

Kelsam Support Services Limited

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Inspection report

Leominster Community Centre
School Road
Leominster
HR6 8NJ

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27 September 2019

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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:

Kelsam Support Services is a domiciliary care service that provides personal care to people in their own homes. It specialises in supporting people with learning disabilities, acquired brain injuries, autism and physical disabilities. 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 our inspection, seven people were using the service.

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

Staff understood how to recognise and alert others to potential abuse involving people who used the service. The risks associated with people's care and support needs were assessed, managed and kept under review. People received a consistent and reliable service, provided by regular staff with whom they were familiar. The provider carried out checks on the suitability of staff before they started work. People had the support they needed to manage and take their medicines safely. The provider had measures in place to protect people from infections. The management team reviewed any accidents or incidents involving people who used the service, in order to learn from these.

The management team assessed people's individual needs and requirements before their care began. Staff participated in a rolling programme of training that reflected people's individual needs and their duties and responsibilities. People had support to prepare their meals and drinks where they needed this. Staff and management worked effectively with community health and social care professionals to ensure people's needs were met. Where appropriate, people had support to arrange and attend medical appointments. 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 management team promoted a person-centred culture within the service. People's care and support was exceptionally kind and compassionate. Staff demonstrated a high level of motivation for their work and were matched to people's personalities and interests. Staff and management recognised when people needed additional caring support and responded to this. People and their relatives were supported to express their views about the service. The management team actively supported people and their relatives to access additional sources of support and advice on their care. People were treated with dignity and respect at all times.

People's care plans promoted a person-centred approach and were read and followed by staff. People had support to participate in a range of activities of their choosing and to access employment opportunities. People and their relatives were clear how to complain about the service, and felt comfortable doing so.

People, their relatives and staff spoke highly of the management team, whom they found approachable, caring and ready to help. Staff were clear what was expected of them and felt their work was valued by management. The provider had quality assurance systems and processes in place to enable them to monitor and improve people's care. Staff and management sought to maintain positive working relationships with the community professionals involved in people's care.

Rating at last inspection

The service was registered with us on 17/10/2018 and this is the first inspection.

Why we inspected

This was a planned inspection based upon the service's registration date.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

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.

Is the service caring?

Good ●

The service was caring.

Details are in our Caring findings below.

Is the service responsive?

Good ●

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.

Kelsam Support Services Ltd

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 Care Act 2014.

Inspection team

The inspection was carried out by one inspector.

Service and service type

This service is a domiciliary care agency. It provides personal care to people living in their own houses and flats.

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 provider 48 hours' notice of our intention to undertake an inspection. This was because the provider delivers a domiciliary care service to people in their own homes, and we needed to be sure that someone would be available in the office.

What we did before the inspection

Before the inspection visit, we reviewed information we had received about the service since the last inspection. This included information about incidents the provider must notify us of, such as any allegations of abuse. We sought feedback on the service from the local authority and local Healthwatch. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and

social care services in England.

During the inspection

We spoke with two people and one relative about their experience of the care provided. We also spoke with the registered managers, one senior staff and one care staff. We reviewed a range of records. These included two people's care records, medicines records, staff training records, three staff recruitment records, accidents and incident records and records relating to the management of the service.

After the inspection

We spoke with two relatives and one community professional about their experience of the care provided. We also spoke with one senior care staff and three care staff.

Is the service safe?

Our findings

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

This is the first inspection for this newly registered service. This key question has been rated Good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- The provider had procedures in place to ensure any abuse concerns involving people who used the service were reported to the relevant authorities and thoroughly investigated.
- Staff received training in the provider's safeguarding procedures and were clear how to identify and report potential abuse. They told us they would immediately inform the management team of any witnessed or suspected abuse.

Assessing risk, safety monitoring and management

- People and their relatives told us they felt safe receiving care and support from staff. One relative told us, "I feel 100% safe with staff." Another relative said, "I am very confident [person] is in safe hands."
- People and their relatives confirmed staff and management involved them in decisions about risks, and provided the level of support people needed to stay safe. One person explained, "I cook for myself with their [staff's] support. They help me put food in the oven and get it out. They make sure I'm safe."
- The risks associated with people's individual care and support needs had been assessed, recorded and plans implemented to manage these. This included clear guidance for staff on how to respond to behaviours which challenge. Staff confirmed they read people's care plans and protocols to understand how to support them safely.
- Effective communication within the service ensured staff had the up to date information they needed about any changes in the risks to people's health, safety and wellbeing.

