

Guinness Care and Support Limited

Guinness Care At Home Cornwall

Inspection report

VA215 Victoria Advent House , Station Approach
Victoria, Roche
St Austell
Cornwall
PL26 8LG

Tel: 01208816091

Date of inspection visit:
24 October 2016

Date of publication:
01 December 2016

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

We carried out this inspection 24 October 2016 and it was announced 48 hours in advance in accordance with the Care Quality Commission's current procedures for inspecting domiciliary care services. The service has not been inspected under the current registration.

Home Care Cornwall (part of the Guinness Care and Support group) is a domiciliary care agency that provides care and support to people in their own homes. The service provides help to people with physical disabilities and dementia care needs in St. Austell and surrounding areas. The service mainly provides personal care for people in short visits at key times of the day to help people get up in the morning, go to bed at night and support with meals.

At the time of our inspection 52 people were receiving a personal care service. The services were funded either privately or through Cornwall Council or NHS funding.

There was a registered manager in post at the service. A registered manager is a person who has registered with the Care Quality Commission to manage the service and has the legal responsibility for meeting the requirements of the law; as does the provider. 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.

At the time of the inspection the service employed, a registered manager, a team manager, two senior enablers, 23 enablers and an administrator. The registered manager told us Guinness Care and Support used the job title enabler because it underlined the importance of enabling people who use the service to be as independent as possible. We found that people referred to staff as care staff rather than enablers. For this reason we have referred to enablers as care staff and senior enablers as senior care staff throughout our report.

People received care and support from care staff they felt safe with. People were safe because care staff understood their role and responsibilities to keep them safe from harm. Care staff knew how to raise any safeguarding concerns. Risks were assessed and individual plans put in place to protect people from harm. There were enough skilled and experienced care staff to meet people's needs.

The provider carried out employment checks on care staff before they worked with people to assess their suitability. The service was effective because staff had been trained to meet people's needs. Staff received supervision and appraisal aimed at improving the care and support they provided. People were supported to maintain their independence. Staff understood their roles and responsibilities in supporting people to make their own choices and decisions.

People received a caring and compassionate service. Care staff took time to listen and talk to people, they were described as "absolutely wonderful" and "They are just so kind and genuinely really care. They take the time to get to know what is important to me and they remember events such as birthdays and what special

things are going on in my family". A relative of a person who received a service told us, "I've got nothing but admiration for the girls. It is a vocation for them. They really do care and they make so much difference to my [relative's] quality of life."

People were involved in planning the care and support they received. Staff protected people's confidentiality and need for privacy.

The service responded to people's needs and the care and support provided was personalised. Staff providing care and support were familiar to people and knew them well. The provider encouraged people to provide regular feedback on the service received. Results from the 2016 survey demonstrated over 95% customer satisfaction. The service made changes in response to people's views and opinions. People received a service that was well-led because the registered manager and other senior staff provided good leadership and management. The vision and values of the service were communicated and understood by staff.

Staff understood their roles and responsibilities. The quality of service people received was continually monitored and any areas needing improvement identified and addressed. Staff commented positively about the service, "I find them a great company to work for, I wake up every day and look forward to coming to work. I find our team very good at listening and that they are always open to new ideas" and "I feel fully supported and I am very pleased to be part of the Guinness team and very proud to work for the Guinness trust. I would not hesitate to recommend working as part of this team."

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.

People received care from staff they felt safe with. People were safe from harm because staff were aware of their responsibilities to report any concerns.

People were kept safe and risks were well managed.

Recruitment checks were carried out to ensure people received care from suitable staff.

Is the service effective?

Good ●

The service was effective.

People were cared for by staff who had received sufficient training to meet their individual needs.

The registered manager had a good understanding of the Mental Capacity Act 2005 (MCA).

People were cared for by staff who received regular and effective support and supervision

Is the service caring?

Good ●

The service was caring.

People received care and support from staff who were caring and compassionate and who were described as having a 'vocation'.

Staff provided the care and support people needed and treated people with dignity and respect.

People's views were actively sought and they were involved in making decisions about their care and support.

Is the service responsive?

Good ●

The service was responsive.

People's needs were at the centre of the service provided with staff knowing each person's likes and dislikes.

The service made changes to people's care and support in response to requests and feedback received.

The service listened to comments and complaints and made changes as a result.

Is the service well-led?

Good ●

The service was well led.

The vision and values of the service were clearly communicated and understood by staff.

The registered manager and provider were well respected and provided effective leadership.

Quality monitoring systems were used to further improve the service provided.

Guinness Care At Home Cornwall

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.

