

## XTRA HEALTHCARE LIMITED

# Xtra Healthcare

### Inspection report

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04 July 2023  
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17 July 2023

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### Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

# Summary of findings

## Overall summary

### About the service

Xtra Healthcare is a domiciliary care and supported living service providing care to people in their own homes. At the time of the inspection the service was primarily providing support to people with learning disabilities and autism in supported living. 14 people were being supported at the time of the inspection.

Not everyone who used the service received personal care. 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 and what we found

We expect health and social care providers to guarantee autistic people and people with a learning disability the choices, dignity, independence and good access to local communities that most people take for granted. Right Support, right care, right culture is the statutory guidance which supports CQC to make assessments and judgements about services providing support to people with a learning disability and/or autistic people.

Based on our review of Safe and Well-led, the service was able to demonstrate how they were meeting the underpinning principles of Right support, right care, right culture.

Right support: People were supported to achieved good outcomes. There were clear communication systems within the service to support this.

Personalised risk assessments gave clear strategies for staff to follow in keeping people safe, whilst enabling people to be as independent as possible. Staff were skilled in recognising signs when people experienced emotional distress and knew how to support people to keep them safe.

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.

Right care: The care and support people received was tailored to their individual needs. Staff treated people with dignity and respect and promoted their right to privacy.

Right culture: The culture within the service empowered people who used the service. The staff team promoted inclusive practices which supported people to live a full life. Their rights and aspirations were promoted.

The management team had the specialist skills, knowledge and experience to perform their roles and had a clear understanding of people's needs. Systems and processes were in place to monitor the quality and

performance of the service.

There was good communication between, staff, management, people and families. People and staff were listened to and encouraged to give their feedback about the service. The provider was committed to driving improvement and provide the best care and outcomes for people.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

Rating at last inspection: The last rating for this service was good (published 2 April 2021).

#### Why we inspected

We received concerns in relation to staff recruitment, staff skills and training and oversight of the service. As a result, we undertook a focused inspection to review the key questions of safe and well-led only.

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

The overall rating for the service has remained good. This is based on the findings at this inspection.

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

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Xtra Healthcare on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

#### Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

## The five questions we ask about services and what we found

We always ask the following five questions of services.

### **Is the service safe?**

**Good** ●

The service was safe.

Details are in our safe findings below.

### **Is the service well-led?**

**Good** ●

The service was well-led.

Details are in our well-led findings below.

# Xtra Healthcare

## Detailed findings

### Background to this inspection

#### The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Care Act 2014.

#### Inspection team

This inspection was undertaken by 2 inspectors.

#### Service and service type

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

#### Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

#### Notice of inspection

We gave the service 24 hours' notice of the inspection. This was because we needed to be sure the provider or registered manager would be in the office to support the inspection.

Inspection activity started on 4 July 2023 and ended on 17 July 2023. We visited the office location on 4 July and visited a supported living site on 10 July.

### What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all of this information to plan our inspection.

### During the inspection-

We spoke with 3 people and observed 1 person who used the service who could not easily communicate with us and 2 people's relatives to gain an understanding of people's experience of the service. We spoke with 11 members of staff including 10 care workers, care manager and the nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider. We reviewed a range of records which included 5 care plans, 4 staff recruitment files and a variety of records relating to the management of the service, including policies and procedures and training documents.

# Is the service safe?

## Our findings

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

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

### Staffing and recruitment

- People were safeguarded against the risk of being supported by unsuitable staff because there were appropriate recruitment practices in place. Staff were checked for any criminal convictions and satisfactory employment references were obtained before they started to work for the service.
- There were enough suitably qualified, experienced and skilled staff to provide people with safe care and support. All staff had undertaken specialist training in relation to learning disabilities and autism. The training was refreshed regularly.
- At the time of the inspection the provider was changing staff working patterns to ensure staff had appropriate breaks. This was to ensure people were cared for safely by staff who were able to respond timely and effectively to their needs. The provider was following appropriate employment processes to do this.
- People told us they felt safe with the staff who supported them. Relatives confirmed they were happy with the staff and their family member was cared for safely.