Staffing and recruitment

- People and their relatives told us they received a consistent and reliable service, provided by a small team of regular staff. One person explained, "I mostly have the same staff. I like that because I am confident in talking to them and they know me well."
- The provider employed enough staff to meet people's day-to-day care needs and cover planned and unplanned staff absences. Staff praised the willingness of the management team to help out by providing people's direct care and support where needed.
- Pre-employment checks were completed on all prospective staff to ensure they were suitable to work with the people who used the service.

Using medicines safely

- The provider ensured people had the level of support they needed from staff to manage their medicines safely. People described how staff helped them successfully manage their medicines on a day-to-day basis by, for example, sending them reminders by text to take their medicines.

- Staff received training in the provider's medicines procedures, and underwent periodic medicines competency checks to ensure they understood how to follow these.
- Staff maintained accurate and up-to-date medicines records, to confirm people had received their medicines as prescribed.
- Any decisions to give people's medicines covertly were taken in line with Mental Capacity Act 2005, through discussion with the GP, pharmacist and relevant others.

Preventing and controlling infection

- Staff received training on how to protect people from the risk of infections and were supplied with personal protective equipment (disposable gloves and aprons) to reduce the risk of cross-infection.
- Staff were clear on when they were expected to wear personal protective equipment as part of their duties.

Learning lessons when things go wrong

- Staff recorded and reported to management any accidents or incidents involving people who used the service.
- The management team reviewed these reports to identify potential learning and took prompt action to prevent things from happening again. A staff member told us, "They [management] definitely listen and respond to incidents. They don't push things to the side."

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.

This is the first inspection for this newly registered service. This key question has been rated Good. This meant 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

- Before people's care and support started, the management team met with them, and, where appropriate, their relatives and the professionals involved in their care to assess their individual needs and requirements. A relative praised the thoroughness of this assessment, adding, "It was also a very relaxed assessment. They [management] did not put [person] on edge." A community professional described the comprehensive assessment and transition process completed before a person started to use the service. They told us, "They [staff and management] really got to know [person] well first and what their needs were. They went in to work with teaching staff and parents to understand these needs, form a rapport with [person] and set goals before the care started."
- Staff and management understood the need to promote people's equality and diversity, and to take into account their protected characteristics when planning and delivering their care. Staff spoke positively about the provider's commitment to equality and diversity. One staff member told us, "I think they [management] would deal with equality issues with open arms. They are very accepting; there's no form of discrimination."

Staff support: induction, training, skills and experience

- People and their relatives expressed confidence in the competence of staff. One relative told us, "I think their [staff's] training is very good ... They [staff] have good insight into autism and [person's] behaviours. It gives you confidence." Another relative said, "They [staff] all seem very, very competent. I'm learning from them. It's nice to have that feeling they know what they are talking about, and they can explain things in terms I can understand."
- New staff completed the provider's induction training to enable them to settle into their new roles and understand the individual needs of the people they would be supporting. Staff talked positively about their induction experience. One staff member told us, "It [induction] was really good and I did loads of shadowing [working alongside more experienced staff]. They showed me how to do medicines and lift people safely. I had four weeks of training before I was allowed to work on my own."
- Staff spoke positively about the provider's commitment to staff training and the extent to which the training they received was tailored to people's individual needs and requirements. One staff member explained, "I think [management] understand the importance of training and making sure all staff understand people's needs through providing person-centred training ... They provide bespoke training for each person we support at the outset. It just means that everyone [staff] is on the same page." As part of these bespoke training days, the management team discussed people's personal background, their specific care and support needs and their personal goals.
- In addition to training, staff had regular opportunities to meet with a member of the management team on a one-to-one basis to receive feedback on their work and discuss any additional support needs they may

have.

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

- Staff and management gave people any support needed to prepare meals and drinks of their choosing, and encouraged them to maintain a balanced diet. One person's care plans described the support staff gave them to prepare healthy meals from their recipe book.
- The provider had procedures in place to assess, record and manage any complex needs or risks associated with people's eating and drinking.

Staff working with other agencies to provide consistent, effective, timely care; supporting people to live healthier lives, access healthcare services and support

- Staff and management understood the need to work collaboratively with community health and social care professionals to ensure people's individual needs were monitored and met. They had produced an overview of people's individual needs to assist medical staff in the event of a hospital admission.
- Health action plans had been developed with people to ensure they received the necessary support to stay healthy, including their attendance at routine medical appointments and health check-ups.
- Staff and management gave people support to arrange and attend medical appointments, where they needed this. One person explained, "I get support making [medical] appointments and staff take me to dentist and doctors. I don't get so nervous at the dentist now because I know I've got the staff there just in case."
- People's relatives told us staff played a positive role in monitoring their loved ones' general health, and reported any related concerns to them without delay. One relative said, "I'm confident they [staff] would relay any health concerns about [person]. They have done this previously."