The announced inspection took place on 24 October 2016. The inspection was carried out by one adult social care inspector. We told the service 48 hours before that we would be coming. This was in accordance with the Care Quality Commission current procedures for inspecting domiciliary care services.

Before the inspection we reviewed the information we held about the service. This included past reports and notifications. A notification is information about important events which the service is required to send us by law. We reviewed the Provider Information Record (PIR). The PIR was information given to us by the provider. This is a form that asks the provider to give some key information about the service, tells us what the service does well and the improvements they plan to make.

The provider asked people if they were willing to speak to us prior to our visit. During the inspection we visited two people in their own homes. We spoke to these people about the service they received. We talked with a further eight people who received as service from Home Care Cornwall and three relatives by telephone. We talked with two members of care staff, the team manager and the registered manager.

We looked at the care records of four people, the recruitment and personnel records of four staff, training records for all staff, staff duty rotas and other records relating to the management of the service. We looked at a range of policies and procedures including, safeguarding, whistleblowing, complaints, mental capacity, recruitment, confidentiality, accidents and incidents and equality and diversity.

Is the service safe?

Our findings

People told us they felt safe. Comments included, "I feel safe because they look after me very well. They always make sure to let themselves in safely and lock up properly when they leave. They take time to do a good job and make sure I am satisfied" Another person said, "I feel very safe, all my carers knows me well and I feel safe when they are here". A third person told us, "I feel very safe with my carer because they have been doing the job for many years now and I wouldn't change them for the world."

Care was provided at the time identified in people's care records. This was important to people and contributed to them feeling safe and secure. One person said, "I get my rota on the weekend before and it tells me when the carers are coming and I'd say 95% of the time they arrive at that time". Another person said, "They have a system that means they check in when they arrive, so the company know if someone has been to see me. If there is a delay someone will usually call me to say so but it's a rare occurrence."

We saw daily records which showed that staff arrived within five minutes of their scheduled time. Staff said they always tried to contact people if they were going to be late. They said they tried to avoid being late arriving at people's homes but found that at times it was unavoidable due to traffic or unforeseen events. Care staff had all been provided with mobile phones which were programmed with details of their calls and contact details for each person.

Staff knew how to keep people safe and how to recognise different types of abuse and what action to take if abuse was suspected. Staff were able to give us examples of the sort of things that may give rise to concerns of abuse. There was a safeguarding procedure for staff to follow with contact information for the local authority safeguarding team. The staff knew about 'whistle blowing' to alert senior management about poor practice. Of the people who responded to customer satisfaction questionnaires, 100% said they felt safe from abuse or harm by care staff.

A range of risk assessments were in place. These covered areas of daily living and activities the person took part in, encouraging them to be as independent as possible. For example, we saw one person had a risk assessment highlighting the importance of not moving things in their home. This was because their eye sight was extremely limited and it was vital to them to maintain as much independence around their home as they could, so maintaining consistency in their home environment was important to preventing accidents. Risk assessments were also in place for assistance with moving and handling people. Staff told us they had access to risk assessments in people's care records and ensured they used them. Each person's care records contained an environmental risk assessment. This showed the provider had considered factors to keep people safe within their homes. For example risks that might result in a fall, such as, uneven flooring or ill-fitting rugs. The provider investigated accidents and incidents. This included looking at why the incident had occurred and identifying any action that could be taken to keep people safe.

People were protected from the recruitment of unsuitable staff. Recruitment records contained the relevant checks. These checks included a Disclosure and Barring Service (DBS) check. A DBS check allows employers to check whether the applicant has any past convictions that may prevent them from working with

vulnerable people.

References were obtained from previous employers. Recruitment procedures were understood and followed by staff; this meant people using the service were not put at unnecessary risk.

People were supported by sufficient staff with the appropriate skills, experience and knowledge to meet their needs. People told us they received care and support from staff they knew. People told us they were happy with the staff providing care and support. One person said, "I have the same group of carers who provide my care most of the time. They know me and my needs and I don't have to keep telling them things." Another person said, "I have had the same carers and I'm very happy with them. They never let me down and they are all a ray of sunshine."

There were clear policies and procedures for the safe handling and administration of medicines. Medication administration records demonstrated people's medicines were being managed safely. Where staff administered medicines to people they had signed to record they had been given. People received their medicines as prescribed. Staff administering medicines had been trained to do so.

Staff told us they had access to equipment they needed to prevent and control infection. They said this included protective gloves and aprons. The provider had an infection prevention and control policy. Staff had received training in infection control. We saw staff used appropriate protective equipment and staff said they could always get supplies of gloves and aprons from the office when required.

