records, which showed staff received a range of training to support their practice and enable them to support people effectively. Training provided included; moving and handling, epilepsy awareness, health and safety, dementia awareness, equality and diversity and safeguarding adults. Staff completed specific training to assist them in supporting people with specific needs. This included behaviour management, communication, diabetes, Motor Neurone disease and Parkinson's awareness. Staff were also provided with specific training related with supporting children who used the service this included safeguarding children's training and needs specific training delivered by the children's nurse educator.

A comprehensive induction programme was in place for all new staff prior to commencing their employment. This consisted of reviewing the organisations policies and procedures, mandatory training to support them in their role, shadowing experienced staff and regular monitoring to ensure they were confident and competent in the role. One staff member told us, "The induction was very clear and thorough and got me ready for the job." Records also showed that staff had or were in the process of completing the care certificate, which is a nationally recognised qualification for working in the care sector.

Staff told us they were supported and provided with regular supervision and had an annual appraisal of their work and performance. The records we looked at confirmed supervision took place regularly however there were some gaps in the staff's annual appraisals. We spoke with the registered manager about this who confirmed there was a programme scheduled to ensure these were completed and up to date. One staff member told us, "It feels like we have supervision all the time, it comes around that quick. It's good though, we get to discuss lots of things and talk about how we feel."

Staff we spoke with told us they had completed training in the Mental Capacity Act 2005 (MCA) and were aware of the legislation. The 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. Staff explained how they discussed what care people wanted to receive and gained their consent before supporting them. One staff member told us, "The person I support doesn't have capacity in respect of big decisions for example finances therefore they have a court appointed deputy."

We saw people who used the service or those acting on their behalf had signed a consent document agreeing to care and support and these were kept in their care records. One person told us, "The staff are good, they always ask my permission before they do anything. I tell them they don't have to ask but they always do, they're respectful like that."

Staff had the skills and abilities to communicate effectively with the people they supported. We asked a staff member to explain how they communicated with someone who has difficulties communicating. They told us, "[person name] Would soon let me know if they didn't want to do anything using non- verbal communication. I have worked with them a long time so I know them well." Staff told us they used communication books, visual prompts and body language as an alternative method of communicating effectively with people. A relative told us, "I was amazed when [staff name] first came as they already knew all about [person's name] condition, which is very rare. They [staff] know how to communicate, pick up on the little things and work wonders. It was excellent to see how they get on with [person's name] and this put them at ease because [staff name] knew all about them. I think they must've spent a lot of time researching [person's name] condition and notes. It made a real difference."

Peoples care records contained evidence that health care professionals were involved in their care when required. Staff told us that they had good support from local health services including speech and language, occupational therapy, community learning disability team and GP and nurses. The registered manager said they worked in partnership with other professionals to ensure the needs of people were met. People and their relatives told us staff were good at seeking advice from health professionals when needed. Comments included, "The staff will call the GP for [person's name] if needed and make sure they are looked after. They will keep me informed but I trust them to do the right thing and I know they will" and "The carers use their own initiative, they look to [person's name] needs. They will get [person's name] to hospital if needed and let me know what is happening."

One healthcare professional told us, "The staff working with people are clearly guided with their paperwork and medicines sheets, and write a good summary of the care they have provided at each visit, to allow a consistency and continuity between the carers. Management and staff at the service are open to suggestions and work with us to ensure the best possible outcome for the individual. "

Is the service caring?

Our findings

Everyone we spoke to, without exception, told us they were treated with dignity and respect by staff. Comments included, "I have a good relationship with staff. I have continuity which is so important to me", "All the carers are very professional. They couldn't do anything better if they tried, I look forward to them coming" and "The ones [staff] who have been in have been very caring. They chat, never rush and have a good rapport with [person's name]."

People told us the service had made a real difference to their lives. One person said, "I never wanted to have care and at first only had a couple of days but the staff have been so good I have realised that the more support I have the more improvement there is to my quality of life. I have a small team and we know each other well. I know there is a difference to how I am I feeling and I have more energy. They really are a blessing." Another said, "I don't know where I would be without them. Life has been so much easier since we took them on, or is it they took us on."

Care workers were respectful of people's privacy and maintained their dignity. Staff told us they provided support but were mindful of retaining people's dignity. One staff member told us, "It's important to shut doors, close curtains and keep as much of a person's body covered as possible. We are visitors in people's homes after all." One person told us, "They [staff] always ask if I am ready before doing things. They make sure I am kept warm and my 'dignity' is covered."

Positive, caring relationships had been developed with people and their relatives. The registered manager was motivated and passionate about making a difference to people's lives and this was evident in the approach of the staff team too. The staff we spoke to were enthusiastic and clearly cared about the people they supported. One staff member told us, "We genuinely care about the people we work with. It's like they are part of the family and the care we provide is nothing short of what anyone should receive."