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.

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.

We checked whether the service was working within the principles of the MCA.

- Staff and management understood and promoted people's rights under the MCA. People told us staff respected their right to make their own decisions and choices.
- People's care files included information for staff about the support they needed with day-to-day decision-making.

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.

This is the first inspection for this newly registered service. This key question has been rated Good. This meant 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

- People, their relatives and staff described a strong person-centred culture within the service, focused upon offering people tailored care and support that reflected their individual needs and requirements. A relative told us, "They [staff] listen and take into consideration [person's] needs and what they want to do. They are extremely patient. It's all about what [person] wants to do and how long they want to do it for. They are very willing to do anything [person] wants."
- Staff and management cared for people, and supported their relatives, in a way that exceeded expectations and demonstrated exceptional empathy and compassion. For example, they had worked together to provide much-needed, last-minute support in hospital for one person who was unexpectedly admitted shortly before they were due to go on holiday with their family. Their relative told us, "They [staff and management] made the whole time a lot easier for me. They go the extra distance." Another relative described how the holistic care and support their loved one had received from staff and management had surpassed their expectations and had a very positive impact on their quality of life in a relatively short period. They explained that, due to being cared for as a whole person, their loved one, "looks brighter in themselves and are just so happy and jolly." They went on to say, "I can't wait for the next chapter in [person's] life, as there is so much they [staff and management] want to do with them. They have gone beyond what was expected, and that's what care is all about."
- Staff spoke about their work with pride and enthusiasm, and a clear commitment to promoting people's continued health, wellbeing and quality of life. They told us they learned from the example of exceptionally kind and compassionate care set for them by the management team.
- Staff and management anticipated and responded to those times when people needed additional caring and compassionate support. One person described the important role additional support from staff and management had played in enabling them to cope with a sudden unplanned change in their family situation at home. They told us, "When [change in personal circumstances occurred], there was loads of stuff they [staff and management] did for me that was way outside what I was paying for. There was all kinds of out-of-hours advice on stuff. There was a real investment and interest in my personal situation." A relative described how the management team had been sensitive to their need for reassurance during their loved one's transitional period before their care started, and had met with them on a weekly basis to talk over any related concerns.
- Management strove to ensure people were supported by staff who were matched to their personalities and interests, to promote the development of positive, caring and productive relationships. A relative explained, "[Person] has an amazing relationship with [staff member]. They didn't gel with a younger carer, so [registered manager] removed them from [person's] care team."

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

- Staff and management promoted open and honest communication with people and their relatives. The people and relatives we spoke with felt fully involved in decision-making that affected them, and able to have their say about the care and support provided.
- Through good insight into people's individual needs and circumstances, the management team actively supported them and their relatives to identify and access additional sources of support and advice on their care, advocating for people where necessary. For example, one person described how the registered manager's knowledge and tenacious support had enabled them to arrange a change to their medication, which had significantly improved their quality of life. They told us, "[Registered manager] wouldn't let it drop until I found the right thing [medicine]. It has improved my mental clarity and energy ... [Registered manager] really, truly cares. It's not about ticking boxes for them. It's about caring for people and doing the right thing."

Respecting and promoting people's privacy, dignity and independence

- Staff and management were committed to promoting people's privacy, dignity and independence. Staff gave us examples of how they ensured people always felt respected and listened to, when providing their care and support. One staff member told us, "I always ask them [people] what they want to do and give them choices. I don't make decisions for the person." Another staff member said, "You must not take their [people's] decisions away from them. You ask people, you don't tell them."
- People and their relatives confirmed staff and management worked to maintain and develop people's independence. One person spoke with pride about the range of household tasks they completed on a daily basis, with encouragement from staff. They told us, "When I've got independent time, I follow a job list on the board. I clean my bathroom, change my bed, do the washing up and I also hang my washing out every day." A community professional said, "They [staff] understand it's about enabling people rather than doing things for them. They really do get that idea."
- Staff and management were quick to identify any distress or discomfort people were experiencing, in order to ensure they received prompt, sensitive care and support. A community professional described how staff's alertness to changes in one person's demeanour had enabled them to recognise they were experiencing anxiety about a potential work placement. These observations had then been discussed with the psychologist involved in their care, to ensure they had the support they needed.

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs.

This is the first inspection for this newly registered service. This key question has been rated Good. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- People and their relatives confirmed staff and management encouraged their involvement in assessments and care planning and valued their views.
- People's care plans were individual to them and included information about their personal history, strengths and abilities, interests and aspirations, to promote a person-centred approach.
- Staff praised the quality of the care plans and protocols they read and followed, one staff member describing these as 'very in-depth and informative'. Staff explained they contributed to developing and reviewing people's care plans, ensuring these remained effective and up to date. One staff member explained, "I like the fact you can have input into them [care plans] and update them as you get to know the person."

