

CSPC Healthcare Ltd

CSPC Healthcare LTD

Inspection report

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10 October 2017

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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

This announced inspection took place on 9 and 10 October 2017. The service provides personal care and support to people in their own homes in Cannock and the surrounding areas. At the time of our visits, 54 people were receiving a service. When we last inspected the service in July 2015, the service was rated Good; at this inspection we found that the service remained Good.

There was a registered manager in the service. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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.

People continued to receive safe care and staff understood their responsibilities to safeguard people from abuse or avoidable harm. Staff had been trained in safeguarding procedures. The provider had effective recruitment processes in place and there were sufficient numbers of staff to support people safely. People's medicines were managed safely.

People continued to receive effective care. Staff understood their responsibilities to support people to have maximum choice and control of their lives and support them in the least restrictive way possible. The provider's policies and systems support this practice. Staff had regular supervision and had been trained to meet people's individual needs.

People were supported by caring, friendly and respectful staff. Staff knew people and their families well, respected their privacy and dignity and promoted their wellbeing. Staff listened to people and encouraged them to maintain their independence. Where required, people had been supported to have enough to eat and drink to maintain their health and wellbeing. They were also supported to access other health services.

People continued to receive responsive care and support and had care plans that took account of their individual needs, preferences, and choices. People and their relatives had been involved in planning and reviewing people's care and plans were kept up to date to ensure they continued to be relevant. People knew how to raise any concerns and were confident that they would be listened to.

The service continued to be well-led. Systems were in place to continually assess and monitor the quality of the service. People and their relatives were encouraged to give feedback about the service on how improvements could be made. Staff felt supported and valued by the provider and were involved in the development of the service. This promoted a caring and inclusive culture within the service.

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 remains Good.

Is the service effective?

Good ●

The service remains Good.

Is the service caring?

Good ●

The service remains Good.

Is the service responsive?

Good ●

The service remains Good.

Is the service well-led?

Good ●

The service remains Good.

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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 checked 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.

This inspection took place on 9 and 10 October 2017 and was announced. The provider was given 7 days' notice because the location provides a domiciliary care service and we needed to arrange to make home visits and telephone calls to people using the service. We also needed to be sure that somebody would be at the office when we visited. The inspection was carried out by one inspector.

Before the inspection we reviewed the information we held about the service. This included any notifications the agency had sent us. Notifications are changes, events or incidents that providers must tell us about. We also contacted the local authority to see if they had any information which might help inform the inspection.

We spoke with four people who used the service and five relatives of people who used the service, including people we met face to face in their homes. We spoke with the registered manager, the provider, the care co-ordinator and six care staff who worked for the service.

We looked at the care records of four people who used the service and other documentation about how the service was managed. These included policies and procedures, three staff recruitment records and records associated with quality assurances processes.

Is the service safe?

Our findings

At this inspection the provider continued to protect people from potential abuse, harm and risks and the rating for this key question remains 'Good'.

People told us they felt safe because they knew the staff team who visited them. One person said, "On the whole we have the same staff and if there are any new ones, they always come with someone we know". People had no concerns about the availability of staff and told us they received a weekly rota which told them which staff would be calling and this was usually adhered to. A relative said, "We have a regular group of staff who we know well. They turn up at the right time and phone us if they are running late". Staff told us they had regular routes and calls were planned to ensure two carers were provided when needed. The registered manager and provider told us that recruitment was always ongoing to ensure they maintained a bank of staff who could be called on to cover unplanned absences. Staff told us and records confirmed that the provider carried out checks to ensure staff were suitable to work with people. These included checks of references and the Disclosure and Barring Service, a national agency that keeps records of criminal convictions. This showed us the provider had suitable arrangements to ensure there were sufficient, suitably recruited staff to meet people's needs at all times.

People and their relatives told us the provider and staff listened to them and they were able to make choices about the risks associated with their care and support. A relative said, "The staff work closely with the us and the physiotherapist to encourage [Name of person's] recovery". We saw that risks associated with providing care in people's homes had been assessed and plans were in place to reduce the risks of harm to people whilst promoting their independence. Records showed these plans were reviewed and updated as people's needs changed. A member of staff told us the provider briefed them about changes by phone or met them at the person's home to ensure the person continued to be supported safely.

