

The Council of St Monica Trust

Care and Support Service - Cote Lane

Inspection report

St Monica Court
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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Outstanding ☆

Summary of findings

Overall summary

About the service

Care and Support Service Cote Lane provides personal care and support to people in their own home. The agency provides care and support for older people, adults with disabilities and people who live with dementia. At the time of our inspection there were 32 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 told us the registered manager and staff were very kind and caring and very good at their jobs. They said they felt safe with their care staff and trusted them. People and relatives were consistently complimentary about the kindness of the staff and the reliability of the service they received. We were told of occasions where staff had gone above and beyond what was expected of them.

The registered manager was very passionate about supporting people who lived in their own home. The registered manager had developed and sustained a positive culture. There was a strong ethos of quality care which ran throughout the service. The registered manager's leadership of the service aimed to provide high-quality personalised support to people.

The provider recognised that the on-going development of staff skills, competence and knowledge was central to ensuring high-quality care. Staff were well trained and recruited safely, they spoke positively about their role and felt well supported to carry out their roles and responsibilities effectively, so that people received care and support in-line with their needs and wishes.

Staff turnover was low, and people told us they were supported by staff who knew and consistently met their needs. The service liaised with health and social care professionals. People's care and support was planned in partnership with them. They told us they felt consulted and listened to about how their care was delivered. People told us they had never had a missed call and staff attended the calls at the appropriate time and stayed for the full duration of the call.

The registered manager used a variety of methods to check the quality of the service and develop good practice. Staff had a clear vision of what was required of them and were focused on doing so. People were supported to engage in individual and group-based community activities within the village that were meaningful to them.

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.

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 03 November 2017).

Why we inspected

This was a planned inspection due to the age of the rating.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

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?

Outstanding ☆

The service was exceptionally well-led

Details are in our well-led findings below.

Care and Support Service - Cote Lane

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. 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

This inspection was announced.

We gave the service 48 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

Before our inspection we completed our planning tool and reviewed the information we held on the service. This included notifications we had received from the provider, about incidents that affect the health, safety and welfare of people supported by the service and previous inspection reports. We also sought feedback from partner agencies and health and social care professionals.

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 used all this information to plan our inspection.

During the inspection

We spoke with 6 people who received support from the Care and Support Service and 5 relatives. We spoke with 3 members of staff, the registered manager, and a senior manager. To gather information, we looked at a variety of records. This included 4 care plans and medicine records. We looked at information in relation to staff training and recruitment records. We also looked at other information related to the management of the service including audits and meeting minutes. We did this to ensure the management team had oversight of the service and they could respond to any concerns highlighted or lead in ongoing improvements.

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. At this inspection the rating 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 were protected from the risk of abuse. The service had effective safeguarding systems in place and staff had a good understanding of what to do to make sure people were protected from harm.
- Staff felt confident the registered manager would act if they raised any concerns about people's safety and wellbeing and knew how to escalate issues to the local authority or the CQC.
- People told us they felt safe. Comments included "I feel very safe in their care". A relative told us "My mum is very happy and settled with the carers. They give excellent personal care and prompt her to take her medication."
- Staff had received safeguarding training and understood how to recognise the signs of abuse and how to report it.

Assessing risk, safety monitoring and management

- Risk assessments gave guidance to staff on how to minimise the risk identified and had followed recommendations from professionals such as the GP and District Nurse.
- Individual risk assessments were in people's care records. These were regularly reviewed and helped protect people from the risk of harm associated with their care. For example, we saw risk assessments relating to people's physical health, daily living needs and emotional wellbeing.
- People were protected from the risk of harm because the service assessed, monitored, and managed the risks associated with their care. The registered manager had a good oversight of managing risk and had implemented a system providing updates on a weekly basis. These updates provided an overview of any risk, concerns or updates that needed to be shared with staff.

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 Mental Capacity Act (MCA). In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS)

- We found the service was working within the principles of the MCA and if needed, appropriate legal authorisations were in place to deprive a person of their liberty. Any conditions related to DoLS authorisations were being met.'

Staffing and recruitment

- People were satisfied with the level of staffing and the service they provided. One person told us, "I am happy with the carer. I think there are enough staff. I have no complaints."
- There was low staff turnover. Staff retention had been good with a number of staff having worked for the service for some time. The registered manager told us that the oldest employee had been working for the service for 42 years. Ongoing recruitment was taking place to allow flexibility in support and be responsive to the changing needs of the service. Staff told us, "It's a great team, very supportive."
- People were supported by staff who had been recruited safely. Effective recruitment procedures were in place which included references, identity checks, work history and a full Disclosure and Barring Service (DBS) check. The 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.

Using medicines safely

- Records showed, and staff confirmed relevant training had been provided. Additional training and assessments of competency were also carried out where support was provided for those people with complex care needs such as diabetes or dementia.
- Support plans outlined the level of support to be provided. Audits were completed to check people received their medication as prescribed.
- Some people were prescribed medicines 'as required'. Protocols were in place to ensure staff were consistent about how best to support people before giving them additional medicines.
- Medicines were managed safely and in line with good practice guidance. People felt staff knew how to support them with their medicines. One relative told us, "My mum is very happy and settled with the carers. They give excellent personal care and prompt her to take her medication which she takes herself. "

Preventing and controlling infection

- The provider had good infection prevention and control policies and practice in place.
- All staff had received training in infection prevention and control and safe use of personal protective equipment.

