

Gold Standard Care LTD

Gold Standard Care Ltd

Inspection report

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Date of inspection visit:
20 January 2020

Date of publication:
07 February 2020

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

Gold Standard Care Limited provides personal care and support to 11 people living in their own homes 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

People were very satisfied with the service provided by the agency and they received safe and effective care and support to meet their individual needs.

People were protected from harm as staff were confident to recognise and report abuse, and risks were routinely identified and safely managed. People received their medicines safely.

People received consistent support from a small team of staff who were well trained to meet their individual needs and who provided a responsive service as people's needs changed.

Staff were safely recruited to ensure they were appropriate, and a good match, to support people who used the service. Staff were well supported to deliver good care.

People's needs were assessed and documented and care plans were detailed so staff could deliver effective support based upon their individual needs.

People received support to eat and drink in line with their dietary needs and preferences. Staff worked with health and social care professionals to ensure consistency so people received appropriate and safe support.

Staff were caring and respectful, promoting people's privacy, dignity and encouraging their independence.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

Staff sought people's consent before supporting them and decisions about people's care and treatment were made in line with law and guidance.

People knew how to raise a concern and always felt listened to. Information could be made available in different formats to make it accessible.

The service was very well managed. People who used the service had regular contact with the registered manager and staff had opportunities to share their views about the service. Staff felt listened to when they shared feedback.

The registered manager checked the ongoing quality of care provided by delivering hands on care and through feedback questionnaires. The registered manager was developing auditing tools as the service grew and these were identifying areas where the registered manager would like to progress.

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

Why we inspected

This was a planned inspection

Rating at last inspection

This was the first inspection for this agency since registering with CQC in January 2019.

Follow up

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

Gold Standard Care 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 that provides personal care to people living in their own homes.

The service had a manager registered with the Care Quality Commission. The registered manager was also the provider. This means that they 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 48 hours' notice of the inspection. This was because we needed to be sure that the provider or registered manager would be in the office to support the inspection. We also wanted time to obtain contact details of people who used the service and relatives, where appropriate.

Inspection activity started on 20 January 2020 and ended on 22 January 2020. We visited the office location on 20 January 2020.

What we did before the inspection

We used the information we held about the service to plan the inspection. This included checking for any statutory notifications that the provider had sent to us. A statutory notification is information about important events which the provider is required to send us by law. We asked the local Healthwatch for any information they had which would aid our inspection. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England. We

used all this information to plan our inspection.

The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make.

As part of the inspection we spoke with three people who used the service and three people's relatives. This was to establish their views and feedback about the care and support they received.

During the inspection

During the inspection we spoke with the registered manager and viewed a range of records. This included extracts from three people's care records. We also looked at quality assurance records and two staff information files.

Following the inspection visit, we spoke with three staff.

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 as good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were protected from the risk of abuse and people felt safe with the staff who supported them. They were confident that staff could meet their needs safely. One person told us, "They [staff] help make everything safe."
- Staff had received training to protect people from harm. They all said they would be confident to recognise and report any signs of abuse to keep people safe.
- The registered manager was aware of the procedures to follow to report abuse to protect people.

Assessing risk, safety monitoring and management

- People had risks to their personal safety identified and managed effectively.
- Staff were knowledgeable about risks associated with the people they supported and assessments and plans clearly identified risks. One person told us, "They [staff] keep me safe and I am confident of this."
- The registered manager reviewed risk assessments to ensure they reflected people's needs and they liaised with the person and, if necessary, their family, staff and other professionals to do this.
- Staff told us if they identified new risks, they would immediately share them with the registered manager who would act without delay to review the risk and offer a safe management plan. One staff member told us they informally assessed risks on a day to day basis.

Using medicines safely

- People received varying levels of support to manage their medicines.
- When people received support, they told us staff administered it safely and within the prescribed guidelines. One Person told us staff worked alongside their family member to ensure consistency. For example, some medicines were given as and when required with a maximum dose in a 24-hour period. Staff told us that written records were kept to ensure staff and the family member knew what had been given to avoid overdose.
- Staff confirmed they had received training and competency checks before they could administer medicines. They felt the training gave them the confidence to support people as they required with their medicines.
- The registered manager regularly reviewed medicines administration records and agreed to make some improvements to documentation to ensure they evidenced explanations for administration when appropriate.