### Systems and processes to safeguard people from the risk of abuse

- People were cared for safely and were protected from the risk of harm. Staff knew what signs to look for to keep people safe. One staff member said, "In an emergency I would contact the police, if not an emergency I would follow our procedures and report it."
- Staff received safeguarding training and knew how to recognise and report any concerns of abuse. There were up to date procedures and information available to support them.
- The registered manager and nominated individual understood their responsibilities to keep people safe and had notified the relevant authorities when any safeguarding issues had arisen.

### Assessing risk, safety monitoring and management

- Risks to people's health and well-being had been identified and plans were in place to mitigate the risk. This meant people lived safely and free from unwarranted restrictions.
- Staff had the knowledge and skill to recognise signs when people experienced emotional distress and knew how to support people to keep them safe. One staff member described the noises and signs a person made to indicate they were not happy or needed something.
- People had personalised plans in relation to their safety and support needs when in the service or out in the community. People had easy read guides available to support them to stay safe. Any triggers for anxiety or stress had been identified, and the plans contained personalised signs or symbols to enable staff to communicate with people in the most effective way for them.

### Using medicines safely

- People were supported by staff who followed systems and processes to administer, record and store medicines safely.
- People received their medicines at the times they were prescribed or when they needed them.
- Staff were trained or assessed as competent to support people with their medicines.
- Systems were in place to monitor and audit the administration of medicines.

### Preventing and controlling infection

- The service used effective infection, prevention and control measures to keep people safe, and staff supported people to follow them.
- Staff used personal protective equipment (PPE) effectively and safely.
- The provider had an up-to-date infection, prevention and control policy in place.

### Learning lessons when things go wrong

- Lessons were learnt when things went wrong, and the provider used the opportunity to reflect and look at ways to improve the service. For example, following a complaint involving money going missing from a person's house the provider reviewed financial practices and put new systems in place to mitigate any risk of the situation arising again.

# Is the service well-led?

## Our findings

Well-led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- People were at the heart of everything the service did. Management and staff were focussed on providing individualised care and achieving good outcomes for people. People's care plans were person-centred and people were encouraged and supported to live a fulfilled life as possible.
- The majority of staff felt supported and able to raise any issues of concerns they may have without fear of what might happen as a result. The provider was working with staff who had recently transferred into the service to enable them to settle in and work within safe working practices.
- The provider worked closely with the management team and staff to ensure people's individual needs were being met. One relative said, "[Nominated individual] is brilliant, they told me if I had any concerns, I could go directly to them."

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 provider understood their responsibility under the duty of candour. The duty of candour requires providers to be open and honest with people when things go wrong with their care, giving people support and truthful information.
- The registered manager understood information sharing requirements, and knew when concerns had been identified, appropriate notifications should be sent to the CQC and the local authority as required by law.
- Staff told us there was information available about how to whistle-blow and we saw procedures in place. This ensured staff knew how to raise concerns with the local authority and the CQC if they felt they were not being listened to or their concerns were not acted upon.

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

- Systems and processes were in place to monitor the quality and performance of the service. Audits of records were undertaken, and action taken if shortfalls were found.
- Staff were clear about their roles and responsibilities towards the people they supported and felt supported in their role. They had regular supervisions, which ensured they provided the care and support at the standard required.
- The provider was aware of unhappiness amongst newly transferred staff and was actively trying to address and resolve the issues.

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

- People and families were contacted regularly for their feedback. One relative said, "The company is very professional, they listen to you, meet if needed, communication is good. [Loved-one] needs time to express themselves, [Nominated individual], gives them the time, they are very patient."
- Staff were encouraged to give their feedback. Most felt listened to, one said, "We can make suggestions and they are listened to. When I raised an issue about someone's clothing this was acted upon."
- 'Spot checks' were in place and used as an opportunity, in addition to observing staff practice, to gain feedback from both the person using the service and staff.

Continuous learning and improving care; Working in partnership with others

- The provider worked with the local authority commissioners and other health and social care professionals.
- Staff supported people to access their GP regularly and when needed, other health professionals such as dentist and district nurse.
- The provider was committed to developing and improving the service to enhance people's lives. Staff training was up to date and specialist training was provided.