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- The management team understood the requirement to follow the AIS in assessing, recording and addressing people's communication and information needs.
- People's care files included clear guidance for staff on their individual communication needs and how to promote effective communication. Staff made use of communication aids to enhance their communication with individuals, including the use of objects of reference and electronic communication applications. A community professional told us, "They [staff] seem really well-versed in the best way to communicate with individuals."
- The provider had the facility to produce information in alternative, accessible formats in response to people's individual communication and information needs. They had, for example, produced an easy-read version of their complaints procedure, to help people understand how to raise any complaints or concerns about the service.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- Staff and management played a positive role in supporting people to pursue their hobbies and interests, participate in their community and access employment opportunities. One person spoke to us excitedly about the wide range of social and recreational activities they participated in with staff support, in addition to their weekly voluntary work. This included playing sports, attending football matches, horse-riding,

cinema trips and enjoying meals and drinks out with friends. A relative also described how staff gave their loved one the support they needed to participate in volunteering projects in the local area.

Improving care quality in response to complaints or concerns

- People and their relatives told us they had not needed to complain about the service to date. However, they were clear how to raise complaints and concerns with the provider, and told us they would feel comfortable doing so. A relative said, "They [management] are the type of people I would approach with any concerns."
- The provider had a clear complaints procedure in place, designed to ensure complaints were handled in a fair and consistent manner.

End of life care and support

- At the time of our inspection, the service was not supporting anyone with end of life care.
- The provider had procedures in place to establish and record people's preferences and choices in relation to end of life care.

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.

This is the first inspection for this newly registered service. This key question has been rated 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

- The management team promoted a positive culture within the service, based upon openness, inclusiveness and respect for people, their relatives and staff. They worked closely with staff and listened to feedback from people and their relatives to ensure staff were working in line with expectations.
- People and their relatives spoke highly of their relationship and dealings with the management team. They praised the management team's knowledge, approachability, responsiveness and willingness to help. A relative told us, "[Registered managers] are very knowledgeable and it reassures me they know what they are talking about ... It [service] is run very, very efficiently." Another relative said, "[Registered manager] is lovely, really approachable and friendly. She has [person's] best interests in mind and will do her best to help you out if you need anything." A further relative commented, "I can ring or email management and get an answer straightaway ... They are professional, know what they are doing and what [person] needs, and are very good at communicating."
- Staff benefited from effective leadership and direction, and consistent management support. The positive comments made by staff about the management team echoed those of people and their relatives. One staff member explained, "I think they [management] are really fair and really good listeners. They make me feel safe because I am so supported and they have so much experience and knowledge between them. I'm confident I'm doing my job well as I have so much faith in them." Another staff member said, "They [management] are brilliant. You can text them anytime out of office hours and pop into the office anytime during the day. They are really helpful and approachable."
- Staff felt they were treated with fairness and respect by a management team who valued their work efforts. A staff member explained, "I think they [management] are very conscious of making sure staff feel valued. They put sweets in our tray and we are always invited into the office for 'cake day' on Fridays. They are very caring with staff." Another staff member told us, "They [management] send emails or texts quite regularly letting us know how well we've done and how hard we are working."

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 management team understood their responsibility to be open and honest with people and relevant others following any incidents involving the care and support provided. People, their relatives and staff confirmed the management team communicated with them in an honest and transparent manner.

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

regulatory requirements; continuous learning and improving care

- Staff and management were clear about their respective roles. Good communication between staff and management ensured there was a shared understanding of any quality performance issues or risks to people.
- People, their relatives and staff praised the professional knowledge of the management team who kept themselves up to date with any legislative changes and current best practice guidelines.
- Management and staff completed audits and checks to monitor and identify potential improvements in the safety and quality of people's care and support. These included quarterly management audits on key aspects of the service, such as people's care records, staff personnel files, medicines records, safeguarding issues and accident and incident reports. Team leaders also compiled detailed monthly reports in relation to people's health, wellbeing and the progress made towards identified personal goals.

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

- The management team engaged effectively with people, their relatives and staff who confirmed they felt involved in the service provided.
- They worked collaboratively with the community health and social care professionals involved in people's care, to the benefit of the people who used the service. A community professional spoke highly of their communication and dealings with the management team to date. They told us, "They [management] will always answer emails by the end of the same day and will always update you on any issues ... I think they [management] listen to staff and clients [people], take on board what professionals have to say and consider staff's training needs ... It seems like a really good service and I hope they can expand soon."