

Salvere Support Ltd

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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

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

About the service

Salvere Support Ltd provides home care services enabling people to be cared for while living in their own homes. The service has a registered office in Preston and provides care and support across the country. At the time of this inspection 41 people were receiving regulated personal care and support from 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.

The service is different to most home care services it offers individuals and families a bespoke personal care package to people with complex needs. Employing a team of staff (personal assistants) which can include family members to provide care and support to one individual.

People's experience of using this service and what we found

Right Support: Staff focused on people's strengths and promoted what they could do, so people had a fulfilling and meaningful everyday life. They supported people to make decisions following best practice in decision-making. Staff communicated with people in ways that met their needs.

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. Consent to care and treatment had been obtained and where people lacked capacity relevant others had been involved in supporting people's decision making.

Right Care: People received person-centred care from staff who knew them well. The service had enough appropriately skilled staff to meet people's needs and keep them safe.

Right Culture: Staff provided people with care, which met their needs and took account of their preferences. People and those important to them were involved in planning their care. People told us they would recommend the service.

Risks relating to people's needs had been identified and records provided a detailed plan for managing those risks. Medicines were being administered and managed safely. Systems were in place to record accidents and incidents. These were consistently monitored to identify any potential lessons to be learned, themes or trends.

People using the service had an individual designated team of staff working with them. Information in the staff recruitment files was not always completed in full and some needed to include more details to ensure the process was robust. The registered manager and provider completed a full audit of the recruitment files and acted during the inspection to ensure they were completed in full.

Training records demonstrated appropriate, bespoke and relevant training was provided. Referrals were made to other healthcare services where necessary. People told us they thought the care they received was very good and spoke positively about the staff who supported them.

People told us the staff treated them with respect and dignity and were kind and caring towards them. Care plans demonstrated a person-centred approach. Concerns and complaints were promptly responded to. End of life care where relevant was done co-working with the community nurses.

Quality monitoring and auditing systems were effective in identifying any need for improvements. There was regular oversight of the safety and quality of the service. People said very positive things about the management and staff and described the service as a 'quality service'.

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

Rating at last inspection

This service was registered with us on 9 June 2021 and this is the first inspection.

Why we inspected

This inspection was partly 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 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.

Salvere Support Ltd

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 carried out by 1 inspector and an Expert by Experience who made telephone calls to people. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

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 we wanted to be sure there would be management staff available to speak with us.

Inspection activity started on 14 April and ended on 25 April 2023. We visited the location's office on 14 and 20 April 2023.

What we did before inspection

We reviewed information we had received about the service since registering with us. We sought feedback from the local authority. 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 1 person who used the service and 5 relatives about their experience of the care provided. We spoke with 5 members of staff including the registered manager, a company director and the nominated individual / provider. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

We reviewed a range of records. This included 4 people's care records and medication records. We looked at 5 staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were also reviewed.

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.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- The registered manager completed assessments records that provided a detailed plan for managing risks associated with people's care needs.
- The provider had systems in place to record accidents and incidents. We saw evidence that action had been taken to appropriately deal with them. These were consistently monitored to identify lessons learned, themes or trends.

Using medicines safely

- Specific guidance for staff to follow when administering 'as and when' (PRN) medicines was available.
- People's records were clear as to whether their medicines were prompted or administered by the staff.
- Staff were individually trained in how to support people with their medicines and their competencies were regularly checked.

Systems and processes to safeguard people from the risk of abuse

- Staff were trained to identify and report abuse and to provide people's care in a safe way.
- People told us they felt safe with the staff who worked them. One person said, "I feel safe with when I'm in their [care staff] company."
- Staff told us they were comfortable raising any concerns with the registered manager.

Staffing and recruitment

- There were enough suitably trained staff appointed to work with individual people. People had an individual team of staff who only cared for them.
- People had control of managing their own staffing team's availability to meet their needs as they wished.
- Recruitment systems and processes were in place however some records were not consistently completed with the required information. Recruitment records looked at needed to include more details to show checks of suitability were robust. The registered manager and provider acted during the inspection by completing a full audit of the records and ensured required information was completed in full.

Preventing and controlling infection

- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.