When care packages started people were introduced to the support staff who would be working with them. Staff go through care plans with people and determine how they wanted their support to be delivered. One person we spoke to explained how they were reluctant to have support coming into their home because of 'the stories' you hear, this person told us, "I didn't want to have care at first but the company was recommended to me and I have never looked back. They genuinely care. I like everyone one of them. They have become part of my life to help me live my life". This person went on to say "It is a real pleasure to have them and that is coming from someone who didn't want to go down this road".

Everyone we spoke with confirmed they had regular support staff who visited them. One person said, "If there is ever a change to the time or carer coming in they always let me know beforehand." Staff understood the importance of promoting independence and this was clearly demonstrated in people's care records. One person told us, "We [the person and staff] go shopping and I make the choice of what I want to eat. They are well prepared and presented meals and we mostly do them together. They always include me and encourage me to take part." A relative told us, "The staff are really good with [person's name], they are very patient and never rush them. The staff encourage them to do what they can for themselves. I think it's very

important they maintain as much independence as possible".

One staff member told us how they supported someone with meals and the person likes to make a cup of tea and get the food items out ready. This staff member went on to say, "[person's name] can't stand for very long but just assisting a little bit gives them a sense of achievement and we encourage that to keep up their skills and self-worth."

People were supported to express their views and to be involved in making decisions about their care and support. One person told us, "I control my care plan and support." Another person told us how they would sign the care plan each time staff had visited to confirm the care they required had been delivered.

Staff received training in equality and diversity and understood how to creatively meet the diverse needs of the people they supported. The registered manager explained how one person they supported had unfortunately had difficulties in the past and had found it hard to find a service that would work with them. After a lot of work and determination and getting to know this person the service was now successfully supporting them and staff were seeing positive outcomes. A healthcare professional told us, "The staff seem genuinely interested in helping achieve positive outcomes for people."

People had access to advocacy and the service referred people when appropriate. One staff member told us about a person they were supporting who didn't have capacity but had some difficult situations taking place in their life. The staff member went on to explain how they had contacted Rethink advocacy and this person now had the support and advice from someone independent.

Is the service responsive?

Our findings

People's and their relatives told us the service was flexible at responding to their needs. Comments included, "It depends on how I am feeling but sometimes I need extra support. The company are very good at being flexible. I am able to ring up last minute and ask for added help and they always oblige", "My [relative] has their own life. They are supported by the carers 24/7 and Elite have never let them down. If we change plans we let them know and it never seems to be a problem" and "If I need to attend an appointment at short notice I call the office and the girls sort out support no worries, they are all angels."

People received personalised care that was responsive to their individual needs and preferences and their support needs were comprehensively assessed before they began using the service. This ensured the service could meet people needs effectively and people could be matched with a suitable support worker. The registered manager explained that they supported a range of people, some who had highly complex needs and required the support of two staff at all times. The registered manager went on to give an example of a person they support to live in the community who had a number of complex health issues.

The registered manager said, "We supported this person intensively in the early days before we took over the package." The registered manager explained how the staff team were provided with specialist training from healthcare professionals and all staff were competent before they were expected to provide support. A staff member told us that the person had a dedicated core team who rotated the support so they understood the person's needs in every detail and they could build up trust and a positive relationship with them.

The service provided care that was person centred and tailored to meet individual needs and preferences. Care records we looked at were personalised and detailed people's needs, how they wanted their care to be provided and described the outcomes they were hoping to achieve. One staff member told us, "We are led by the people we support. It's all about them at the end of the day." People and their relatives confirmed that they were involved in the planning and developing of their care.

One person said, "They only just went through my care plan recently to check it was still what I needed. They also ask me if I want anything altering in it, they're good like that." A healthcare professional told us, "I have found them [the service] to be person centred in their approach and in listening to the views of the people and their family when compiling their support plans. I also like the variety of opportunities they offer to people they support and I genuinely believe that their level of attention and clear operating procedures, enables families and individuals to feel confident with their support and to have an enhanced quality of life."

The service had a complaints policy in place and staff we spoke to were familiar in how to support people to make a complaint. One staff member told us, "Everyone we support has a copy of the complaint process in their records. We also support people to contact the office or speak to someone senior if they're not happy about any aspect of their care." Records we looked at showed the service had only received one complaint since the last inspection. Any concerns or complaints that had been raised had been documented, responded to and clearly outlined what actioned had been taken.

People's interests and hobbies were recorded in detail and people were supported to do activities they enjoyed and wanted to participate in. Staff explained that they supported people to access the community, go shopping, visit attractions and attend social events. We saw that one person was supported to visit The Deep aquarium in Hull. Staff told us they explored activities that everyone could access including people who used wheelchairs or with limited mobility. They described how they assisted someone to attend a weekly leisure session which enabled wheelchair users to experience ice skating.