Staffing and recruitment

- People received support from staff in sufficient numbers to meet their care and support needs safely.

People told us staff arrived when scheduled and never rushed their visits. A person who used the service told us, "They are always on time, which is good. They don't rush to get out. They always work their time." A staff member told us, "We have time to spend with people this makes us better (than other agencies)."

- Staff had been recruited safely and records reflected evidence had been obtained to demonstrate their suitability prior to them working with vulnerable people.

Preventing and controlling infection

- People who used the service told us how staff used gloves and aprons appropriately to reduce risks of cross infection and staff confirmed they had a regular supply to use.
- Staff had received training in safe working practices to control the risk of infection.

Learning lessons when things go wrong

- The registered manager told us they always reflected on situations to see what they could have done differently or better.
- As such a small team, staff reflected on practice continually and any changes could be immediately implemented to ensure improvements could be made.
- Staff had opportunities to share information securely between themselves meaning they could reflect on experiences and get guidance on improving practice when necessary.

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 as 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

- People's needs were assessed and identified prior to the start of the service. This meant the registered manager knew they were able to meet the person's needs. One person told us, "We were asked exactly what we wanted and then the registered manager checked we were getting it."
- Staff told us how the registered manager passed information on to them about people's assessed needs and people reflected positively on staff's ability to meet their needs meaning the assessment process was effective.
- People told us they had care plans and relatives said they had been asked to input into these to ensure they reflected the person's exact care requirements.

Staff support: induction, training, skills and experience

- People spoke very positively about the effectiveness and knowledge of the staff who supported them. One person told us, "Staff know what they are doing. There is an accent on training. Staff are trained well."
- Staff spoke very positively about training opportunities that equipped them for their roles. They also said that they received ongoing support to ensure they were competent. This meant they were confident they could meet people's needs effectively.
- Staff received a thorough induction when they started working for the agency. One person who used the service told us that new staff were introduced to them by the registered manager who then worked alongside them 'showing them the ropes'.
- Staff told us they attended regular one to one meetings, team meetings and received observations while they were working. All of these made them feel well supported.

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

- Where people received support from staff prepare meals they received appropriate help to ensure they maintained their health.
- Staff knew people's dietary needs and preferences, and this enabled them to promote a healthy and varied diet in line with individual tastes as required. Most people decided what they ate and drank and staff prepared it accordingly.

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

- Staff worked with outside agencies to ensure people's needs and changing circumstances were shared when appropriate. Records of liaisons with external agencies were kept in care plans and in records maintained at the office.
- The registered manager liaised with health and social care professionals to ensure continuity of care. Staff

told us how they had identified a person required additional support to get around safely and said the registered manager had approached an occupational therapist for input. The outcome was that the person was able to remain independently mobile.

Supporting people to live healthier lives, access healthcare services and support

- People told us that staff supported them, if needed, to access medical support meaning they could maintain good health although most people managed this independently or with support of family members.
- Staff worked with external professionals, such as district nurses to ensure people received the right support.

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. Where people may need to be deprived of their liberty in order to receive care and treatment in their own homes, the DoLS cannot be used. Instead, an application can be made to the Court of Protection who can authorise deprivations of liberty.

We checked whether the service was working within the principles of the MCA and found that they were.

- People were supported to be involved in decision making as far as they were able. When people were unable to do so, appropriate support was sought. This usually involved family members.
- People were supported to make day to day decisions using their preferred communication methods and staff respected decisions made to ensure positive outcomes for people. One relative told us, "[Peron's name] directs them what to do (and what not to do) and they listen."

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 as 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 were very happy with the way they were supported. One person told us, "The care is excellent. I have a very good rapport with all of the carers. I can't fault any of them." Other feedback was equally as positive. A staff member told us, "This really is a company that cares."
- Staff respected and promoted people's equality and diversity by treating people as individuals. One person told us, "They asked me how I wanted to be supported. It's all about me." Care plans reflected a personalised service that was based around individual needs and wishes.
- Staff were aware of people's individual needs, including their, sexual, cultural and religious needs. The registered manager told us that protected characteristics would be considered as part of delivering a personalised service. Staff told us information available to them about the people they supported was 'excellent'. One staff member also told us, "We have time to spend with people to get to know them, and we know them well."
- The registered manager was very compassionate in their approach to supporting people. For example, they initiated additional support to one person who they had concerns about until a reassessment could be carried out. This meant the person remained safe and well looked after at a period of uncertainty for them.

