

Mrs Sharon Maria Elaine Tedstone

Celtic Care

Inspection report

Bickland Business Centre
Tregoniggle Industrial Estate
Falmouth
Cornwall
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20 December 2016

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Ratings

Overall rating for this service

Good ●

Is the service effective?

Good ●

Summary of findings

Overall summary

We carried out a comprehensive inspection on 21 August 2015. A breach of the legal requirements was found. This was because the arrangements in place for the support and training of staff were not robust. Staff did not have regular recorded supervisions and training was not always updated in a timely manner as there was not an effective system in place to monitor when this support was due. After the comprehensive inspection the registered provider wrote to us to say what they would do to meet the legal requirements in relation to the breach. As a result we undertook a focused inspection on the 20 December 2016 to check they had followed their plan and to confirm they now met legal requirements.

This report only covers our findings in relation to the question 'is the service effective?'. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Celtic Care on our website at www.cqc.org.uk

Celtic Care is a community service that provides care and support to adults of all ages, in their own homes. The service provides help with people's personal care needs in the Falmouth area. At the time of this inspection visit Celtic care was providing care for 27 people. There were 17 staff employed by the service.

There was 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 registered manager held a record of all the training undertaken by staff and when they were due for updates. The assistant manager held a record of each time staff had supervision and appraisals. This meant that the service had a robust process with which to monitor the training and supervision needs of all staff.

The registered manager and assistant manager met with all the care staff in person each week when they came in to the office to collect their rota. There were also regular staff meetings and memos sent out to communicate information relating to people receiving a service and any changes. This meant that there were effective processes for communicating with all the staff.

At this focused inspection we found the registered provider had taken effective action to meet the requirements of the regulations and the breach had been met.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service effective?

Good ●

The service was effective. Staff received regular supervision and appraisals.

Staff training was provided and monitored to ensure updates were provided in a timely manner.

Staff were well supported by the management team.

Celtic Care

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 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.

We undertook an announced focussed inspection of Celtic Care on 20 December 2016. This inspection was completed to check that improvement had been made to meet legal requirements after our comprehensive inspection on 21 August 2015. We inspected the service against one of the five questions we ask about services; is the service effective? This is because the previous concerns were in relation to this question.

The inspection was carried out by one inspector. Before our inspection we reviewed the information we held about the home. This included the information from the service regarding what steps they would take to meet the legal requirements.

We spoke to the registered manager and the assistant manager. We reviewed the staff training and supervision and appraisal records for all the staff at the service.

Is the service effective?

Our findings

At our previous comprehensive inspection in August 2015 we found not all staff had attended regular updates of training in subjects such as first aid, health and safety and safe handling of medicines. The assistant manager, who provided supervision for care workers, had not received regular updates of training such as first aid since 2007, safe handling of medicines since 2010 and infection control since 2009. Other senior care workers had not received updates in mandatory training in a timely manner. There was no system in place to help ensure staff received relevant training and refresher training in a timely manner.

Staff did receive supervision. However, this was not provided on a regular basis across the staff team. The deputy manager held a record of when each care worker had received supervision and when the next session was due. Some staff were overdue for their supervision. This was a breach of the Health and Social Care Act 2008.

At this inspection we found the assistant manager and the senior care workers had received training updates on first aid, medicines management and infection control since the last inspection. The registered manager held a training matrix which recorded all staff training. This meant the registered manager had an overview of when updates were required. These were marked in red to help ensure training was planned in a timely manner. There was a white board in the office showing when each person was due to receive specific training and the service had booked training for these staff. Staff had received training in areas required to meet the needs of people the service were supporting, this included dementia care.

The assistant manager held a staff supervision and appraisal record containing information about when each member of staff had received supervision and appraisals. This record showed that care staff had received regular supervision and appraisals and when the next session was due.

Care workers visited the office in person each week to meet up with the registered manager and assistant manager to collect their rota for the forthcoming week. This provided an opportunity for staff to meet up with the management to discuss any issues relating to the running of the service. It also enabled staff to meet each other and share information. The registered manager sent out regular memos which detailed varied issues relating to people who used the service, uniforms, changes to visit times and professional behaviour. This meant staff were well supported.

We judged that the service had taken action to meet the requirements of the regulations and the breach was now met.