

# Shauna Health Care Service Solutions Limited Shauna Health Care Service Solutions Limited

### **Inspection report**

BIZSPACE, Discovery Court Business Centre 551-553 Wallisdown Road Poole BH12 5AG

Tel: 01202016734 Website: www.shaunahealthcaresolutions.co.uk Date of inspection visit: 23 June 2023

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Good

#### Ratings

## Overall rating for this service

Is the service safe?	Good •	)
Is the service well-led?	Good •	)

### **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.

At the time of the inspection, the location did not care or support for anyone with a learning disability or an autistic person. However, we assessed the care provision under Right Support, Right Care, Right Culture, as it is registered as a specialist service for this population group.

#### About the service

Shauna Health Care Service Solutions Limited is a domiciliary care agency providing personal care and support to people living in their own homes. Not everyone who used the service received personal care. At the time of this inspection 62 people were receiving the regulated activity of personal care from the service. 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

#### Right Support:

People received care and support in their own homes, there were appropriate risk assessments in place to support them and maintain their environment.

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.

People were supported by appropriate numbers of staff who provided person-centred care and support. Staff communicated with people in ways that met their needs, people told us staff were kind. Staff supported people with daily living tasks in a way that promoted their independence and achieved the best possible outcomes.

#### Right Care:

Staff understood how to protect people from poor care. Staff had training on how to recognise and report abuse and they knew how to raise concerns.

The care plans for people using the service reflected the principles and values of 'Registering the Right Support' by promoting choice and control, independence, and inclusion. Care plans and risk assessments were detailed and person-centred ensuring people were supported to live full, active lives and encourage

them to be as independent as possible.

Right Culture:

Staff told us they were proud to work at Shauna Health Care Service Solutions Ltd. The service was well led with a focus on the recruitment, training, and development of staff. This ensured that people received a safe, caring, and responsive service. Staff had confidence in the leadership of the service and felt the service was well led. Staff demonstrated good understanding around providing people with person centred care and spoke knowledgably about how people preferred their care and support to be given.

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 28 April 2021).

Why we inspected

We received concerns in relation to whether people's individual risks were assessed. As a result, we undertook a focused inspection to review the key questions of safe and well-led only.

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 remained the same based on the findings of 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.

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
<b>Is the service well-led?</b> The service was well-led.	Good ●



# Shauna Health Care Service Solutions Limited

**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

This inspection was carried out by 2 inspectors. 1 inspector visited the location's office, and 1 inspector undertook telephone calls of people and relatives using the 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 needed to be sure the registered manager was available to speak to us on the day of inspection.

Inspection activity started on 22 June 2023 and ended on 3 July 2023. We visited the location's office on 23 June 2023.

#### What we did before the inspection

The provider was not asked to complete a Provider Information Return (PIR) prior to this inspection. A PIR is information providers send us to give some key information about the service, what the service does well and improvements they plan to make.

We sought feedback from the local authority. We used this information to plan our inspection.

#### During the inspection

We spoke with 6 people and 3 relatives about their experience of the care provided. We received feedback from 7 members of staff including the registered manager and nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

We received written responses from 1 health and social care professional. We reviewed a range of records. This included 7 people's care and support records and 7 people's medicine administration records. We looked at 3 staff files in relation to recruitment and training. We also reviewed a variety of records relating to the management of the service, including policies and procedures, staffing rotas, accident and incident records, safeguarding records, and quality assurance reports.

## Is the service safe?

# Our findings

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

At our last inspection we rated this key question good. The rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

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

- Risks to people were managed. Individual risk assessments for people detailed the action staff must take to reduce the risk of avoidable harm. Environmental risk assessments identified any risk to both people using the service and staff. This included, accessing the property and monitoring the person's home for trip hazards and faulty equipment.
- Staff had training on how to use equipment and regular spot checks of care were completed by the registered manager.
- Risk assessments included any risks associated with meeting care needs such as, skin integrity, eating, drinking and mobility.
- Accident and incidents were recording using an electronic monitoring system. Appropriate actions were taken to keep people safe.
- Lessons learnt were shared in team meetings. We reviewed some recent meeting minutes which demonstrated how staff discussed and learnt from the incidents.

