

Concept Care Practice Limited

Concept Care Practice Limited - 20 Cross Street

Inspection report

20 Cross Street Reading Berkshire RG1 1SN

Tel: 01189574510

Website: www.concept-care.co.uk

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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

About the service:

Concept Care Practice Limited - 20 Cross Street is a domiciliary care agency providing personal care to people living in their own homes. They mostly provide staff to care homes with and without nursing. However, that side of the business does not require registration with the Care Quality Commission (CQC). CQC only inspects the service being received by people provided with 'personal care'; help with tasks related to personal hygiene and eating, in their own homes. At the time of our inspection there was one person receiving personal care in their own home. The service is also registered to provide nursing care to people living in their own homes. However, that side of the service was dormant at the time of our inspection.

People's experience of using this service:

- The service assessed risks to the health and wellbeing of people who use the service and staff. Where risks were identified action was taken to reduce the risk where possible.
- Recruitment processes were in place to make sure, as far as possible, that people were protected from staff being employed who were not suitable.
- Medicines were handled safely by staff who had been assessed as competent to do so.
- People received effective care from staff who were well trained and supervised.
- Feedback from relatives was that staff were caring and respected their family member's privacy and dignity.
- Care was designed to meet people's individual needs and preferences.
- People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service supported this practice.
- Relatives knew how to complain and knew the process to follow if they had concerns.
- People's right to confidentiality was protected and their diverse needs were identified and incorporated into their care plans where applicable.
- A relative told us, "I just can't fault them. I think they are absolutely brilliant. They never make [Name] feel like anything is too much trouble."

Rating at last inspection:

Good. The report from the last inspection was published on 28 October 2016.

Why we inspected:

This was a planned comprehensive inspection carried out in line with our aim to re-inspect a service within 30 months of being given a rating of Good.

Follow up:

We will continue to monitor all information we receive about this service. This informs our ongoing assessment of their risk profile and ensures we are able to schedule the next inspection accordingly.

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

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. Good (Is the service caring? The service was caring. Details are in our Caring findings below. Good Is the service responsive? 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.



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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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations under the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Inspection team:

One inspector carried out this inspection.

Service and service type:

Concept Care Practice Limited - 20 Cross Street is a domiciliary care agency. It provides personal care to people living in their own homes. It provides a service to older people, some of whom may have dementia, a physical disability, a learning disability and/or mental health needs.

The service had a manager registered with the Care Quality Commission. 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.

Notice of inspection:

We gave the service 48 hours' notice of the inspection visit because it is a small service and we needed to make sure the relevant staff and information would be available in the office.

The inspection site visit took place on 14 March 2019. We visited the office location to see the office staff and to review care records and policies and procedures. The registered manager was available and assisted us on the day of the visit.

What we did:

Before the inspection site visit:

- We looked at information the provider sent us in the Provider Information Return. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make.
- We looked at all the information we had collected about the service. This included previous inspection reports, information received and notifications the registered manager had sent us. A notification is information about important events which the service is required to tell us about by law.
- We contacted all three members of staff asking for feedback on working for the service and received a response from one.

During the inspection site visit we looked at:

- One person's care plan, daily notes, monitoring records and medication sheets.
- The staff training matrix and the staff supervision and appraisal log.
- Management audits.
- Quality assurance survey forms completed with people who use the service.
- Policies and procedures.
- Records of compliments.

After the inspection site visit, for feedback of their experiences, we contacted:

• The relative of the one person currently using the service.



Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm Good: People were safe and protected from avoidable harm. Legal requirements were met.

Systems and processes to safeguard people from the risk of abuse

- Staff knew how to recognise abuse and protect people from the risk of abuse.
- Staff knew what actions to take if they felt people were at risk.
- A relative said they felt their family member was safe with the staff.
- In the annual survey response completed in January 2019, a relative commented that all three care staff exceeded their expectations in reliability, quality of work and professionalism. They added that all three staff members were trusted by themselves and their family member.

Assessing risk, safety monitoring and management

- People were protected from risks associated with their health and care provision.
- Staff assessed risks such as moving and handling, and care plans incorporated measures to reduce or prevent potential risks to individuals.
- Risk assessments of people's homes were carried out and staff were aware of the lone working policy in place to keep them safe in their work.
- Emergency plans were in place, such as plans for extreme weather conditions.

Staffing and recruitment

- Staff were provided in line with the hours identified in people's individual care packages.
- Staff said they had enough time to provide the care people needed within the time allocated to them.
- There had been no new staff employed since the last inspection where we found recruitment processes protected people as far as possible. All three members of care staff were long term employees so their files were not checked.
- A relative commented in their annual survey response in January 2019 that all three staff were like "part of the family".

Using medicines safely

- People's medicines were handled safely.
- The training records confirmed staff had received training in handling medicines.
- Only staff trained and assessed as competent were allowed to administer medicines.
- Medicines administration record sheets were up to date and had been completed correctly by the staff administering the medicines.

Preventing and controlling infection

- Staff received training in the control of infection.
- Staff were provided with personal protective equipment so they could carry out their work safely.

Learning lessons when things go wrong

- There had been no accidents or incidents since the last inspection.
- Processes were in place for accidents and incidents, if they happened, to be recorded and investigated so that any lessons to be learnt could be identified and acted on.



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 Good: 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

- People received effective care and support from staff who knew how they liked things done.
- Each care plan was based on a full assessment, included individual preferences and choices, and demonstrated the person had been involved in drawing up their plan.
- The care plans were kept under review and amended when changes occurred or if new information came to light.

