

Advantage Healthcare Limited

# Advantage Healthcare - Tees Valley

## Inspection report

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## Ratings

Overall rating for this service

Good ●

Is the service responsive?

Good ●

Is the service well-led?

Good ●

# Summary of findings

## Overall summary

### About the service

Advantage Healthcare – Tees Valley is a domiciliary care agency. The service provides personal and nursing care to children, young people and adults living in their own houses and flats in the community. At the time of our inspection 17 people were using the service.

### 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. We considered this guidance as there were people using the service who have a learning disability and or who are autistic.

**Right Support:** Staff supported people to be fully inclusive in society. Care plans were detailed to support staff in delivering care and support safely. Information from external healthcare professionals was used to create risk assessments and care plans. Staff supported people to access external healthcare professionals when needed. The provider gathered information about people's communication needs.

**Right Care:** People received person-centred care. Staff worked with people to achieve their set goals. The provider promoted a positive, person-centred culture. The registered manager and staff put people's needs and wishes at the heart of everything they did. The provider had systems in place to ensure people were protected from the risk of abuse and harm. Environmental and individual risks were identified and managed.

**Right Culture:** People were encouraged to take control of all aspects of their lives, including education, shopping and looking after their homes. The registered manager and nursing team were passionate about providing quality care. The provider had a strong oversight of the service. The registered manager critically reviewed the service to determine how further improvements could be made.

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 and update

The last rating for this service was requires improvement (published 20 July 2017).

### Why we inspected

This inspection was prompted by a review of the information we held about this service. We undertook this focused inspection to see if the service had improved from requires improvement to good. This report only covers our findings in relation to the key questions of Responsive and Well-led.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating. The overall rating for the service has changed from requires improvement to good. This is based on the findings at this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Advantage Healthcare – Tees Valley 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, 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 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.

# Advantage Healthcare - Tees Valley

## **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

One inspector carried out this inspection.

#### Service and service type

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

#### 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 it is a small service and we needed to be sure that the provider or registered manager would be in the office to support the inspection.

#### What we did before the inspection

We reviewed information we had received about the home 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 (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 this information to plan our inspection.

#### During the inspection

We spoke with 2 people who used the service and 1 relative about their experience of the care provided. We spoke with 9 members of staff including the registered manager, 2 nurses, and 6 care staff. We sought feedback from external healthcare professionals.

We looked at the care records of 4 people, other records related to the management of the service.

#### After the inspection

We continued to seek clarification from the registered manager to validate evidence found.

# Is the service responsive?

## Our findings

Responsive – this means we looked for evidence that the service met people's needs.

At the last inspection this key question was rated as requires improvement. At this inspection this key question has changed to 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

- People received person centred care. Staff worked with people to achieve their set goal. An external healthcare professional told us how staff had encouraged and supported a person to engage with personal care which they had previously declined.
- Care plans were detailed and contained illustrations to support staff in delivering care and support safely. The provider completed regular reviews of people's care records. Information from external healthcare professionals was used to create risk assessments and care plans.
- The provider had systems to support staff and people to create personalised profiles. These were used to support in the allocation of staff.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- Staff encouraged people to be fully inclusive in society. People were supported to participate in a range of activities including completing education. One relative gave positive feedback to the service and said, "Felt so proud today that [person] had a full day at nursery playing with all their friends."
- Staff supported people to develop life skills. People were encouraged to take control of all aspects of their lives, including shopping and looking after their homes.

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 provider gathered information about people's communication needs. Staff had designed and created a person specific pictorial guide to support a person to communicate their needs.

Improving care quality in response to complaints or concerns

- The provider had a complaints process in place, to ensure complaints were acknowledged, investigated and responded to. Relatives we spoke with told us they had no complaints.

End of life care and support

- At the time of our inspection no one was receiving end of life care. Staff had completed end of life training.

The registered manager told us people were offered opportunities to discuss their preferences for end of life care.



# 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 our last inspection we rated this key question requires improvement. At this inspection the rating has changed to good. 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

- The provider promoted a positive, person-centred culture. The registered manager and staff put people's needs and wishes at the heart of everything they did.
- The registered manager and nursing team were passionate about providing quality care. Their professionalism had been recognised with nominations in recent health and social care awards. These included the social care nurse award, the women achieving greatness in social care awards and most compassionate complex care provider - North East England.
- Staff were very positive about the leadership in the service and they told us they were supported by the management, fully informed and felt valued.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; 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 had a strong oversight of the service. The registered manager critically reviewed the service to determine how further improvements could be made.
- The registered manager had submitted the required statutory notifications to CQC following significant events at the service.
- The provider and manager understood their duty of candour. The service demonstrated an open and transparent culture.

Continuous learning and improving care; Working in partnership with others

- The provider had systems in place to analyse information and drive improvement. Information was captured from all the provider's services and lessons learnt were cascaded to all services.
- The service had developed partnerships with health and social care professionals involved in supporting people. This included sourcing specific training around people's needs and supporting families and people in discussions about their care.
- The provider conducted regular competency spot checks, ensuring staff remained at the required standard.

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

- People, relatives and staff were encouraged to give feedback about the service. External healthcare professionals we contacted gave positive feedback and praised the work of staff.

- Staff had opportunities to express their opinions in supervisions and team meetings. Staff told us they were listen to.