

Sustain (UK) Ltd

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Inspection report

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Requires Improvement ●

Summary of findings

Overall summary

About the service

Sustain (UK) Ltd is a domiciliary care agency providing personal care and support to people in their own homes, either in the community or in supported living accommodation. At the time of the inspection, there were seven people receiving support across seven different properties.

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

There were systems in place to monitor quality and people were supported by staff who had been recruited safely, however the procedures followed when making recruitment decisions were not always recorded. People were given opportunity to feedback on the quality of the service. People and staff spoke positively about the management team.

People felt safe with staff and told us they received support from a consistent staff team. Medicines were managed safely by staff who had received training in how to administer medicines. There were safe infection control practices in place.

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

Rating at last inspection

The last rating for this service was good (published 24 September 2019).

Why we inspected

We received concerns in relation to the recruitment practices of the provider. This included the validity of Disclosure and Barring Checks being completed for staff. As a result, we undertook a focused inspection to review the Key Questions of Safe and Well-led only.

We reviewed the information we held about the service. No areas of concern were identified in the other Key Questions. We therefore did not inspect them. Ratings from previous comprehensive inspections for those Key Questions were used in calculating the overall rating at this inspection.

We found no evidence during this inspection that people were at risk of harm from this concern. Please see the Safe and Well-Led sections of this full report.

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 well-led?

Requires Improvement ●

The service was not always well-led.

Details are in our well-Led findings below.

Sustain (UK) 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 provides care and support to people living in seven 'supported living' settings, so that they can live as independently as possible. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for supported living; this inspection looked at people's personal care and support.

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 48 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the provider or registered manager would be in the office to support the inspection.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. The provider was not asked to complete a provider information return 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. We took this into account when we inspected the service and made the judgements in this report. We used all of this information to plan our inspection.

During the inspection

We spoke with three members of staff and the registered manager. We reviewed a range of records. This included two people's care records and 12 staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service were reviewed.

After the inspection –

We spoke with one person who received support from the provider on the telephone on 06 December 2019 and a further one person and a relative on 11 December 2019.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

Staffing and recruitment

- Prior to the inspection, we received information of concern relating to the validity of Disclosure and Barring Checks (DBS) completed by the provider. DBS checks alert the provider to any criminal convictions a staff member has. At the inspection, we found that appropriate systems were in place to ensure staff were recruited safely.
- Staff had been required to provide references from previous employers as well as complete DBS check. We viewed the system used to obtain DBS checks and saw that this was done via an external agency. Each staff member employed by the service had a DBS check completed.
- People told us that there were enough staff to meet their needs and that they received support from a consistent team of staff. One person told us, "They [staff] come every day and stay as long as they need too."

Systems and processes to safeguard people from the risk of abuse

- Staff understood their responsibilities in identifying and acting on concerns about abuse. One staff member told us, "We would report any concerns to the registered manager."
- The Registered Manager had responded to concerns and reported these to external agencies such as the local authority safeguarding team appropriately.

Assessing risk, safety monitoring and management

- The registered manager had implemented systems to identify and mitigate risks to people's health and safety. Where risks had been identified, there were clear risk assessments in place that detailed how staff should respond to ensure people's safety. Staff knowledge of risks reflected what was found in the records.
- For example, where people may exhibit behaviour that can challenge, risk assessments clearly identified the triggers to these behaviours and the most appropriate way for staff to respond.

Using medicines safely

- People who received support with their medicines told us they were happy with the support provided. One person told us, "I get my medicine in a blister pack. Staff will give it to me and I have to take it in front of them [so they know I have taken it]."
- Staff told us they received training in medicines administration and could confidently explain how they supported people with medicines safely.

Preventing and controlling infection

- People told us that staff wore personal protective equipment when supporting them. Staff we spoke with told us they received training in infection control and always had access to equipment such as gloves and

aprons.

Learning lessons when things go wrong

- The registered manager displayed a commitment to learning lessons where things go wrong. Although no accidents or incidents had occurred, there were systems in place to record and learn from these to reduce risks to people in future.

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 the last inspection this key question was rated as Good. At this inspection this key question has deteriorated to Requires Improvement. This meant the service management and leadership was inconsistent. Leaders and the culture they created did not always support the delivery of high-quality, person-centred care.

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

- Although the provider had recruitment systems in place to ensure safe recruitment decisions, we found that records of these were not always in place. For example, where two staff had a spent criminal conviction, the registered manager could explain the measures taken by them to ensure people's safety prior to recruitment of the staff member. However, this process was not always recorded. The HR manager assured us that these would be put into place. In addition, we found that some gaps in employment were evident in people's work history. The HR manager could again explain these gaps, which indicated they had explored these with staff. However, these were not documented. The HR manager explained that they had recently implemented new 'recruitment sheets' to ensure all relevant information was recorded, and that this would be added to the sheet to ensure this was documented.
- There were systems in place to monitor quality. This included care reviews with people to ensure their care records were accurate and spot checks to monitor staff practice.

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

- People told us that they knew who the registered manager was and they felt the service was well led. One person told us, "I have met [registered manager] yes. She has come to my house a few times." A relative added, "It's difficult when you're only visiting to know how good they [staff] are, but I am quite sure everything is ok. I have no concerns."
- Staff told us they felt supported by the registered manager and were confident that any issues or concerns they raised would be acted on. One staff member told us, "I am supported. There is always an on call person 24 hours too and they always respond to us."

How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong

- The registered manager understood the duty of candour and was proactive in being open and honest where things go wrong. The registered manager had responded appropriately where concerns were raised and shared these concerns with CQC and other agencies where needed.

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

- People were given opportunity to feedback on the quality of the service. Members of the management team would visit people in their homes to check on their welfare and give people opportunity to discuss any concerns. In addition to this, surveys were sent out to people annually to enable them to provide feedback anonymously if they wished. The last survey was issued in June 2019 and we saw that the responses received so far had been positive.

Continuous learning and improving care / Working in partnership with others

- The registered manager displayed a commitment to learning and improving care. They took an active role in working with others to ensure people received safe care. This included joining the local authority safeguarding board and working alongside local hospitals and GP's.
- The registered manager was keen to retain staff to ensure consistency for people receiving support and had received recognition from 'Investors in People Gold' for their work investing in the staff team.