

Advent Care Solutions Ltd

ROSEBANK 2

Inspection report

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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

Rosebank 2 is a domiciliary care agency registered to provide personal care to people in their own homes. The services they provide include personal care, housework and medicines support. At the time of inspection, the service provided personal care to one person. The Care Quality Commission (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:

The person using the service was unable to speak with us due to their needs. The person's relative spoke positively about the service and the care provided to their family member. They were confident their family member was safe when in the presence of care workers.

Systems were in place to protect people from abuse. These included safeguarding policies and appropriate training for staff. Staff understood how to protect people from poor care and abuse. Personalised risk assessments helped keep the person safe and supported their independence.

Personalised care was provided to the person from a small, consistent staff team who valued the relationships they had built with the person.

Recruitment procedures were in place. The suitability of staff was assessed before they were recruited to support people using the service. Care staff were punctual and stayed the agreed amount of time.

Suitable infection control practices helped to prevent and control the spread of infections including COVID-19.

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.

An assessment of people's needs and preferences was carried out prior to the development of care plans. These provided the information and guidance staff required to ensure people's individual needs were met in the way they wanted. Care plans were person centred.

Staff received appropriate training to carry out their role effectively. Care workers told us they were well supported by management. Care workers spoke positively about morale and told us they felt valued working at the service.

The service had a system in place to assess, monitor and improve the quality and safety of the services provided. However, the service had recently started providing services to people and was in the process of

implementing checks and audits which had not yet been embedded in practice. We have made a recommendation about the management of governance systems.

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

Rating at last inspection and update

The service was registered with us on 31 March 2021 and this is the first inspection.

Why we inspected

This was a planned comprehensive inspection to review the key questions, Safe, Effective, Caring, Responsive and Well-led and rate this service.

The inspection was prompted because the service has not had an inspection and a rating since it was first registered with us.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

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.

ROSEBANK 2

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 Health and Social Care Act 2008.

Inspection team

The inspection team consisted of one inspector.

Service and service type

Rosebank 2 is a domiciliary care agency registered to provide personal care to people in their own homes.

Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the CQC to manage the service. 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. At the time of our inspection there was not a registered manager in post. Until a registered manager was appointed, the nominated individual was responsible for supervising the management of the service on behalf of the provider.

Notice of inspection

We gave the service two working days' notice of the inspection because the service provides care to people in their own homes and we wanted to make sure that management were available on the day of the inspection site visit.

We visited the office location on 5 September 2022.

What we did before the inspection

We reviewed information we had received about the service since it was registered with the CQC. 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.

The provider was not asked to complete a Provider Information Return (PIR) prior to this inspection. A PIR is information providers send us to give some key information about the service, what the service does well and improvements they plan to make.

During the inspection

During the site visit we met and spoke with the nominated individual and the deputy manager. We reviewed records relating to the management of the service.

We spoke with one person's relative. We also spoke with one care worker. We looked at one person's care records and medicine records as well as records relating to the management of the service and the safety and quality of people's care. We also looked at records showing us how staff were recruited and trained. We reviewed quality assurance records, policies and procedures. We contacted one care professional to obtain feedback but had not received a response by the time of this report being completed.

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 of this newly registered service. This key question has been rated 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 harm and abuse. Systems were in place to safeguard people from harm and abuse.
- The care people received was safe and met their needs. One person's relative told us, "[My relative] is safe and well looked after."
- Staff completed safeguarding training. The service had a safeguarding policy to provide guidance to staff in safeguarding matters.

Assessing risk, safety monitoring and management

- There were policies and systems in place to minimise the risk of people being harmed and to keep people and staff safe. The person's relative did not express any concerns about the person's safety when they received care and support from the service.
- We looked at the risk assessment for this one person. This person's home was assessed to ensure that they were supported to live in as safe environment as possible. There was also a personalised risk assessment in place which covered risks associated with their personal safety and health. Guidance was in place for staff to follow to manage identified risks, reduce the risk of the person being harmed, and to support their independence.
- The person's risk assessments were reviewed and updated when the person's needs changed. Changes were communicated to staff to ensure they had up to date information about managing risks and keeping people safe.
- The relative we obtained feedback from raised no issues with regards to care worker's punctuality and attendance.

Using medicines safely

- The service assisted one person with medicines support. This person's medicine support needs were documented in their care plan.
- The nominated individual explained they did not yet have an electronic medication administration recording system in place. This was something that the nominated individual was currently looking into and would implement once the service was providing care to more service users. At present, the service recorded medication administration on paper Medication Administration Records (MARs).
- We viewed a sample of MARs and noted that these listed what medicines were prescribed with details of how often the medicines were to be taken. MARs were completed with no gaps which indicated that medicines prescribed had been administered.
- Staff were trained in the safe administration of medicines.