Is the service effective?

Our findings

People received care from staff who knew them well, and had the knowledge and skills to meet their needs. Comments from people and their relatives included, "They do a good job. No complaints"; "staff are lovely and know what they are doing" and, "We are very happy with Guinness."

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. We checked whether the service was working within the principles of the MCA.

Management had an understanding of the Mental Capacity Act 2005 and how to make sure people who did not have the mental capacity to make particular decisions for themselves, had their legal rights protected.

Staff applied the principles of the MCA in the way they cared for people and told us they always assumed people had mental capacity to make their own decisions. Discussions with staff confirmed that they knew the type of decisions each individual person could make and when they may need support to make decisions.

Training records showed the provider ensured staff received a range of training to meet people's needs. Training provided to staff included e-learning packages and face to face training and covered a range of topics. Staff told us they had received training to meet people's needs. One staff member said, "I feel that I am adequately trained in my job and competent regarding all aspects of my work. Any areas where my training is required to be refreshed, I have attended all refresher training. I am always put on any extra training if it is required in my job role, for instance, I have also been required to undertake peg and pump training on two separate occasions to attend to two different customers." This is specialist training about how to manage and use a feeding tube inserted into the stomach. Another staff member said, "Training is very good. I feel fully supported and I am very pleased to be part of the Guinness team and proud to work for the Guinness trust. I would not hesitate to recommend working as part of this team."

Newly appointed staff completed comprehensive induction training. The service had introduced a new induction programme in line with the Care Certificate framework which replaced the Common Induction Standards with effect from 1 April 2015. New employees were required to go through an induction which included training identified as necessary for the service, and familiarisation with the service's policies and procedures. There was also a period of working alongside more experienced staff until such a time as the worker felt confident to work with people unsupported.

The registered manager told us that staff were supported to complete health and social care diploma training. Training records showed most staff either held or were working towards their diploma.

Supervisions and spot checks were being used to improve performance. Staff records showed that

supervision was held regularly with staff. Staff told us they found supervision helpful. One of the care staff said, "We receive regular supervision and it provides a space to talk about your work and think of areas you might need to develop." Staff also received an annual appraisal. This meant staff had a formalised opportunity to discuss their performance and identify any further training they required. People had been involved in drawing up their plans of care and had signed to give consent to the care they received. One person told us, "I discussed what I needed at the start and we signed some paperwork which gets looked at quite regularly to make sure I'm happy with the package."

People's dietary needs were planned for as part of the care planning process. Care records showed that people's needs around their food and drink had been discussed and agreed with them. We saw staff checked people were happy with their choice of foods and when one person told staff they no longer enjoyed a certain range of foods, this was recorded in daily records for the person's relative to read and reported immediately back to the office. This meant the service understood people's preferences could change and were responsive to making sure changes were made quickly to meet people's needs.

Health and social care professionals were consulted and their advice taken. One healthcare professional told us, "Everyone we have worked with who have used Guinness have been very happy with them. The manager and staff ask for and listen to advice and carry out instructions" and "Professionally I have no issue with them at all. They have been reliable and as far as I know are providing good quality care to meet people's needs." Records showed that care staff ensured people had access to health care professionals when needed. One person said, "I needed to see my GP recently and I was able to get a carer to assist me. If there's anything at all that concerns me, they are straight on it."

Is the service caring?

Our findings

People told us staff were caring. Comments included, "They are absolutely wonderful", "They are just so kind and genuinely really care. They take the time to get to know what is important to me and they remember events such as birthdays and what special things are going on in my family". A relative of a person who received a service told us, "I've got nothing but admiration for the girls. It is a vocation for them. They really do care and they make so much difference to my [relative's] quality of life."

Care staff told us they felt it was important to make sure they had time to talk with people. We saw that staff took time to chat with people and share their day with a laugh and a joke. One relative told us, "They make time to listen to [relative] and they never make [relative] feel rushed". Another relative said, "Guinness are outstanding in the compassion and care they provide. I can't praise them enough. We've used other agencies and I know the difference."

Staff spoke positively about the support they received in order to be able to deliver high quality care. One staff member said, "Guinness as an organisation are very supportive to staff in encouraging us to spend quality time with people. It is a very safe and caring service; so much so that I would like my partners Grandmother to receive care from Guinness as I feel she would get the care she deserves and know she would be very safe in their care."

