

KB Solutionz Limited

KB Solutionz Head Office

Inspection report

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Date of inspection visit:

07 March 2022 11 March 2022

16 March 2022

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21 March 2022

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

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

About the service

KB Solutionz Head Office provides care and support to one person living in supported living' setting, so that they can live as independently as possible. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for supported living; this inspection looked at people's personal care and support.

People's experience of using this service and what we found We have made a recommendation about staff recruitment.

Right Support

- Staff focused on people's strengths and promoted what they could do, so people had a fulfilling and meaningful everyday life.
- Staff supported people with their medicines in a way which promoted their independence and achieved the best possible health outcome.
- People's care, treatment and support plans reflected their range of needs and this promoted their wellbeing and enjoyment of life.

Right Care

- Staff knew people well and understood how to protect them from abuse. The service worked well with other agencies to do so.
- People received kind and compassionate care. Staff protected and respected people's privacy and dignity. They understood and responded to their individual needs.
- Staff and people cooperated to assess risks people might face. Where appropriate, staff encouraged and enabled people to take positive risks.

Right culture

- Staff knew and understood people well and were responsive, supporting their aspirations to live a quality life of their choosing.
- People and those important to them, were involved in planning their care.
- Staff evaluated the quality of support provided to people, involving the person, their families and other professionals as appropriate.

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

Rating

This service was registered with us on 21 January 2021 and this is its first inspection.

Why we inspected

This was a planned inspection of a newly registered service.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our reinspection 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? The service was safe. Details are in our safe findings below.	Good •
Is the service effective? 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.	Good •
Is the service well-led? The service was well led. Details are in our well led findings below.	Good •



KB Solutionz Head Office

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

One inspector carried out the inspection.

Service and service type

KB Solutionz Ltd 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 service notice of the inspection. This was because the service is small, and people are often out, and we wanted to be sure there would be people at home to speak with us.

Inspection activity started on 07 March 2022 and ended on 16 March 2022. We visited the person in their own home on 11 March 2022.

What we did before inspection

We reviewed the information we held on the service, such as notifications, and used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all of this information to plan our inspection.

During the inspection

We spoke with one person who used the service and one relative about their experience of the care provided. We spoke with four members of staff including the registered manager and the director who was also the service manager.

We reviewed a range of records. This included one person's care records and their medication records. We looked at two staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.



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

- Staff had received training on how to recognise and report abuse and they knew how to apply it. A staff member told us, "We did safeguard training and covered all aspects, including who and when to call and local safeguarding numbers and the police."
- One relative told us, "I know [family member] is really happy I have absolutely no complaints."

Assessing risk, safety monitoring and management

- People's care needs were risk assessed and support plans provided staff with the information they needed to manage the identified risk. A staff member told us, "All risks are in people's support plan, so we know what to do."
- Risk assessments contained information on details of distressed behaviour, how staff responded and information on referrals to relevant agencies when support was required. An evaluation was completed to review potential cause, associated triggers and whether the management plan was still effective.
- Staff supported people to take part in activities which promoted their independence and were relevant to their interests, even when they involved an element of risk. For example, people went out alone to visit friends or to pursue their interests. One person told us, "I go out most days."

Staffing and recruitment

- The registered provider had a policy for the safe recruitment of staff.
- Staff were employed to work in a specific supported living service. Staff told us they had been employed by completing application forms, attending interviews and providing the required employment checks before they could work.
- Staffing arrangements met people's needs. During the inspection we observed appropriate levels of staffing to support the people who used the service. A staff member told us, "There is definitely enough staff here and there is always one staff member here. The customers are very independent."
- Minor improvements were needed to staff recruitment files. Some references were not dated and related emails to validate these references were not kept with staff files. The registered manager told us they would locate the emails and address this.

We recommend the provider ensures recruitment checks are in line with Schedule 3 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014, which provides reference to the recruitment checks and documents required when appointing staff.

Using medicines safely

• People's medicines were managed safely. One person managed most aspects of their medicines

independently and staff only supported them with accessing their medicines when needed.

- Staff received training and regular competency checks to ensure they were administering medicines safely.
- Protocols were in place for staff to follow when administering medicines for distressed behaviour. Guidance included that these medicines were only administered as a last resort.

Preventing and controlling infection

- Regular COVID-19 tests were carried out to help prevent the spread of infection.
- Staff had received training in infection control. They told us there was always enough PPE available to ensure people were protected from infection.
- The service supported visits for people living in the home in line with current guidance.

Learning lessons when things go wrong

• The registered person took appropriate actions following incidents and learning was shared with staff.



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

- The support plan set out current needs, promoted strategies to enhance independence, and demonstrated evidence of planning and consideration of the longer-term goals.
- One person also had aspects of their support plan on their bedroom wall. This is me reflected the persons preferences, likes and dislikes. During the visit the person confirmed this was about them.
- People had healthcare action plans which were used by health and social care professionals to support them in the way they needed. Appointments and outcomes were clearly recorded, one person was being supported with their oral healthcare which included regular visits to the dentist.

