

Celtic Care Services Limited

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Inspection report

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17 February 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

Celtic Care is a domiciliary care agency providing personal care to people in their own home. At the time of our inspection there were 22 people using the service.

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

People felt safe receiving care from staff. The provider had taken action to keep people safe and manage the risks they faced. People told us staff had the right skills and experience and arrived on time to provide care.

Staff had a good understanding of the support people needed. Staff supported people to do as much for themselves as possible and maintain their independence. People's needs were set out in clear care plans, which had been reviewed regularly.

People were supported to take medicines safely and staff sought advice from health and social care services when necessary.

The provider had good infection prevention and control measures in place. People told us staff always wore the correct personal protective equipment (PPE) when providing care for them.

People said they found the service to be well managed and they had regular contact with the management team. People were confident action would be taken to resolve any problems they had.

The provider had good systems to monitor the quality of service provided and make improvements where needed. The registered manager worked with people, staff and other professionals to ensure people achieved good outcomes.

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

Rating at last inspection

The last rating for this service was good (published 3 November 2017)

Why we inspected

This inspection was prompted by a review of the information we held about this service.

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 well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

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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 was completed by 1 inspector.

Service and service type

This service is a domiciliary care agency. It provides personal care to people living in their own homes.

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 48 hours' notice of the inspection. This was because we needed to be sure that the provider or registered manager would be in the office to support the inspection.

Inspection activity started on 17 February 2023 and ended on 2 March 2023. We visited the office location on 17 February 2023.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We used the information the provider sent us in the provider information return (PIR). This is information providers are

required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all of this information to plan our inspection.

During the inspection

We spoke with 3 people who used the service, 3 relatives, the registered manager and 6 care staff. We reviewed a range of records. This included 5 people's care and medication records. We looked at 2 staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service were reviewed. We received feedback from an occupational therapist, 2 social workers, a solicitor and a trainer who have worked with the service.

Is the service safe?

Our findings

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

The rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People and their relatives told us they felt safe receiving care. Comments included, "I feel very safe. I have perfect trust in [staff]" and "I feel very safe with [staff], they are wonderful."
- The service had effective safeguarding systems in place. Staff had a good understanding of what to do to make sure people were protected from harm. Staff were confident the management team would take action to keep people safe if they raised any allegations of abuse.
- The provider had worked with the local authority safeguarding team when concerns had been raised. Action had been taken to keep people safe.

Assessing risk, safety monitoring and management

- Risk assessments were in place to support people to be as independent as possible. They balanced protecting people with supporting them to maintain their independence. Examples included support for people to manage the risks relating to skin breakdown, mobility and to maintain a safe environment.
- Risk assessments and management plans had been reviewed and updated as people's needs changed. People and their representatives had been involved in these reviews.
- Staff demonstrated a good understanding of the risk management plans and the actions they needed to take to keep people safe.

Staffing and recruitment

- Effective recruitment procedures ensured people were supported by staff with the appropriate experience and character. The provider had thoroughly checked new staff before they started work, including confirmation of their right to work in the UK.
- People told us staff had the right skills and experience to provide the care they needed. Comments included, "They have had the right training and know what they're doing. I give them guidance about how to do things specifically the first time they come, but they always follow that for their subsequent visits" and "Staff have the right skills. They are very professional."
- People told us staff usually arrived on time and stayed for the full duration of their call. People said they received a phone call if their carer was running more than a few minutes late.

Using medicines safely

- People were supported to safely take the medicines they were prescribed. The support people needed was regularly reviewed to ensure people were as independent as possible.
- Medicines administration records had been fully completed. These gave details of the medicines people had been supported to take.

- People and their relatives told us staff provided good support for them to take their medicines at the right time. Comments included, "Yes, they always help with the medicine. They know what they're doing. I get the right medicines at the right time."

Preventing and controlling infection

- The service had systems in place to prevent people from catching and spreading infections. People told us staff followed these measures when providing care for them.
- Staff had received training on infection prevention and control measures and how to use personal protective equipment (PPE) safely.

Learning lessons when things go wrong

- Systems were in place for staff to report accidents and incidents. Staff were aware of these and their responsibilities to report such events.
- Accidents and incidents were reviewed by the management team to ensure appropriate actions had been taken. Action was taken to reduce the risk of similar incidents happening 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.

The rating for this key question has remained good. This meant 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; Continuous learning and improving care

- There was a registered manager in post, who had provided consistent leadership of the service.
- The provider had effective quality assurance systems in place. These included, reviews of records, quality satisfaction surveys and observations of staff practice.
- The results of the various quality assurance checks were used to plan improvements to the service. Actions were regularly reviewed to ensure they had been completed.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; 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 registered manager had promoted a person-centred approach in the service. This was evidenced through people's feedback, the content of staff meetings, support sessions for staff and the training staff received.
- Staff reported the registered manager was supportive and focused on ensuring people received a good service. Comments included "I feel the management team have a good understanding of what is happening in the service. They get regular feedback from people and action is taken on the back of the feedback they receive."
- The registered manager had a good understanding of their responsibilities under the duty of candour.

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

- The service involved people and their representatives effectively in a meaningful way. People said they had regular contact with the registered manager and could discuss any issues about the service. Comments included, "I could speak to [the registered manager] if there were any concerns. I'm confident they would sort out any issues."
- The provider had worked with various health and social care professionals to ensure people continued to receive a safe service. Feedback from professionals included, "The [managers] have a good understanding of difficulties that carers are facing with each customer and are very responsive with regards to problem solving. Managers will actively seek out input to resolve concerns."
- The registered manager had kept up to date with changes in legislation and good practice guidance.