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 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

- The registered manager and provider carried out an assessment of people's needs before agreeing to provide their care. One relative told us, "When we first started they [Salvere Support Ltd] assessed my relative's needs."
- People were regularly included in developing their needs assessment and care plans.
- The registered manager and staff referred to current legislation, standards and best practice to achieve effective outcomes.

Staff support: induction, training, skills and experience

- The staff had been appropriately trained to meet people's specific needs and received bespoke training such as peg feeding. Staff had their competencies checked before providing people's care.
- The staff told us they completed a range of training to give them the skills and knowledge to provide people's support. One staff member told us, "We did a lot of face-to-face training and it was really good." Another said, "The training was really good quality. It made me feel confident."
- People told us they were happy with the care they received. One person told us, "Salvere trained my mum as my carer just the same as the other staff who help me."

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

- Staff provided the right level of support people needed with preparing their meals and drinks.
- People had been referred to other services where concerns with eating had been noted.

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

- Staff supported people in managing their health and wellbeing needs by making appropriate referrals to external services.
- Staff worked effectively with teams of healthcare professionals to ensure people's healthcare needs were met. The staff team worked closely with multiple health care services including GPs, pharmacists and specialist nurses.

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.

We checked whether the service was working within the principles of the MCA, whether appropriate legal authorisations were in place when needed to deprive a person of their liberty, and whether any conditions relating to those authorisations were being met.

- Staff were knowledgeable about their responsibilities under the MCA and people's rights were protected.
- People and their relatives were regularly involved, consulted with and had agreed with the level of care and treatment provided.

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; Respecting and promoting people's privacy, dignity and independence

- Staff treated people with respect and were kind and caring towards them. People were very complimentary about the staff who supported them. One person said, "The carers know my likes and dislikes and I get on well with them." Another person told us, "All the carers from outside the family are caring and supportive."
- Staff respected people's privacy and promoted their dignity and independence. One person told us, "I help make my meals and drinks and I don't make decisions easily but the carers always give me options to choose from."

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

- The provider was in the process of further developing the recording systems to an electronic one with remote accessibility this will allow people's views of the service to be captured at any time.
- People and their families had been fully involved in developing their care and support and were regularly asked for their views.

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

- People's needs had been assessed and staff supporting them had a good understanding of their personal preferences. This enabled them to provide personalised care tailored to the needs and wishes of the individual.
- People told us they had been involved in their care and support plans and they were relevant to their needs.
- Staff supported people to express their views and make choices about the care delivered. One person said, "The management have been out to review [relatives] needs. If their needs change we let the manager know."

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 staff identified people's communication needs and they were recorded as part of their care plan.

Improving care quality in response to complaints or concerns

- The registered manager had effective communications with people and any concerns or complaints had been dealt with as they had arisen.
- People told us they could approach the management about any concerns they had. One person said, "Management are very approachable when I had a complaint they resolved it." Staff said they would be confident supporting someone to complain if they required assistance to raise any concerns.

End of life care and support

- At the time of the inspection no one was receiving end of life care. The registered manager told us they would work closely with the local primary care teams to support people who might come to 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 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

- The registered manager and provider had weekly meetings to look at the safety and quality of the service. We saw appropriate actions had been taken to address problems as and when they arose.
- There were systems and processes used to ensure the staff team received any information that would improve peoples' experience.
- The registered manager understood their regulatory requirements and notified different organisations of incidents when required.
- The registered manager had achieved 'train the trainer' and was involved in delivering the training for staff and family members.

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 and registered manager understood their responsibilities under the duty of candour. People and their relatives, including local authority safeguarding and commissioners had been informed of any significant events.

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

- People could engage and give feedback on the service they received and be involved through regular reviews, surveys, and direct contact with the management team.
- Staff worked effectively in partnership with health care professionals from multidisciplinary teams to achieve good outcomes for people.
- Staff told us the registered manager listened to them and was very supportive. We saw staff were regularly supported and given the opportunity to contribute about the running of the service. One staff member said, "The company provides a quality service, and I would recommend it to my own family."

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

- People told us they were very happy with the care and support they received. One person said, "I would highly recommend the service. We haven't been with them long and they do things by the book and as a family they have trained us to support our relative."
- People and their relatives spoke highly about the management. One person told us, "Management are

very approachable." Another person said, "The manager [registered manager] is absolutely brilliant."