

Orion Care Services

Orion Care Services

Inspection report

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Date of inspection visit:
20 March 2019
22 March 2019

Date of publication:
29 April 2019

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: Orion Care Services provides care and support to people with learning disabilities living in their own home. 34 people were using the service at the time the inspection living across 13 tenancies (projects).

People's experience of using this service: People told us staff were kind and caring in their approach. People told us staff communicated well with them and acted in an open and transparent way.

Care plans were person-centred and provided staff with the information they needed to provide care and support in a way that met people's needs and preferences.

Medicines were managed in line with good practice guidance.

Staff assessed risks to people's health, safety and wellbeing and put plans in place to manage these risks.

People told us they would feel confident to raise any complaints they might have. We saw complaints were identified, investigated and used to improve the service.

There were processes in place to monitor the safety and quality of the service.

One relative said they had concerns about the suitability of staffing on one team and told us that their relative was not encouraged to take part in enough activity. The relative had raised this with the management team who were hoping to work with the team and make improvements.

The service had a registered manager in post at the time of our inspection.

The management team had the knowledge and oversight to operate the service safely and effectively. They demonstrated an understanding of all aspects of managing the service such as safeguarding procedures and medicines management.

People, relatives and staff were engaged by the service via meetings so that everyone could contribute to the development of the service. There was a credible strategy in place with plans for multiple new improvements and updates at the service. This was being implemented by the registered manager who was proactive in considering how the service could be improved.

People, staff and relatives spoke positively about the registered manager and management team who led the service well.

We have made a recommendation about staff training in both mental health awareness and equality and diversity.

The service met the characteristics of Good

Rating at last inspection: At the last inspection the service was rated as Good (15 July 2016).

Why we inspected: This was a scheduled inspection planned to check that the service was providing quality care that was safe, effective, caring, responsive and well-led.

Follow up: We did not identify any concerns at this inspection. Going forward we will continue to monitor this service and plan to inspect in line with our reinspection schedule for services rated Good.

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

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

The service was safe.

Details are in our Safe findings below.

Good ●

Is the service effective?

The service was effective.

Details are in our Effective findings below.

Good ●

Is the service caring?

The service was caring.

Details are in our Caring findings below.

Good ●

Is the service responsive?

The service was responsive.

Details are in our Responsive findings below.

Good ●

Is the service well-led?

The service was well-led.

Details are in our Well-Led findings below.

Good ●

Orion Care Services

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. This inspection was planned 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: This inspection was carried out by one adult social care inspector.

Service and service type: Orion Care Services is a Domiciliary Care Agency providing care and support services to people with learning disabilities.

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 visit because we needed to be sure that staff would be in the office to support the inspection.

Inspection site visit activity started on 20 March 2019 and ended on 22 March 2019. We visited the office location on 20 March 2019 to see the registered manager and management team; and to review care records and policies and procedures. We also met three people that used the service on this day. We made calls to relatives and health and social care professionals on 22 March 2019.

What we did: Prior to the inspection, we reviewed all the information we held about the service including notifications received by CQC. A notification is information about important events which the service is required to tell us by law.

During our inspection we spoke with three people using the service, three members of staff and three relatives. We also spoke with three health and social care professionals that had experienced working with the service.

The registered manager was unavailable so inspection activity was supported by two deputy managers and

other members of the management team.

We reviewed a range of records. This included care records, information relating to staff recruitment and supervision and the training records for all staff. We also reviewed records relating to the management of the service and a variety of policies and procedures developed and implemented by the provider.

Is the service safe?

Our findings

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

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

Systems and processes to safeguard people from the risk of abuse

- People told us they felt safe. One person told us, "I am happy with the service and feel that I can trust the staff."
- Staff told us that they had completed effective safeguarding training and could explain safeguarding processes in detail.
- Staff were confident that action would be taken if they raised any concerns relating to potential abuse. One member of care staff said, "I would not think twice about reporting any concerns I have. Staff are actively encouraged to speak out by the management team."
- The provider had effective safeguarding and whistleblowing systems and policies in place.
- The registered manager was aware of their responsibility to liaise with the local authority if safeguarding concerns were raised.

Assessing risk, safety monitoring and management

- Risks to people were regularly reviewed and safely managed.
- People's needs and abilities had been assessed in a pre-assessment plan. The potential risks to each person's health, safety and welfare had been identified.
- Risk assessments were carried out in various areas. For example, nutrition, mobility, the environment and were individualised to the person. Risk level and actions to reduce the risk were clearly documented.

Using medicines safely

- Risk assessments relating to medicines were carried out where people needed support from staff.
- Medicines were stored securely in people's homes when this was necessary.
- People's independence to manage their own medicines was maintained if safe to do so. Any changes to this was done with people's full consent.
- People told us they were happy with the support they received to take their medicines.
- Records showed that medication was administered as prescribed.
- Medicines administration record sheets (MARS) were scrutinised by managers through an auditing process. This helped ensure medicines were given safely as prescribed.