Staff support: induction, training, skills and experience

- People received care from staff that had the necessary knowledge, skills and experience to perform their roles.
- A relative thought staff had the training and skills they needed when supporting their family member.
- The service provided training in topics they considered mandatory, such as manual handling, first aid and fire safety.
- All training the provider considered to be mandatory was up to date.
- Staff received additional training in specialist areas relevant to the needs of individual people, such as training in gastric tube feeding.
- Staff felt they received the training they needed to enable them to meet people's needs, choices and preferences.
- Staff received formal supervision at least four times a year to discuss their work and how they felt about it. We were told by staff this enhanced their skills.
- Once a year staff had a formal appraisal of their performance over the previous 12 months.

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

- Staff were trained in providing food and fluids via the gastric tube the person using the service had for nutrition.
- Staff worked with the person's main carer to ensure adequate fluid and hydration was provided.
- Daily notes showed that staff documented food and fluid intake on the forms the person's main carer kept.
- Staff worked with the person's main carer to provide consistent, effective, timely care.
- A relative told us they were happy with the care and support their family member received from the service and added, "He has confidence in them."

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

- Staff received training in the Mental Capacity Act 2005 (MCA) and were clear on how it should be reflected in their day to day work.
- We checked whether the service was working within the principles of the MCA and found that they were.
- People's rights to make their own decisions were protected.



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

Good: 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

- On the annual survey response written in January 2019 one relative commented that their family member needed, "... good, competent care staff that have empathy. This is exactly what Concept Care have provided."
- People's equality and diversity needs were identified and set out in their care plans. A relative commented about the staff that, "They get upset if people underestimate him."
- Staff provided support to meet the diverse needs of people using the service including those related to disability, gender, ethnicity and faith.

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

- People's views on the support they received was regularly sought.
- The care plans were drawn up with people, using input from their relatives, health and social care professionals and from the staff teams' knowledge from working with them in the service.

Respecting and promoting people's privacy, dignity and independence

- Rights to privacy and dignity were supported. This was confirmed by the relative we spoke with.
- People's care plans focused on what they could do and how staff could help them to maintain their independence and protect their safety wherever possible.
- People's right to confidentiality was protected. All personal records were kept locked away in the office and in a place of their choice within people's own homes.



Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs Good: People's needs were met through good organisation and delivery.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control

- People received support that was individualised to their personal needs.
- People and relatives confirmed they were involved in decisions about their care and support needs and that their preferences were followed when staff provided their care.
- Care plans included people's preferences and the daily notes showed staff provided care in the way the person wanted them to.
- A relative said their family member received the care and support they needed.
- On the annual survey response written in January 2019 a relative said that all staff exceeded their expectations in adaptability and flexibility.

Meeting people's communication needs

From August 2016 onwards all organisations that provide adult social care are legally required to follow the Accessible Information Standard (AIS). The standard sets out a specific, consistent approach to identifying, recording, flagging, sharing and meeting the information and communication support needs of people who use services. The standard applies to people with a disability, impairment or sensory loss and in some circumstances to their carers.

- The registered manager was aware of the AIS and had recently written a policy on the subject.
- The service was in the process of documenting the communication needs of people in a way that meets the criteria of the standard.

Improving care quality in response to complaints or concerns

- There had been no complaints made to the service since the last inspection.
- A relative knew how to raise a complaint and was confident the service would take appropriate action if they did complain.
- Staff were aware of the procedure to follow should anyone raise a concern with them.

End of life care and support

• At the time of this inspection the service was not providing end of life care to anyone using their service.



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 Good: The service was consistently managed and well-led. Leaders and the culture they created promoted good-quality, person-centred care.

Planning and promoting person-centred, high-quality care and support with openness; and how the provider understands and acts on their duty of candour responsibility

- People received a service from staff who worked in an open and friendly culture.
- Staff said their manager was accessible and approachable and dealt effectively with any concerns they raised.
- Staff said they would feel confident about reporting any concerns or poor practice to the registered manager.
- The registered manager had a good understanding of their responsibilities under the Duty of Candour regulation and would follow it whenever it applied.

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

- The registered manager was aware of their legal responsibility for meeting the requirements and regulations about how the service is run.
- All of the registration requirements were met and the registered manager was aware of what notifications should be sent to us when required. Notifications are events that the registered person is required by law to inform us of.
- Records were up to date, fully completed and kept confidential where required.
- There was an effective audit system in place that included audits of different aspects of the running of the service including daily logs, care plans and staff training. Where issues were identified, actions had been carried out to ensure everything met the required standard.

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

- Staff received training in relation to the equality and diversity as part of their ongoing mandatory training.
- Care plans showed this training was put into practice with all equality or cultural needs identified, incorporated into care plans and met.
- People benefitted from a staff team that were happy in their work.
- Staff said the manager asked what they thought about the service and took their views into account.
- One member of staff told us, "The agency is caring and effective. I enjoy working for them and hope to do so for a long time."

Continuous learning and improving care; working in partnership with others

- Staff felt they were provided with training that helped them provide care to a high standard.
- Staff said they would recommend the service to a member of their own family.
- A relative said the service was well managed and asked them for feedback on the service provided. They added, "I find [the registered manager] very approachable."
- On the annual survey response written in January 2019 a relative said that all staff exceeded their expectations in cooperation. Their overall rating of the service was "extremely good" and they added, "The registered manager has met our needs very well."