Of the people using the service who responded to a customer satisfaction survey 100% agreed they received a caring service, with 75% strongly agreeing with this. People received care, as much as possible, from the same familiar care staff. A relative we spoke to said, "All the staff are lovely with [relative]. I can't praise them enough and I hope to use them myself when I need care coming in." We were told of instances when the service had responded positively to people's increased care needs. For example, one person required an additional call due to deteriorating health concerns and this was arranged. A relative told us, "They ring me immediately if they are not happy with [relative's] health. I have full confidence in them. Nothing seems too much trouble, even when [relative] was ill. They put themselves out for you."

People were involved in planning their care and support. The service provided to people was based on their individual needs. Senior staff told us they took people's wishes and needs into account and tried to be as flexible as possible in accommodating any changes to visit times. When planning the service the provider took account of the support the person required, the preferred time for calls and where possible the care staff they liked to be supported by. One person told us they had requested a change of carer for personal reasons and this had been arranged immediately. The views of the person receiving the service were respected and acted on.

Senior staff said they matched the skills and characteristics of care staff to the person. Where appropriate family, friends or other representatives advocate on behalf of the person using the service and were involved in planning care delivery arrangements. One person told us, "I was very much part of my assessment as was my daughter and all reviews are done with my knowledge and agreement." Another person told us, "I liked them so much that when my council funded package came to an end I asked them to stay on privately. I

wouldn't change. They meet all my needs and put a smile on my face. They are like family to me now."

Staff respected people's privacy and maintained their dignity. Staff told us they gave people privacy to undertake aspects of their personal care but ensured they were close if help was needed. One person told us "They are very respectful in the way they approach coming into our home to provide care. My carers understand my needs because they have got to know me as a person." Another person told us "I look forward to hearing them arrive; bright and breezy."

People told us they were supported to be as independent as possible. We noted there were clear guidelines in people's care plans to assist staff in supporting people's independence. For example, in one plan it was stated that the person preferred limited personal care support and would ask for additional help when they wanted it. Staff told us about people's preferences and showed good understanding of when to assist and when to encourage people's independence skills. For example, one person preferred staff not to wash their dishes after lunch because this was something they preferred to do themselves after the carer had left. This was an accepted part of daily routine and we saw the person and carer enjoyed some social time together which was clearly valued by the person.

Every person we spoke with from people who used the service, relatives, external professionals and staff all told us they would recommend the service to others. Comments included, "I can't recommend them enough. They are very good indeed" and "I have recommended them many times to friends and family."

Throughout our inspection we were struck by the caring and compassionate approach of staff. We heard managers and senior staff answering the telephone to people using the service, relatives, staff and other professionals. They spoke to people in a clear, respectful and caring manner and ensured people's needs came first. We also heard senior staff discussing people's needs assessments and reviews and were struck by just how much individualised thought went into considering the welfare of each and every person, including their emotional state and things that might worry them.

All staff were enthusiastic about their roles and spoke positively about the people they cared for. One member of care staff said, "'I believe that this service is very caring. We respect one another, as well as our customers, and we are dedicated to all that we do.'" Another staff member said, "I came into this work from a completely different background and it is the best decision I ever made. I just wish I had done it years ago. Providing much needed care to people is very rewarding and every single person we go to are absolutely lovely."

Both the registered manager and team manager continued to cover shifts as carers and told us they benefited from this because it meant they had a good understanding of all of the clients who used the service. People also clearly knew and trusted management and senior staff because they had met them in person and told us they trusted that if there were any issues management would sort things out.

Is the service responsive?

Our findings

People said the service was responsive to their needs. One relative said, "On occasion I have had to ask for extra help for [relative] and 90% of the time they will. It's a rare occurrence or very short notice when they've not been able to." Another person said, "They listen to me and do things the way I want." Care staff said the service was responsive to people's needs, comments included, "We are here for the people we support not the other way around. So, wherever possible we accommodate people's requests."

People said they made choices and decisions regarding their care and support. One person said, "I know what is in my plan because I helped make it and I'm part of the reviews on it." One person told us the care package they had originally had decreased, with their agreement, because they no longer needed so much support.

Care records were held at the agency office with a copy available in people's homes. We viewed the care records of the people we visited. People's needs were assessed and care plans completed to meet their needs. Staff said the care plans held in people's homes contained the information needed to provide care and support. They said the registered manager and senior care staff took care to ensure any updated information was placed in care records in people's homes and at the office.

Care records were person centred and included information on people's likes, dislikes, hobbies and interests. Staff told us this information meant they could get to know the person they were caring for. Staff said communication between staff about changes to people's needs was good. One staff member told us, "There is always excellent communication between Guinness and the carers, be it either with an email, text message or phone call to make all aware of any issues they may have arisen or changes that may have occurred."