Preventing and controlling infection

- Staff had completed infection control training.
- Unannounced spot check visits were completed by the manager. This ensured care staff followed the infection control procedures and used personal protective equipment (PPE) when carrying out personal care, food preparation and handling.
- Staff were aware of effective hand washing techniques and any restrictions in place for supporting people

with infections or personal care. Staff received training in infection prevention control.

- Staff told us they had access to PPE which was stored at the office.

Learning lessons when things go wrong

- The provider showed us a copy of the accident form that staff would complete in the event of any injury, significant incidents or near misses. We saw this prompted staff to consider any 'lessons learned'.
- Incidents and accidents were regularly audited to check for trends or patterns, to mitigate further risks.
- There was an open culture to learning from safety concerns. Incidents and accidents were thoroughly analysed and shared for prevention and wider learning. For example, security had been reviewed and improved at one project following an incident where one person had absconded.
- We saw that a relative had not been contacted in a timely manner following an incident that had left their loved one with an injury. The deputy manager told us that the service had learnt from this and were committed to informing people's relatives as soon as possible after an incident has occurred should this be their wish.

Staffing and recruitment

- Staff were recruited safely, and processes were in place to ensure staff were suitable to support vulnerable people. References were obtained for each staff member and a disclosure and barring service (DBS) check. A DBS check helps employers make safer recruitment decisions and helps prevent the employment of staff who may be unsuitable to work with vulnerable people.
- There were enough staff to meet the needs of people and deliver a consistent service.
- Staff had completed induction training in line with the providers policies and had competency checks to ensure they understood the training provided.

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

People's outcomes were consistently good, and people's feedback confirmed this.

Staff support: induction, training, skills and experience

- Staff received a thorough induction to the service, they told us, and we saw they spent time understanding the ethos of the service, attended training, were introduced to people the service supported, shadowed more experienced staff members and read care plans.
- Each staff member we spoke to said they had been able to spend time getting to know the people they were supporting. More experienced members of the team had introduced the staff to people and showed the staff the way people wished to be supported.
- The induction was recorded and planned in line with the Care Certificate. The Care Certificate is a set of agreed standards that sets out the knowledge, skills and behaviours of specific job roles in health and social care.
- Staff received regular training appropriate to their job role. Staff were also supported to undertake additional qualifications to enhance their knowledge. The management team had provided additional training to staff in completing daily notes and charts, how to order medicines and checking equipment is fit for use.
- Some of the people who used Orion Care had, or could have underlying mental health issues. The service had also been set up to support people from different cultural and religious backgrounds. Although the staff responded to people in a person-centred way, responding to their specific needs and wishes, we noticed that they had not received any specific training in mental health or equality and diversity. Such training would assist them to understand and respond to the needs of the people they supported.

We recommend that the service finds out more about training for staff, based on current best practice, in relation to mental health awareness and equality and diversity.

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

- The service captured people's support needs for eating and drinking in care plans. Choices and preferences were recorded, and staff could describe people's preferred foods and drinks.
- People told us, staff always ensured they were offered food and drink if that was part of the care plan.

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 with appropriate legal authority.

In care homes, and some hospitals, this is usually through an MCA application called the Deprivation of Liberty Safeguards (DoLS). When people are living in their own homes, they can still be deprived of their liberty, but an application needs to be made to the Court of Protection (CoP).

- No one being supported by the service was in receipt of any authorisations from the CoP. People had appropriate DoLS authorisations in place.
- Any concerns around capacity to consent were referred to the local authority for further input.
- Staff had received training in mental capacity and understood the requirements of the act.

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

- People received a full assessment of their needs prior to using the service. Personal choices and preferences were recorded in the assessment and captured in people's care plans.
- We saw when the service identified a person was unwell, the appropriate medical intervention was sought, and families were kept up dated with changes to people's wellbeing.
- We saw the service worked with health and social care professionals such as occupational therapists and social workers and fed back to each professional regularly. One health and social care professional told us, "The service always feeds back well and monitoring of health needs is excellent quality."
- People had hospital passports in place to go with them for any unplanned hospital visits. The passports detailed people's needs and preferences, for examples, help with communication or mobility. The passports assisted hospital staff to be alerted to people's needs and were updated when anything changed.
- The provider was proactive in ensuring that they complied with Accessible Information Standards. These are standards introduced by the government in 2016 to make sure that people with a disability or sensory loss are given information in a way they can understand. The service adapted information to meet people's needs, for example information about the service had been produced in an easy read version to make it accessible for some people using the service.

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

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 and relatives told us staff were very caring. One person told us, "My staff team are lovely, they look after me and care." A relative said, "Orion Care staff are very supportive people. [Name] has come on leaps and bounds since being there." A health and social care professional told us, "I have had extensive contact with Orion over the years and found them to be competent and caring with a number of my patients who have severe and complex needs."
- Staff told us they used care plans to find out about people in order to get to know the person and build positive relations with them.
- Staff were respectful when speaking about people and were considerate of the equality and diversity needs of people. Staff actively considered people's cultural or religious preferences. One person told us that staff accompany him to church when he asks.
- All new staff shadowed a more experienced member of staff until they were assessed as competent to work independently.
- A health and social care professional told us, "The people who Orion support, appear to be happy and very settled, some of whom had had several placement breakdowns before entering Orion Care support services. I have had no negative feedback from families or advocates about the services and supports and a lot of very positive comments and compliments about the service."

