

Trends Healthcare Ltd Trends Healthcare Westcliff

Inspection report

307 London Road Westcliff-on-sea SS0 7BX

Tel: 01702826090 Website: www.trendshealthcare.co.uk Date of inspection visit: 10 October 2023 11 October 2023

Good

Date of publication: 06 November 2023

Ratings

Overall rating for this service

Is the service safe?	Good 🔴	
Is the service well-led?	Good 🔴	

Summary of findings

Overall summary

About the service

Trends Healthcare Westcliff is a domiciliary care agency providing personal care to people in their own homes. At the time of our inspection there were 10 people receiving a regulated activity.

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

Feedback from families and relatives was positive. A relative told us, "I am absolutely delighted with the service, they are so helpful, I feel blessed." One person told us, "They [staff] are very good. I feel lucky to have them."

Care and treatment was planned and delivered in a way that was intended to ensure people's safety and welfare. Care was personalised around people's needs and preferences. There were enough staff to meet people's needs. People were cared for safely by staff who had been recruited and employed after appropriate checks had been completed. The registered manager enabled staff to develop their skills to provide good quality care.

There were systems in place to minimise the risk of infection and to learn lessons from accidents and incidents. Medicines was administered by staff who had received training to do so.

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.

The registered manager continuously developed their own skills and staff skills to promote positive outcomes for people using the service. Staff remained committed to providing good quality care. Quality assurance systems were in place to monitor the quality and safety of the service. The registered manager maintained good oversight of the service and used this to continuously drive improvements and adhere to best practice principles.

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

Rating at last inspection

The rating at the last inspection was good (published 18 October 2019).

Why we inspected

We received concerns in relation to staff recruitment. 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.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Trends

Healthcare Westcliff on our website at 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 safe?	Good •
The service was safe.	
Details are in our safe findings below.	
Is the service well-led?	Good •
Is the service well-led? The service was well-led.	Good •



Trends Healthcare Westcliff

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 1 inspector.

Service and service type

Trends Healthcare Westcliff is a domiciliary care agency. It provides personal care to people living in their own houses and flats.

Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided. At the time of our inspection there was a registered manager in post.

Notice of inspection

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.

We visited the offices on the 10 October 2023 and made phone calls to people, relatives and staff on the 11 October 2023.

What we did before inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and other 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 3 relatives about their experience of the care provided. We spoke with 5 members of staff including the registered manager and care staff.

We viewed a range of records. This included 3 people's care records and multiple medication records. We looked at 2 staff files in relation to recruitment and a variety of records relating to the management of the service.

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.

Systems and processes to safeguard people from the risk of abuse

- People were protected from the risk of abuse. Staff had received training in how to respond to safeguarding concerns. One member of staff said, "If I was concerned about abuse, I would report to my line manager immediately and they would deal with this. If I felt the concern was not dealt with, I could escalate it to the CQC or another authority."
- The registered manager had policies in place to support staff in raising concerns, this included using an alert system on care records that would immediately notify senior staff of any issue that needed addressing.
- People told us they felt happy and safe with the support they received from staff. One relative said, "All the staff are wonderful, professional, friendly, polite and completely appropriate."
- The registered manager had worked with the local authority to investigate safeguarding concerns and worked with them, to keep people safe.

Assessing risk, safety monitoring and management

- Risk assessments and care plans were person centred and provided guidance to staff on how best to support people.
- People were supported to live as independent lives as possible. Risk assessments helped to mitigate the risks to people by identifying how best to provide support.
- Risks associated with personal care and health care needs were clearly identified providing guidance to staff on how to safely support people.
- Environmental risk assessments were in place and guidance on how to mitigate risks of fire and safely evacuate people if needed.
- The registered manager had business and winter contingency plans in place to ensure support remained in place for people should there be an adverse event such as bad weather or further pandemic outbreaks.

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.

- Staff had received training on MCA and gained consent from people to support their care needs.
- Where appropriate if people had lasting power of attorney in place their advocates were involved in making decisions about their care.
- Where staff dealt with people's money receipts and records were kept which were audited by management to ensure they were correct.

Staffing and recruitment

• The registered manager told us they had recruited enough staff to provide consistent care and support to people with complex healthcare needs.

• People and their relatives told us they were supported by a consistent team of staff. One person said, "I couldn't be more complimentary of the company and staff, they are really good, friendly and professional." They went on to say. "[Registered managers name] has trained up a number of care workers to provide support to me."

• The registered manager recruited staff who had the skills to support people and went on to develop staff with further training to match the skills people needed for their care.

• Appropriate checks were in place before staff started worked including providing full work histories, references and a Disclosure and Barring Service (DBS) check. DBS 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

• People received their medicines safely. Staff had been trained in how to administer medicine safely and had their competency to do so regularly checked.

- Where people were supported with medicines, they had a support plan and risk assessment in place for staff to follow.
- Medicines were recorded on a medication administration chart if people required 'as and when'(PRN) medicine there were protocols in place for their administration.
- Medicine records were checked and audited to ensure there were not errors and that people were receiving their medicines safely.

Preventing and controlling infection

- Staff had received training in infection prevention control (IPC) and supported people to minimise the risk of infection in their homes.
- The registered manager had policies in place to safely manage infections or infectious disease outbreaks should these happen.
- Staff had adequate supplies of personal protection equipment (PPE) should they need these.

Learning lessons when things go wrong

- The registered manager was keen to learn from accident, incidents, complaints, and untoward events. The focus of learning was to continuously improve practice, outcomes, and care delivery for people.
- Learning was shared with staff and if further training was identified this would be implemented.

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

- Feedback from people and relatives was very positive about the support they received from the service. One person said, "I could not be any more complimentary about the service, the carers really care it is not just a job to them."
- Before people started using the service a full assessment of their needs was completed and a personcentred support package put in place. One relative told us, "If I need any minor adjustments, we have a discussion about what should be done and why and this is arranged."
- The registered manager promoted positive outcomes for people. A relative said, "I needed some urgent care put in place and [managers name] was able to arrange everything and put staff in place to be able to get [person name] home from hospital quickly."
- Another relative told us, "[Staff name] is very on the ball, any issues with equipment they are on it and sort it all out very quickly." They went on to say, "We have 3 care companies providing 24 hour care and Trends is by far the best."

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 registered manager had a staffing structure in place that provided support to care workers to enable them to perform their role to a high standard.
- Staff were supported to develop the skills they needed to complete their role, this included face to face training with the registered manager and enrolment into national recognised training courses.
- The registered manager was keen to support staff with training that would help to develop their knowledge and careers within the company. One member of staff said, "I have completed specialist training and I am currently doing a level 5 certificate. I have a good team and a wonderful boss who is so supportive to us."
- Staff were clear about their roles and received regular supervision, spot checks and meetings with the registered manager.
- The registered manager understood their responsibility under duty of candour to be open honest and investigate when things go wrong.

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

• The registered manager engaged with people, relatives and staff on a regular basis. There were several systems in place to gain feedback this included telephone monitoring and personal visits by the registered manager.

• A relative said, "The company is easy to contact you can call the office, they always respond promptly."

• People's equality characteristics had been considered and people were supported with their diversity, cultural and religious beliefs.

Continuous learning and improving care; Working in partnership with others

- The registered manager employed a quality manager to help with the monitoring of the service. There were systems in place to audit care being provided and to maintain oversight of the service.
- The registered manager had undertaken several courses to keep up to date with best practice and to help them develop their staff. For example, they had completed training to be a trainer so that they could deliver training and assess staff skills.
- The registered manager worked in partnership with other agencies when needed, such as the palliative care team, district nurses and GPs.