Staff support: induction, training, skills and experience

- People were supported by enough numbers of staff who had the right mix of experience and skills. Staffing levels were flexible around the needs and wishes of people who used the service. A staff member told us, "I had an induction where they went through all their policies and procedures and we looked at different topics such as confidentiality and lone working. I shadowed a colleague for at least a week. I was able to read the care plans, care notes and really get to know what people liked/disliked and get to know them well."
- Staff told us teamwork was good at the service and they supported one another well. A staff member said, "We are a small team and support each other. We are never on our own."
- On-going training was delivered to meet people's specialised needs.
- Staff were supported by regular supervision and told us their supervision meetings were supportive and they were able to discuss aspects relevant to their jobs. A staff member said, "We have supervisions every two months and a monthly meeting."

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

- People were involved in choosing their food, shopping, and planning their meals. A person told us, "Staff do help me with the cooking, but I do most things myself. I cook spaghetti most weeks and I am going to cook [staff member] some Mexican food."
- During our visit people had chosen to order a takeaway of their choice. A person said, "We do this on a Friday."

Supporting people to live healthier lives, access healthcare services and support

• Staff supported people to maintain good health. People were encouraged to have an annual health check and staff were available to support people to attend appointments if they wished.

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, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

• Staff had received training in the MCA and understood the importance of involving people in decisions about their care. A staff member said, "We have had training and we ask people so they make the decision, if we think the decision is unwise, we would let them know and give them all the information."



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 told us they enjoyed living at the service and got on well with the staff who supported them. One person told us, "I love living here, I was nervous when I first got here but [registered manager] spoke to me and now I really like it."
- Staff saw people as their equal and created a warm and inclusive atmosphere. A staff member said, "Working here is so far so good. It is lovely and I previously worked for a DCA going house to house and this is so different, but I find it really rewarding supporting people."
- We observed people and staff had positive relationships and people were comfortable in the company of staff. There was a calm and relaxed atmosphere in the service and staff and people chatted and laughed with each other. A relative told us, "The service is wonderful, I get lots of feedback from them and I know [family member] is really happy."

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

- People were supported to maintain the relationships they wanted to have with friends, family, and others important to them. People told us about the contact they had with family and friends. A relative told us, "I usually contact [service manager] as they seem to be the main person in the house, I also receive lots of information."
- The provider information return recorded, "We have managed to ensure those who use our services have a strong voice in how their care is planned and delivered. This includes all activities of daily living as well as social integration activities. This enables the service users to have autonomy and improved independence as well as choice as much as is possible."

Respecting and promoting people's privacy, dignity and independence

- Staff respected the privacy and dignity of each person. A staff member told us, "When people are in their rooms we knock and always ask if it is okay to come in. We give people privacy, even when we arrive at the house, we knock so they can let us in. The way we work is to be respectful to people."
- There was a significant emphasis on encouraging people to be as independent as possible in all areas of their lives. A person said, "I do whatever I want really. I just want to get more confident. I do prefer it here as I do more for myself."



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 had support plans that were comprehensive, person centred and detailed. There was good information on a range of needs such as personal care, relationships, communication and finances.
- Support plans were evaluated every six months and people were involved in planning their own care.
- People learnt everyday living skills and developed new interests with support from staff.

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.

- Staff ensured people had access to information in formats they could understand
- People's communication needs were outlined in their support plans. The registered manager understood the accessible information standards.

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

- People could choose what they wanted to do day to day. People attended local clubs or leisure pursuits of their choosing. One person told us, "I like going to the [club name] and dancing to this old house. I go to [centre] three times a week and I go out on the buses."
- People were able to follow their specific interests. One person told us they had recently visited a transport museum and told us they had really enjoyed the visit.
- A relative told us, "[Family member] always seems to be doing things, they go on holiday and they definitely go out."
- The service manager told us they were currently trying to support one person to find some voluntary work in an area they were interested in.

Improving care quality in response to complaints or concerns

• There was a complaints procedure in place. No complaints or concerns had been raised but people and relatives knew who to contact if they had a concern.

End of life care and support

• There was no-one receiving end of life care during the inspection.



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

- People told us they were happy with the service. A relative told us, "I am 100% happy with this service."
- The registered manager and service manager were visible in the service, approachable and took a genuine interest in people, staff and relatives. A staff member told us, "Managers are very supportive and open and very approachable."

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 and service manager had the skills, knowledge and experience to perform their role and a clear understanding of people's needs/ oversight of the services they managed.
- Audits and checks had been carried out to check the service met people's needs.
- The registered manager understood their responsibility of duty of candour.

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

- There were systems in place to involve people, relatives and staff in the running of the service. Monthly meetings were held and a relative told us communication was good.
- The registered manager told us they promoted a work life balance for staff and operated a self-rostering system, which ensured staff were able to choose the shifts suitable for them whilst balancing that with the needs of the service.

Continuous learning and improving care; Working in partnership with others

- The registered manager was part of a local providers portal and attended quarterly meetings and social development sessions. This meant they kept up with relevant guidance, local initiatives and shared best practice.
- The service had good links with the local community. People attended lots of local events, had voluntary jobs and were supported by staff.