

Galiant Health Care Limited

Galiant Health Care Almondsbury

Inspection report

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Avon
BS32 4QW

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20 January 2023

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Website: www.galianthealthcarelimited.co.uk/

Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Galiant Health Care Almondsbury is a domiciliary care agency providing care to people in their own homes. 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. At the time of the inspection there were 22 people receiving support with personal care.

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

The service had made improvements since our last inspection and was no longer in breach of regulation. Improvements had been made in relation to how the service was monitored and audited.

People using the service were safe. There were recruitment processes in place to ensure new staff were suitable for their roles and people told us they built positive relationships with staff. There were risk assessments and care plans in place to guide staff in providing safe support for people. When people had particular support needs, staff were given training to ensure they were able to deliver the person's care safely and effectively.

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 service was well led and person centred in nature. People's views were sought and taken in to consideration and any issues or concerns responded to promptly. Staff were well trained and supported in their roles.

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

Rating at last inspection and update

The last rating for this service was requires improvement (published 8 March 2022). The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

Why we inspected

This inspection was carried out to follow up on action we told the provider to take at the last inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Galiant Health Almondsbury 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 ●

The service was well led.

Details are in our well led findings below.

Galiant Health Care Almondsbury

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 one 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

We gave the service 24 hours' notice of the inspection. This was so that we could ensure there would be someone available in the office to support the inspection.

We visited the location's office on 20 January 2023.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. 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.

During the inspection

We spoke with 4 relatives and 1 person using the service. We made several attempts to contact more people but we were unsuccessful. We spoke with the registered manager and received feedback from 5 members of staff. We looked at 3 people's care plans and risk assessments and medicine administration records. We looked at recruitment records for 3 members of staff. We reviewed medicine audits and other records relating to the running 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 requires improvement. At this inspection the rating has changed to good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People told us they felt safe with staff, comments included, "The carers are kind, caring and nothing is any trouble for any of our carers and they are all really nice people", and "I can't fault what the carers do for my wife, each one that comes is kind and I think they really care about my wife as a person".
- There were no ongoing safeguarding concerns at the time of our inspection. However, the registered manager understood the process to follow should concerns arise.

Assessing risk, safety monitoring and management

- There were risk assessments in place to guide staff in how to support people safely. Alongside care plans these gave clear information about how a person should be supported. We noted that in some areas further detail would be helpful and we fed this back to the registered manager.
- Staff told us they had specific training in order to be able to meet a person's needs, if necessary. For example one person used a Percutaneous Endoscopic Gastrostomy (PEG) to manage their nutritional needs. This is a feeding tube inserted through the skin into the stomach. Staff confirmed they had been trained in how to support the person with this. One member of staff told us, "Yes, I was trained on how to support clients with peg feeding and bolus feeding (this is a way of receiving a feed without the use of a pump). Management has also booked for further training". A relative told us, "I have no problems with how the carers are trained they all look after my mother properly".

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. There was information included in people's care records in relation to their capacity to make decisions. It was also clear in records where people should be encouraged to make choices, for example the outfit they wanted to wear that day.

Staffing and recruitment

- The registered manager told us they had sufficient staff to cover the care packages they currently had.

Staff told us they had enough time to travel between calls and weren't rushed. This was reflected in the comments of people and their relatives who confirmed, carers seem to have plenty of time to support people without having to rush.

- There were procedures in place to ensure staff were suitable for their role. This included seeking references from previous employers and carrying out background checks such as a Disclosure and Barring Service (DBS) check. This is a check that identifies whether a person has any convictions that would affect their suitability for the role.

Using medicines safely

- People were supported with their medicines in accordance with their needs. One relative told us, "I rely on the carers to keep an eye on the medication situation so we can order them when we need to I am so grateful they do this for me".
- Medicine Administration Record (MAR) charts were completed when staff supported a person with their medicines and these were checked and audited regularly.

Preventing and controlling infection

- There were good supplies of PPE for staff to use whilst providing personal care to people.
- People confirmed that staff wore PPE during calls and changed this as necessary between homes and care tasks.

Learning lessons when things go wrong

- Accidents and incidents were recorded and detailed what action staff had taken in response. In one case, we saw that staff had found a person on the floor and had taken action to contact an occupation therapist.
- The care coordinator checked these forms regularly to ensure that all necessary action had been taken. This helped ensure that people were safe and had the right support in place to help prevent further incidents.

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 requires improvement. At this inspection the rating has changed to good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

At our last inspection we found a breach of regulation 17 because systems for monitoring the service were not fully effective. At this inspection we found improvements had been made and the provider was no longer in breach.

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

- Decisive and positive action had been taken following our last inspection to improve the performance of the service. This was reflected in feedback from people. One relative commented, "There was an historic problem with missed calls but recently this has all changed and now I can't fault anything with the service".
- People told us they had regular contact with the service and were able to discuss any issues or concerns. Prompt action was taken when necessary to improve. One relative told us, "I am very happy with the care my mother gets, if I have a problem, which is very rare I speak to someone in the office and it's always sorted as quickly as possible".
- Audits were carried out regularly as part of the provider's monitoring of their service and these helped identify areas for improvement.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- There was a positive, person centred culture within the service. People told us, "I am over the moon with this company" and "I hear them talking all the time to my husband they are explaining what they are doing and they always ask him if its ok to do it".
- There were ways for people to contact the office if they needed to, this included an 'out of hours' number.
- Staff reported feeling well supported and were positive about working for the company. They told us, "I am satisfied with everything and it has been a great place for me to work and learn with the massive support given by management of Galiant", "I can contact the office and management staff for support and advice" and "I think Galiant healthcare is doing a good job".

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 was aware of the duty of candour regulation and had policies in place to support open and transparent communication.

Working in partnership with others

- Staff worked with healthcare professionals when necessary to ensure people's wellbeing. We saw records for example to show that a person's GP had been contacted when staff had concerns about their health.