Staffing and recruitment

- Recruitment systems ensured staff were recruited to support people to stay safe. Staff files were organised and contained appropriate DBS and other recruitment checks. Disclosure and Barring Service (DBS) checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions. However, not all character references were verified to check their authenticity. We raised this with the nominated individual who confirmed that he would contact the relevant referees and verify them and ensure that this was done in future.
- The service used a small team of staff to help ensure the person received a reliable and consistent service by care workers who knew their care and support needs well. The nominated individual assured us that there were enough staff to safely meet this person's needs. He confirmed that the provider would only take on further people if they had sufficient care workers employed. He confirmed they were in the process of recruiting further care workers and this was an ongoing process.

Preventing and controlling infection

- We were assured the service was following current infection prevention and control (IPC) procedures, including those associated with COVID-19.
- Staff had received training about infection prevention and control including COVID-19. Staff told us they used Personal Protective Equipment (PPE) effectively and had access to an adequate supply.

Learning lessons when things go wrong.

- Although the service had not recorded any accident or incidents, the nominated individual reiterated that the service would adopt a practice of learning from any incidents, accidents and other relevant events. An appropriate policy was in place.

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

- Care and support was delivered in line with evidence-based guidance and relevant legislation, which was monitored to ensure consistency of good practice. An initial assessment of people's care and support needs was completed before their introduction to the service.
- A care plan was created following the assessment process. This detailed what care people needed. Care plans demonstrated that people's needs had been individually assessed. Details of people's needs, including their cultural, religious, dietary, and preferences were documented. Care plans ensured care workers provided care and services in line with what people wanted.
- The service ensured the person's individual needs were met and worked alongside external services and professionals to ensure support led to good outcomes for them.
- Information collated included people's specific health and care needs, how they wished to be supported and their protected characteristics under the Equality Act 2010.

Staff support: induction, training, skills and experience

- Staff received support through induction, training and supervision. Newly recruited staff underwent a programme of induction to help ensure they were able to support people in line with their needs. Staff shadowed more experienced staff members prior to providing support.
- Care workers completed a programme of training to ensure they had the necessary skills to support people. Training records showed staff had completed training which included safeguarding adults, health and safety, first aid, Mental Capacity Act, infection control and manual handling.
- Staff were supported by management and there were arrangements for regular supervision. They told us they felt supported and regularly met with management to discuss any concerns or training needs. One care worker said, "The support is good. [The deputy manager] is excellent. [They are] approachable. I get quality support. I feel well supported."

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

- People were supported to eat and drink enough to meet their needs. Care workers prepared breakfast and, in some cases, staff were responsible for heating meals and assisting people where necessary.
- People's support plans contained information about their dietary needs and preferences. This included information about cultural, religious and preferred dietary needs.
- Care workers had completed food hygiene training, and this was confirmed by the nominated individual.

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

- People received the care and support they needed. Processes were in place to support people to access health care professionals where required to ensure they received the appropriate support where this was an assessed or identified need.
- Staff were able to give examples of how well they knew the person they supported which enabled them to observe changes in their health and access appropriate support.
- The person using the service received consistent care from regular care staff and this was confirmed by the person's relative.

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 MCA 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.

When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty.

- The service was currently not supporting anyone who was subject to a Court of Protection application in relation to the deprivation of their liberty.
- Where people were deemed not to have capacity to make decisions, the service worked closely with relatives and other advocates to ensure that any decision was made was in the person's best interests and supported them in the least restrictive way possible.
- Staff received training in understanding the MCA legislation and its implications for people. Training records confirmed this.
- The care plan we reviewed had clear information about the person's capacity to make decisions and how to support them with this.

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 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

- The service ensured people were treated with respect and with kindness and compassion. We received positive feedback about the caring attitude of care workers. One person's relative told us, "Care workers are helpful and caring. They take the time to read [my relative's] care plan. They always ask how [my relative] is."
- Care workers had developed a good relationship with the person they supported. This person's relative told us, "They do spend time talking to [my relative]. They are aware of [my relative's] needs."
- Systems were in place to make sure people were well treated and respected. This included ensuring that staff received appropriate training and monitoring the experience of people receiving care.
- People received a tailored, personalised level of care that was centred around their individual needs, wishes and preferences. Equality and diversity needs were documented in care plans.