Staff were aware of the signs to look for that might mean a person was at risk of abuse and knew how to report their concerns for investigation by the local safeguarding team. Staff were aware of the whistleblowing policy and knew they could contact external agencies such as CQC if they needed to. Whistleblowing is a way in which staff can report misconduct or concerns about wrong doing in their workplace. A member of staff told us, "I always report any concerns to the office and it's always taken seriously". The manager and owner are always available on the phone if we have any concerns". This showed the staff and provider understood their responsibilities to keep people safe from harm.

Some people told us they received support to take their medicines. One person told us, "They always check I've taken them and record it in my file". Medication systems and records monitored whether people had their medicines and an accurate record of all medicines stored in the home was maintained.

Is the service effective?

Our findings

At this inspection, we found staff continued to have appropriate skills, knowledge, experience and support necessary for them to provide effective care to people who used the service. The provider also worked within the guidelines of the Mental Capacity Act 2005 (MCA). This meant that the rating for this key question remains 'Good'.

People and their relatives were confident that the staff understood their needs and provided effective care. One person said, "Staff know what they are doing when they are moving me and use the equipment correctly". Staff were happy with the training and support they received and were confident in their ability to support people effectively. Staff were positive about the regular group training sessions they had which focussed on a specific area, for example the Mental Capacity Act, and involved a quiz to check their understanding.

The 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 make particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

We checked whether the provider was working within the principles of the MCA. People confirmed that the staff always explained what they were doing and sought their verbal consent before providing care. Staff had received training in the MCA and understood their responsibilities to support people to make their own decisions as far as possible. We saw that the provider had systems in place to ensure people's capacity was assessed where needed and staff and the registered manager understood what was expected of them to ensure that people's rights were protected. The registered manager told us and records confirmed that if there were any concerns about people's capacity to make decisions, they involved other professionals, such as the person's social worker, family members or an advocate to ensure any decisions would be made in their best interests. An advocate is someone who supports a person to express their views and wishes to ensure their voice is heard during the decision making process.

People who were supported with mealtime visits told us staff encouraged them to eat and drink enough to maintain good health. One person told us, "Staff make me a meal if I want one and encourage me to keep my fluids up; they always make sure I have a drink when they go". Staff told us and records confirmed they monitored people's food and fluid intake when needed and raised any concerns with the office. This showed us people's dietary needs were met.

People retained responsibility for managing their own health but told us the staff supported them to access other health professionals if needed. We saw that staff were aware of people's ongoing health needs, for example we heard staff asking how a person's GP visit had gone that morning.

Is the service caring?

Our findings

At this inspection, we found the staff continued to support people in a caring and compassionate manner. This meant that the rating for this key area remains 'Good'.

People were positive about the provider and staff. They told us they listened to them and treated them with respect. One person said, "The staff are kind and caring, they respect me and listen to me. The staff recognised people's diverse needs and how they expressed themselves. A relative told us, "I've been [Name of person's] interpreter as they are unable to communicate verbally but staff work with me to understand the gestures they make to be aware of their wishes". People valued their relationships with the staff team and told us they often went 'the extra mile' for them when providing care and support. A relative told us, "They go above and beyond – if I've just come back from shopping when they arrive, they always carry it in for me. Relatives told us staff showed concern for their wellbeing, "They fuss about me and tell me I'm just as important as [Name of person]".

People and their relatives told us they had good relationships with the staff. Staff spoke fondly about people they supported and understood their individual needs and preferences. For example, staff told us about a person who liked staff to remove their shoes or wear shoe protectors when they came into their home and we saw that they respected this. We saw that people had been asked for their preferences in all aspects of their care and their choices and decisions were reflected in their support plans. People had a copy of their records in their home and we saw they had signed their agreement to their support.