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

- People were involved in making decisions about how their care and support was delivered.
- Staff told us how they always offered people choices and delivered care with consideration for people's personal preferences and routines.

Respecting and promoting people's privacy, dignity and independence

- People told us they were well supported by staff and that their privacy and dignity was respected. One person told us, "All staff treat me with dignity and respect. I have no worries at all. I would recommend them to anyone."
- Staff shared examples of how they respected people's privacy and dignity in order that they always felt 'comfortable'. One staff member told us, "We consider people's feelings. We watch our wording and make sure people are comfortable."
- People were encouraged to do what they could for themselves and staff offered support when needed. A relative told us, "[Person's name] can do things for themselves and staff encourage independence." Staff told us how they supported people to be as independent as possible.

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 as 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

- Care and support was responsive to people's individual needs and wishes.
- People, and their relatives, were involved in the development of care plans which were flexible and personalised. Plans were reviewed as needs changes so staff could respond to these changes.
- Staff said care plans were person centred and informative meaning they could offer a personalised service that met people's needs and preferences. One staff member described information as 'excellent.'

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 provider met the accessible information standard. The registered manager told us that information could be made available in different formats, including large print, should this be required.

Improving care quality in response to complaints or concerns

- People had no concerns or complaints about the care and support they received.
- People said they would speak with the registered manager if they had any concerns who they said were very approachable and responsive to issues. One person reflected the feedback of others and said, "[Registered manager's name] will always get back to you. You only have to say the word and they jump on it straight away."
- Relatives had a very positive relationship with the registered manager meaning they were confident to approach them with any worries or concerns.
- The complaints procedure had been shared with people in the service user guide

End of life care and support

- At the time of this inspection no-one was receiving end of life care. The registered manager told us they would incorporate end of life needs and wishes into care plans if this was required.

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 as good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care

Planning and promoting person-centred, high-quality care and support with openness; and how the provider understands and acts on their duty of candour responsibility

- People received high quality care that met their needs and wishes. People recommended the service to others. One person said, "They are excellent. They have to be the best I've used so far." Another said, "They make a difference." A staff member told us, the registered manager, "Bends over backwards for the clients and the staff. I couldn't wish for a better boss and I would recommend this company to anyone."
- The registered manager was aware of their duty of candour. Duty of candour means the organisation has a duty to be open and transparent in relation to care. People who used the service reflected that the registered manager was always open and honest with them.

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

- The registered manager understood the responsibilities of their role and acted in accordance with them. They were aware of the need to send us notifications of notifiable incidents, events or changes that happen at the service within a reasonable timescale and as required by law.
- The service was continually monitored by the registered manager who provided 'hands on support' to ensure people received effective care and support. They had initiated auditing processes that they were to develop further as the service grew.

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

- People's views and opinions were considered and they felt valued and consulted. Outcomes of quality questionnaires were shared with people, as were action plans to demonstrate their views and suggestions had been listened to and acted upon.
- Staff had opportunities, both informally and formally to discuss issues and make suggestions for improvements and changes. Staff felt their views were listened to. Staff told us they attended staff meetings where they were consulted, and information was shared with them about developments and changes.

Continuous learning and improving care

- The registered manager told us how incidents or accidents would be reviewed and discussed in staff teams to see if anything could have been done differently to make the person safer and the care more effective.
- Care reviews identified how care could be done differently to better support people.

Working in partnership with others

- The registered manager worked in partnership with health and social care professionals to achieve good outcomes for people who received a service. We heard the registered manager acting on behalf of a person who they had concerns about to ensure they received sufficient support to keep them safe as their needs changed.
- Staff told us they had good relationships with health and social care professionals. and shared examples of how joint working and effective information sharing had a positive impact on people.

Leadership and management

- The service was well managed and well led. People told us the registered manager was approachable and professional. One person told us the registered manager was, "A marvellous person." Staff also spoke positively about their registered manager. One staff member reflected the views of themselves and others when they said, "I can honestly say this is the best [registered] manager and best company I have ever worked for."
- People said they received information they needed to ensure effective communication could be maintained. Relatives also felt communication was effective and staff described the importance of effective communication to ensure a good quality service for people.