Learning lessons when things go wrong

- The provider had a system in place to analyse any accidents and incidents, so trends were identified and learning from incidents took place.
- The registered manager was aware of their responsibility to report any concerns to the relevant external agencies.

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. At this inspection the rating has changed to outstanding. This meant service leadership was exceptional and distinctive. Leaders and the service culture they created drove and improved high-quality, person-centred care.

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

- People told us that they were very happy with the service. People spoke extremely positively about the staff and the management team. For instance, people's relatives told us they had strong links with the staff and management team. One person's relative said, "The service is very well managed and responsive and I have no complaints." Another relative told us, "The service has a jolly good manager who is open to suggestions as I was a professional in this type of business."
- We saw there was a particularly strong and motivated management team that had clear roles and responsibilities and were decision makers in their fields of expertise. The registered manager was an excellent role model for staff. They spoke passionately about their role and promoted the values of the provider which placed people at the heart of the service and provided a strong commitment to promoting independence and social inclusion.
- The registered manager was committed to providing care that was individualised and holistic. The registered manager was very involved in people's care, as well as being kept well informed by the team, as they understood the individual needs of people they were caring for very well. A relative told us "There have been occasions where I have needed extra help to put him to bed and they are always just a phone call away and sent 2 carers straight away to assist. I know the manager is very responsive in this way and can be relied on in an emergency."
- Initiatives to improve people's wellbeing and minimise social isolation were well established and successful. People spoke highly about the importance of this and the improvements that had been made to their lifestyles. The registered manager told us about the enrichment programme which supported people to re-engage with their communities after COVID 19 pandemic.

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 ensured there were robust systems in place to ensure compliance with duty of candour. The duty of candour is a set of specific legal requirements that providers of services must follow when things go wrong with care and treatment. The management team worked in an open and transparent way when incidents occurred at the service in line with their responsibilities under the duty of candour.
- Staff told us they felt listened to and clear about their roles and responsibilities and felt confident to raise issues, concerns and ideas with the registered manager and were given regular opportunities to do so.
- The provider continued to meet their regulatory requirements such as notifying CQC of events as required and displaying their last inspection ratings.

Managers and staff being clear about their roles, and understanding quality performance, risks, and regulatory requirements

- People were safely supported as the provider had quality assurance systems in place, which were meaningful and exceptionally thorough. This supported a very high quality of service. For instance, all staffs' performance and competence was monitored regularly, through observations of their practice, spot checks and supervision with their managers. This ensured any areas of service delivery that needed to be improved could be identified and addressed very quickly.
- The registered manager provided excellent leadership and demonstrated a high level of experience and delivered care which was compassionate and inclusive. This had been sustained and developed over a number of CQC inspections.
- The service was very well organised and there was a clear and supportive staffing structure and lines of responsibility and accountability.
- Staff were competent and experienced. There was very low staff turnover and staff were highly motivated. The registered manager told us that they had a care worker that had been with the provider for 42 years. Staff felt included, confident, and supported in making suggestions. A staff member told us about how they had been supported to learn and grow as a staff member and were provided with ongoing training and development opportunities.
- Governance was well embedded into the running of the service. There was a strong framework of accountability to monitor performance and risk. Annual internal inspections by the provider were completed to assess quality and to ensure regulatory requirements were met.

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

- Everyone told us staff went out of their way to involve people in deciding on how they wanted to be cared for and people were regularly asked for their views about the service and about the care they received. They told us their views were acted upon.
- We saw feedback to the provider, gathered by means of compliments received. High numbers of people had responded and there was exceptionally positive feedback, which reflected people felt the service had a very positive impact. For instance, typical of people's responses, one person had commented, "I wanted to praise (Name) care worker for how professional they were in providing her care, extremely kind and caring, nothing was too much trouble for them."
- The service demonstrated that they valued the principles of dignity very highly and went above and beyond to ensure that the standards of dignity were upheld every day, for everyone. This was supported by people's feedback.
- The service had organised a number of community events with people. The Kings Coronation event was being planned and the summer fete.

Continuous learning and improving care; Working in partnership with others

- The management team placed a very strong emphasis on continuously learning new ways of doing things. This helped staff to be innovative in finding ways to meet people's diverse needs. There were regular team meetings where improvements and learning points were discussed.
- People confirmed the management team checked with them regularly about their experience of the quality of care provided and were always looking for ways to improve.
- The service worked in partnership with other organisations to make sure they met people's needs. This included healthcare professionals such as GP's, district nurses and continence specialists. This ensured a multi-disciplinary approach had been taken to support the care of people receiving the service.
- There were strong links with the local community.
- The registered manager encouraged and supported staff to develop their skills and knowledge to support

their progression. The provider encouraged staff to have a career in care and invested in courses for staff to develop their careers in this field.