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

- People confirmed care staff listened to them, involved them in decisions and respected their views.
- Care plans were reviewed regularly and as and when a person's needs changed. The person and relatives were involved in reviews of their care plan if this was required. A relative told us, "Any changes are always discussed with the family and the service are approachable if we think something needs to be updated."
- A health and social care professional told us, "Orion Care develop good communication and working relationships with the persons families and relevant advocates and appear to involve family as much as possible in the lives of the people they are supporting."
- Orion Care Limited had a policy around advocacy and referred people to local advocacy groups as required. We saw an advocate had been appointed for one person to support with decision making around moving home.

Respecting and promoting people's privacy, dignity and independence

- People told us, and we saw staff treated them with dignity and respect and promoted independence. Staff told us, they encourage people to have an "can do" attitude and give them time to do tasks for themselves rather than doing it for them. Staff could describe to us in detail how they supported people with personal care and ensured the curtains were closed and people remained covered up to support their dignity.

- Consideration to privacy and dignity was embedded throughout each care plan we saw.

Is the service responsive?

Our findings

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

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

- The provider developed a care plan for each person, which contained sections about different aspects of their care. Care plans were very detailed, for example, one person's plan explained exactly how they preferred to be encouraged to complete tasks by using praise rather than making demands on them.
- Staff were knowledgeable about the people they supported. They were aware of their preferences and interests, as well as their health and support needs, which enabled them to provide a personalised service. A health and social care professional told us, "My observations would be that Orion Care has a good person-centred approach towards the care and support they deliver." Another health and social care professional told us, "[Orion Care staff] apply learning to people and implement strategies to meet their individual needs."
- Care plans included people's personal information, people's routines and support needs. They were up to date and reviews took place regularly with people. A staff member told us, "The level of detail in the care plans is great. I always know the best way to care for someone and if the plans require an amendment I just let the team at the office know and they make the required changes really quickly."
- Staff supported people to access activities and facilities in the community. We saw that one person had support from staff to visit the cinema; go bowling, play pool, play mini golf, visit the local arcade, take part in laser quest and go rock climbing. Another person told us that staff were supporting them to plan a holiday abroad.
- One relative told us they their relative no longer did some of the activities that they used to and they believed that this was because the current staff team was not compatible with the person and did not wish to support with them with activities. A health and social care professional agreed that staff compatibility can sometimes be an issue and told us, "Orion Care could possibly could put more compatible staff with the right people and not move staff around so much." The deputy manager told us, and we saw from meeting records that activities and staffing were currently under review and the service were implementing proactive strategies to ensure that people are matched with appropriate staff and encouraged to take part in more activities that benefit them both mentally and physically. We will review this area when we next inspect the service to see if this has improved.

Improving care quality in response to complaints or concerns

- There was an appropriate complaints management system in place. Complaints were handled in the correct way and a response was sent in a timely manner.
- A complaints register was in place that included details of the complaint and action taken, which provided oversight to the management team.
- Staff were aware of how to manage complaints. They told us that the management team took complaints seriously and this would be reviewed and investigated.

End of life care and support

- The service did not currently support anyone coming to the end of their lives. However, the management team assured us that they would continue to support people if they were able to meet their needs and would provide specialist training for staff as 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

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

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

- 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.
- There was a positive culture where staff and management took pride in the care and support that they provided. A relative said, "The management team are good. They do take the time to sort out any issues I have and they do listen to me."
- The management team worked well together to ensure the day to day running of the service, clear contingencies were in place to cover absences. A Health and social care professional told us, "The project leaders and managers are very 'hands on' and responsive in terms of arranging appointments and review meetings."
- People's confidential information was held securely at the registered office or in people's homes.
- The registered manager was aware of their responsibility to report events to the CQC by statutory notifications.

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 and their relatives told us they were very involved in the planning of their care and support.
- Care staff were positive about their workplace and complimentary about the support they received from the management team. A staff member said, "I have regular supervision and feel well supported. I can come to the office any time to speak with someone."

Working in partnership with others

- Records showed that staff communicated effectively with a range of health care professionals to ensure that the person's needs were considered and understood so that they could access the support they needed.

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

- People, relatives and health and social care professionals told us that Orion Care Limited communicated with them effectively. However, one relative using the service told us that the service had not communicated with them effectively regarding an incident.

- Feedback from stakeholders was gathered by post or over the telephone regularly and the findings analysed and fed into action and improvement plans for the service.

Continuous learning and improving care

- Visits were carried out on people's homes by the management team which enabled them to obtain feedback from people and check the environment, equipment's, medicine management and safety.
- Spot checks were carried out to check staff performance on service delivery and approach when supporting people. Outcomes of spot checks were discussed with staff along with further learning and development.
- Audits were carried out weekly, monthly and annually to check that systems around medicines, care plans and training were robust. This meant that there were systems in place to ensure there was a culture of continuous learning.