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

- The service had processes in place to support and encourage the person they supported and their relatives to express their views and be fully involved in decisions about people's care. The person's relative told us, "We were very much involved in putting the care plan together."
- The nominated individual maintained regular contact with the person's relative through telephone calls and reviews of the person's care. He ensured they had opportunities to discuss and provide feedback about the care that the person received.

Respecting and promoting people's privacy, dignity and independence

- People were treated with dignity, respect and without discrimination and staff encouraged and respected people's independence.
- The person's care plan was personalised. It included detailed information about their care needs and preferences and guidance for staff to follow to ensure those needs were met.
- People's right to privacy and confidentiality was adhered to. People's personal information was kept in a secure way and in line with the law.

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 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

- Staff provided the person with personalised care that met their needs and wishes.
- We looked at the care support plan for the person receiving care from the service and noted that this was personalised and met the person's needs and preferences. The person's assessment and care plan showed that the service had obtained the information they needed from the person's relative and the commissioning local authority to ensure they received personalised care.
- The care support plan we looked at included a section titled 'about me'. This included detailed information about the person's experiences and highlighted important information about their life and interests.
- Systems were in place to ensure any changes to people's care needs and planning arrangements were promptly communicated to staff, so that people would continue to have the care they wanted and needed.

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- The person's communication needs were understood and supported by staff. This information was clearly documented in the person's care support plan. This included information about this person's preferred communication method.
- The nominated individual was aware of the importance of information being as accessible as possible to people and told us they always ensured information was always provided in a way people understood and needed, such as in large print or easy read format. We noted that policies were available in an easy read format.
- The service presented information in a way people understood. This helped ensure people were able to make appropriate choices based on options which had been presented to them in an accessible way. Staff told us when people could not always communicate verbally, they knew people well enough that they were able to communicate in other ways, such as by reading people's body language and facial expressions.

Improving care quality in response to complaints or concerns

- Systems were in place to support and provide people using the service and others, to make a complaint.
- There had not been any complaints about the service. The nominated individual told us that they would ensure that any future complaints would be responded to promptly and effectively and any lessons learnt

would be shared with staff.

- One person's relative told us that they would not hesitate to provide feedback to management. They said, "Nice to know that they [management] welcome feedback and act on it. They are responsive."
- Staff knew any complaints and concerns about the service that were brought to their attention by people, people's relatives or others needed to be recorded and promptly reported to management.

End of life care and support

- At the time of the inspection there was no one receiving end of life care. The nominated individual told us that before providing people with end of life care they would ensure staff received the training and support they needed to ensure people received personalised care at the end of their life.

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 good. This meant that the service was well 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; Continuous learning and improving care

- Audits and checks were carried out. These included checks on medicines management, punctuality and care plans. However, we noted that the audits carried out so far were limited in detail and did not clearly detail what was reviewed. Audits had not yet been embedded in practice. We raised this with the nominated individual who explained that they had only recently started providing care and was still in the process of formalising checks and audits. The nominated individual confirmed that the audits and checks would be developed further.

We recommend that the provider seeks advice from a reputable source about implementing and developing robust audit systems.

- Staff understood their role and responsibilities and were committed to deliver a high-quality service for people. Staff spoke positively about how the service was managed.
- The nominated individual understood their responsibilities to notify CQC and other relevant authorities of any incidents which took place that affected people who used the service.
- Staff received regular updates from the nominated individual; this included up to date guidance on the COVID-19 pandemic.

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

- The service had a positive culture that was person centred and inclusive which helped to ensure good outcomes for people were achieved.
- The nominated individual implemented a culture focused on person centred care and support underpinned by respect and independence. This ethos was promoted and shared amongst staff.
- Staff we spoke with told us they enjoyed working at the service and felt well supported. Care staff we spoke with knew the person they supported well and had a good understanding of their care needs.
- The nominated individual explained that he aimed for the service to grow gradually and responsibly so that they were able to continue having oversight of the running of the service.

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 nominated individual was aware of duty of candour expectations, including informing people about

any untoward incidents and knew the importance of being open and honest when something goes wrong.

- The nominated individual knew what type of events they needed to notify us and other organisations about.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- There were systems in place that encouraged and facilitated staff, people and those important to them to be fully involved in people's care.
- The nominated individual engaged with staff via staff meetings and supportive processes such as supervision and meetings.
- The nominated individual gained feedback about the service during telephone calls to the person's relative and took appropriate action where necessary.
- The nominated individual spoke about the importance of effective communication with health care professionals involved in the person's care. The service communicated and worked in partnership with external parties.