The service provided was person centred and based on care plans agreed with people. Some people received assistance with personal care only, others with accessing their local communities and taking part in social activities. One person was supported to go shopping, other people had support to visit them and help prevent against social isolation, while others needed support with cooking meals and personal care. People said they felt able to raise any concerns they had with staff and that these were listened to.

One person told us "I know who to talk to if I need to but to be honest they ask if everything's ok so often that I've never need to!" Another person told us "I have never had a reason to complain. In fact someone calls me regularly to check I'm happy and iron out any issues." Relatives told us they knew how to complain and were confident their concerns would be addressed.

Is the service well-led?

Our findings

Throughout our inspection we found the registered manager and team manager demonstrated a commitment to providing effective leadership and management. They were keen to ensure a high quality service was provided, care staff were well supported and managed and the service promoted in the best possible light.

People told us they were cared for in a person centred manner. People received good care and support when they wanted it and were encouraged to be as independent as possible. Comments included, "Really and truly everything is fine. They look after me very well and their timing is good because overall I think it's well managed. That's certainly been my experience." A second person said, "I couldn't fault anything about them. They're very supportive. I can get [registered manager] when I need to discuss anything. She is so switched on. The dedication they give is 100%". This showed the vision and values of the service was being put into practice.

Staff we spoke to understood their roles and responsibilities. Staff spoke positively about the leadership and management of the service. Comments included, "I find them a great company to work for, I wake up every day and look forward to coming to work. I find our team very good at listening and that they are always open to new ideas." Another staff member said, "I feel fully supported and I am very pleased to be part of the Guinness team and very proud to work for the Guinness trust. I would not hesitate to recommend working as part of this team." A third staff member commented, "I feel that they are an outstanding company to work for. They always want to know if there's anything they can do to help us or to make things better. They are always progressing with training and they really care for their staff as well as their clients".

People who used the service, as well as relatives and professionals familiar with the service all commented positively about management describing it as 'flexible', 'accommodating', 'reliable' and 'professional'. Staff described the management team as approachable and told us management could be contacted for advice at any time. One staff member said, "We can always contact a senior member of staff". The registered manager told us the service operated a 24 hour on call service, for staff to contact a senior person.

Regular staff meetings were held to keep staff up to date with changes and developments. We looked at the minutes of previous meetings and saw a range of areas were discussed including the results of quality audits. Staff told us they found these meetings useful.

The registered manager knew when notification forms had to be submitted to CQC. These notifications inform CQC of events happening in the service. CQC had received appropriate notifications from the service. Accidents, incidents and complaints or safeguarding alerts were reported by the service. The manager investigated accidents, incidents and complaints. This meant the service was able to learn from such events. The policies and procedures we looked at were regularly reviewed. Staff we spoke to knew how to access these policies and procedures. This meant clear advice and guidance was available to staff.

Systems were in place to check on the standards within the service. These included a monthly care quality

audit, an annual quality audit and an annual customer satisfaction survey. The most recent monthly audit had been completed by a senior manager with responsibility for completing these checks. The audit was thorough and asked the five key questions of; is it safe, is it effective, is it caring, is it responsive and is it well-led. The audit report identified actions to be taken and we saw these had either been completed or were in the process of being rectified. For example, the need for better communication regarding invoicing for services. The registered manager explained how they had supported the person to rectify this issue.

The annual quality audit had been completed in April 2016 and covered the previous 12 months. This had also been carried out by a senior manager from elsewhere in the organisation. The report was very positive and identified many areas of good practice. The registered manager told us the findings of these audits and other feedback they received were included in a service development plan which they used to guide the direction of the service.

In addition the organisation had begun to trial the use of customer champions. This was a voluntary role that required a person who themselves used a Guinness service in another part of the country, to be involved in contacting people who used the service in Cornwall. The aim of this was to provide someone impartial to seek honest feedback about how people experienced the service in Cornwall and was carried out in March 2016. We reviewed the results of this and saw people had been positive about all aspects of the service. Comments to the champion included, "Brilliant; could not ask for better care. There are no angels in heaven because they are all working or Guinness Care and Support in Cornwall."

The organisation had introduced an annual 'Star Awards' scheme to recognise good practice and motivate staff. In 2016 one staff member from the Cornwall team had been nominated as 'carer of the year' and made it to the final of the awards. The registered manager told us the amount of pride the whole team had taken in their colleague making it to the final three in this award. This meant the organisation recognised and valued training and retaining good quality staff.