Systems and processes to safeguard people from the risk of abuse

- People told us they were safe. One person stated, "They keep me safe, they never not turn up, not missed any visits. They know how I like things done." Another commented, "I have no worries about being safe. You know staff have agreed tasks and procedures around things like finances, I understand it wouldn't be fair to ask them to support me with something they shouldn't, and I wouldn't ask them to, it's part of the rules to keep us all safe."
- Staff had received training and understood how to report safeguarding concerns. Staff knew how to recognise the signs and symptoms of abuse and who they would report concerns to both internally and externally.
- Staff were confident any concerns raised would be actioned by the registered manager. One staff member told us, "The registered manager handles any issues calmly and swiftly [to keep people safe] I'm not aware of any flawed systems."

#### Staffing and recruitment

- People were supported by staff who were recruited safely. Staff completed an application form which included assessment of their employment history, character and qualifications. These checks ensured staff were suitable to work with people.
- All staff files viewed contained a valid DBS check. Disclosure and Barring Service (DBS) checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.

• There were enough staff on duty to meet people's needs. The management team told us they would support with care visits to people in the event of an emergency. One staff member stated, "I line manage the health carers and do the spot checks. I am responsible for people's files and paperwork. I do a bit of everything, so I am able to support wherever needed."

Using medicines safely

- Medicines were administered by trained staff. Staff followed safe procedures when giving people their medicines.
- People had medicines guidance in place for as and when required medicines.
- Some people using the service were prescribed medicines which require stricter controls by law. These medicines were administered by 2 members of staff and the management team had considered access and security of these medicines as part of their risk assessment.
- The service's audit identified medicine stock balances recorded on the system were not tallying with actual medicine balances in people's homes due to an issue with the system. The management team implemented a paper system while this was being resolved.

Preventing and controlling infection

- Staff were trained in infection control and were supplied with personal protective equipment (PPE) to prevent the spread of infections.
- Everyone we spoke with told us the care staff wore PPE. A relative told us, "The staff wear masks, aprons and gloves, they do it all."
- We were assured that the provider's infection prevention and control policy was up to date. Staff confirmed they were able to access the most recent version of this policy if needed.

## 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 good. 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.

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

• People gave us positive feedback about the staff providing them with care and support. Comments included: "The Care staff are just nice, they have a joke with me, and they are good tea makers", "I cannot praise them enough. They are very discreet; they never talk about other clients so I am confident they never talk about me when they shouldn't" and, "They are cheerful, I've never had to make a complaint because they are always laughing and smiling with me."

• There was a positive culture within the team, staff told us they were proud to work for Shauna Health Care Solutions Ltd. Without exception, staff praised the support from the registered manager. Examples of this included: "I feel that the people using the service have a voice and they are listened to as they have ready access to our manager", "[Registered manager's name] is a hard-working person who cannot tolerate people who do not value their work" and, "They are a good listener, problem solver and is knowledgeable about the industry."

• A relative told us, "The visit times are correct as per the agreement and the times I've checked they do are long enough to complete all the tasks. Really, they are a good team, with amazing carers." Another relative fed back, "They do now communicate well, some hiccups right at beginning but all good now."

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 the requirements of the duty of candour. This is their duty to be honest and open about any accident or incident that had caused or placed a person at risk of harm.
- The registered manager understood CQC requirements, in particular, to notify us, and where appropriate the local safeguarding team, of incidents including potential safeguarding issues, disruption to the service and serious injury. This is a legal requirement.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

- Quality assurance systems were operating effectively. Auditing and monitoring systems gave the registered manager and the provider oversight of the service.
- Staff understood their roles and responsibilities within the service.
- Staff performance was monitored with spot checks. One staff member told us, "Carers and the office are connected. Everyone feels accepted and belonging, sharing ideas and able to seek support in any situation when need arises to provide the best care."

- The service used online publications, guidance and information sharing to ensure they kept up to date with changes. The registered manager was confident in their role, learning was important to them.
- There was evidence the service took learning from events to continually improve the service it provided.
- A health and social care professional commented on improvements made by the service and stated, "Shauna Health Care Solutions Ltd is not flagging up as a concern and we are not hearing of numerous issues or complaints."

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

- People and their relatives told us they felt involved in the running of the service. One relative commented, "I'm very happy with them. I recently filled in a form about the service. I would recommend them to others."
- Changes had been made following feedback, an example of this was to improve communication people were provided a copy of the staff rota each week.
- The service worked well with visiting health and social care professionals, the registered manager and staff felt comfortable to access their support when needed.