The service supported people to celebrate their birthdays and special occasions. They also arranged and invited people who used the service for a meal at Christmas time. One relative told us, "They [staff] are like another little family for [person name]. They get on so well together. They even took [person's name] on their Christmas do with them. There is nothing that they wouldn't do."

A relative told us how their loved one was becoming isolated and didn't like to go out but since being supported by the staff they were now confident enough to go out to the cinema, bowling, shopping and even restaurants. They went on to say, "[person name] would never go out to eat in public as they felt conscious of the fact they required special cutlery. Their carer has been so clever to find places that they are comfortable with where they don't need to use cutlery and they are gaining in confidence." Another said, "They [staff] treat [person's name] as an individual, even though [person's name] doesn't understand. They make sure they include [person's name] in everything. If [person's name] doesn't want to go out they will come up with creative ideas to capture their imagination. They are amazing staff."

Is the service well-led?

Our findings

People and their carers spoke extremely positively about the service and the registered manager. People told us they felt the service was well organised and efficient. One person told us, "If I ring and am unable to speak to the manager she will always get back to me as soon as she can." A relative also told us, "They always get back to you regarding anything. There is good communication which is essential for me."

The registered manager was also the registered provider and was well respected at the service and had developed a positive culture at Elite Care Solutions Ltd. People who used the service, relatives and staff all spoke highly of the registered manager and described their supportive approach. One person told us, "Very nice, friendly people and I wouldn't have anybody else now. I would recommend them to anyone, in fact I already have." A staff member told us, "It's a nice place to work, very supportive. You feel a sense of equality at the service so whether you're a care worker or a manager everyone's views are encouraged and listened to."

We received positive feedback from all health and social care professionals we contacted and all were complimentary about the service provided. Comments included, "It's a highly effective care agency. The registered manager understands the need for consistency in support packages and has always been very proactive in terms of identifying areas of concern and acting on them in a timely manner" and "The staff I have worked alongside were proactive and enthusiastic, and appeared to genuinely want to know more, and how to do the best job."

Staff told us they were consulted and included if changes were taking place at the service. They told us they received text messages, emails and regular staff memos keeping them 'in the loop' and updated. The service offered incentives for staff which included receiving a gift and allowance for a meal at Christmas. The service also had an employee of the month award. This was awarded to staff who had been nominated or demonstrated that they had gone the extra mile to deliver good service. Staff were awarded with a certificate and a £25 payment in recognition of their hard work. We spoke to staff about this incentive and one told us, "It's a nice touch to be recognised for your hard work."

The service had clear vision and values that were person-centred and ensured people were at the heart of the service. These were developed by the registered manager when she set up the agency. The statement of purpose outlined that the service was committed to provide high standards of quality care, working in partnership with people and other agencies. The services statement stated, "We care not because we are paid to care but because we do care." The aims and objectives were included in the service brochure and staff handbook. These were discussed with people prior to services starting and with support workers when they were employed. The registered manager told us the service had the scope to grow but they had intentionally decided to provide services to maximum number of 60 people to ensure the service and its delivery remain personal and of a high quality.

People were regularly asked their opinions on the service. The registered manager monitored the quality of the service by asking for feedback from people who used the service, their relatives and staff. We reviewed

the feedback received in 2015 which included the comments, "Very content, excellent service, genuinely caring staff doing a brilliant job and no improvement needed" and "Very grateful for the good care, extremely satisfied."

The registered manager was aware of their responsibilities to notify the CQC and other agencies of incidents that affected the safety and wellbeing of people who used the service. We checked our records and saw that notifications had been submitted in a timely manner.

The service completed regular audits of care records, medication administration sheets and staff competencies to ensure the service delivered to people was effective and safe and any shortfalls identified could be addressed. An auditing system was also in place to review complaints, incident and accidents and staff training. The registered manager and office staff also undertook a number of unannounced observations and spot checks on staff working in the community to review the quality of the service provided. This included arriving at times when the support workers were in people's homes to observe the standard of care provided. These spot checks also included reviewing care records kept in a person's home to ensure they were appropriately completed, staff uniform checks and monitoring of staff arriving at people's homes on time.

The service worked in partnership with other professionals and the local authority to ensure they followed current good practice and delivered a high quality service. The registered manager was a registered social worker and attends a number of partnership boards, meetings and forums to share ideas and keep updated with changes in adult social care practice and legislation. The service worked with and sustained good relationships with a number of specialist health care professionals.

The registered provider and registered manager promoted an open and transparent approach to care. People told us communication between them and the office staff was good and calls would always be answered and messages left responded to. Staff told us it was a good organisation to work for. One staff member told us the registered provider was, "Very flexible in accommodating people's personal circumstances and needs." The registered manager told us they had a good, dedicated staff team, sickness figures were low and staff would cover shifts and any gaps in the rota to ensure people who used the service had the support they required.