People told us the staff respected their privacy and dignity. One person told us, "They put me at ease when they are supporting me and all personal care is done behind closed doors". Staff told us they always explained what they were doing and ensured they respected people's privacy. One member of staff told us, "We always pop out of the bathroom and leave people a few minutes to have their privacy".

We saw that the provider had received positive comments about the service. One relative had written, "Thank you for the care and attention and also smiles, a great team". Another had written, "Thanks for sending such a friendly, caring group of carers [Name of person] enjoyed their visits".

Is the service responsive?

Our findings

At this inspection, we found the rating for this key question remains 'Good' because people were still being supported to receive personalised care that was responsive to their individual needs. The provider listened to people's concerns and complaints to make continuous improvements to the quality of care.

People told us they were happy with the support they received and confirmed it met their individual needs. People told us that staff were responsive to their needs and supported them quickly in when they contacted the office or out of hour's service. One person said, "We called the office to ask if the night staff could come in earlier once as I had a fall and they were with us within a few minutes. They are very good". People told us they were asked about their preferences for how they received their care, including the gender of staff supporting them, and this was respected. We saw that each person had a personalised care plan that took into account their needs, choices, views and preferences. A relative said, "They've asked all about our life together and they talk to us about it". Discussions with staff demonstrated they worked closely with other professionals involved in people's care, for example the district nurse, and records showed that their advice was included in people's care plans. People told us and records confirmed that the provider regularly reviewed people's care to ensure the support they received continued to meet their individual needs. Records of regular review meetings with people showed that they were happy with how staff supported them.

People told us that their care was provided in a timely way which fitted in with their daily routine. People looked forward to visits from the staff and it was clear that staff provided companionship so that people did not feel socially isolated and lonely. A relative told us, "[Name of person] looks forward to them coming, they liven them up"

People and their relatives knew how to raise any concerns or complaints and were confident they would be taken seriously. A relative told us, "If I had any problems I would discuss them with the staff, you can talk about anything to them. They come and do spot checks from time to time; they did not in the summer, and I always feel able to give my views". Staff told us they would do their best to answer any concerns people had and would report them to the provider should they need to investigate. We saw there was a complaints policy and a procedure for logging and tracking any complaints, which showed that any complaints had been responded to promptly.

Is the service well-led?

Our findings

At this inspection, we found the provider continued to have effective systems to continuously improve the quality and safety of the service and people remained at the centre of everything that staff did. This meant that the rating for this key area remains 'Good'.

The service had a registered manager who was supported by the provider and administrative staff. Staff told us the management team was supportive and approachable and they felt able to raise issues and concerns or put forward suggestions on how the service could improve. Staff told us this had resulted in the introduction of a mentor scheme, to give dedicated support to new members of staff. Staff told us they received regular supervision which gave them an opportunity to raise any concerns and review any training needs. The provider encouraged staff to provide high quality care and recognised good practice through an 'Above and Beyond' award scheme, which was based on feedback from people and their families.

People and their relatives had no concerns about the quality of the service they received and this was reflected in the compliments received by the provider, which were made in writing or on the service's social media website, which was continuously monitored. Comments included, "Thank you for the care and attention and also smiles, a great team" and, "Thanks for sending such a friendly, caring group of carers [Name of person] enjoyed their visits". The provider also recorded people's views when they visited them to review their care or during spot checks to monitor staff competence. A relative told us, "A senior member of staff came to review [Name of person's] care, we had the opportunity to give our view. We've always been very happy with things". People also gave their feedback about the quality of care in the form of a satisfaction questionnaire and records showed that any negative feedback was followed up, which showed us they strive to continuously improve the service.

We saw the provider had systems in place to check that people received a good service. A system was in place to ensure people received their support as planned and the provider was confident that there had been no missed calls. The provider carried out a range of audits, including checks on the administration of medicines and on the daily records to check for accuracy. The provider monitored any accidents and incidents and worked closely with other professionals, for example district nurse and occupational therapist, to reduce the risk of reoccurrence.

People's confidential records were kept securely at the office base to ensure people's rights were upheld. The registered manager and provider understood the responsibilities of registration with us and notified us of important events that happened in the service. This meant we could check that appropriate action had been taken.