

Social Care Academy Ltd

# Social Care Academy Ltd

## Inspection report

The Farmhouse, Fern Hill Court  
Balsall Street East, Balsall Common  
Coventry  
CV7 7FR

Tel: 08000025973

Website: [www.socialcareacademy.net](http://www.socialcareacademy.net)

Date of inspection visit:  
15 December 2022

Date of publication:  
09 January 2023

## 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

Social Care Academy is a domiciliary care agency which provides personal care to people in their own homes. The service provides support to older people and to people with a range of needs including physical disabilities and sensory impairments. At the time of our inspection 9 people were receiving personal care. CQC only inspects the service being received by people provided with personal care. This is help with tasks related to personal hygiene and eating. Where they do, we also consider any wider social care provided.

### People's experience of using the service and what we found

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.

At the time of the inspection, the location did not care or support for anyone with a learning disability or an autistic person. However, we assessed the care provision under Right Support, Right Care, Right Culture, as it is registered as a specialist service for this population group.

### Right support

Risks associated with people's care and their home environments were assessed and well-managed. The model of care and settings maximised people's choice and independence. Staff supported people in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice. Staff were recruited safely and there were sufficient staff to provide people's planned care and support.

### Right care

People received personalised care and support from staff they knew and who understood their needs. Staff knew how to keep people safe and protect from harm and relatives had no concerns regarding their family members safety. Staff followed safe infection prevention practice in people's homes.

### Right culture

Systems were in place to monitor and review the quality and safety of the service provided, for example, audits of care records. Staff felt valued and supported by a registered manager who promoted an open and inclusive culture. The management team and staff worked in partnership with other professionals to achieve good outcomes for people.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

### Rating at last inspection

The last rating for this service was requires improvement (published 20 June 2022).

#### Why we inspected

This was a planned inspection based on the previous rating to review the key questions 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.

The overall rating for the service has changed from requires improvement to good based on the findings of this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Social Care Academy on our website at [www.cqc.org.uk](http://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.

# Social Care Academy 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 Health and Social Care Act 2014.

#### Inspection team

The inspection team consisted of 1 inspector and 1 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. The inspector visited the service and the Expert by Experience gathered feedback about the service from people and their relatives via the telephone.

#### Service and service type

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

#### 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 48 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the registered manager would be in the office to support the inspection.

#### What we did before the inspection

We reviewed the information we had received about the service since the last inspection. We sought feedback from the local authority 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 1 person who used the service and 6 relatives about their experience of the care provided.

We spoke with 6 members of staff including the registered manager, care co-ordinator, team leader and care staff.

We reviewed a range of records, including 4 people's care records. We looked at 4 staff files in relation to recruitment and staff support and a range of records relating to how the service operated and was managed.

# 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.

Assessing risk, safety monitoring and management

- People's care and support needs were assessed before the service started to ensure these could be met safely.
- Risks associated with people's care and home environments were assessed and well managed. Risks assessments were in place to inform staff how to provide safe care and were regularly reviewed.
- Relatives said staff supported their family member safely and their care needs were fully met. A relative told us, "Staff are well trained, respectful and kind. The care plan is up to date and reviewed, they complete all the tasks. [Person] feels safe in their care."
- Staff demonstrated a good understanding of how to manage risks. One staff member said, "[Person] is prone to mini strokes (TIA), I need to be aware of any signs of confusion, weakness or co-ordination problems so that I can seek medical help immediately for them."
- The provider had a contingency plan to minimise any risks to the service running safely in the event of unexpected circumstances, for example adverse weather conditions.

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.

- We found the service was working within the principles of the MCA and if needed, appropriate legal authorisations were in place to deprive a person of their liberty.
- People and relatives confirmed staff worked within the principles of MCA. One relative told us, "Staff always ask [Person], before helping them they don't assume anything."

Staffing and recruitment

- There were enough staff to provide people's planned care calls. People were happy with their call times. One relative said, "Staff are on time, if for any reason they are running late they let us know." Another relative told us, "Staff always stay for the full duration of the call and complete all tasks. They are marvellous."
- Staff were recruited safely. The provider sought references and completed DBS checks. Disclosure and

Barring Service (DBS) checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.

- The provider had an electronic system in place to monitor the time staff arrived and left people's homes. The management team checked this regularly to ensure people had received their planned care. This ensured any late or missed calls were quickly identified and addressed.

Learning lessons when things go wrong

- Lessons had been learnt as improvements had been made to risk management and their recruitment processes since our last inspection.
- Staff recorded incidents and accidents, and these were reviewed by the registered manager and action taken to prevent reoccurrence. Any lessons learnt were discussed in team meetings.

Systems and processes to safeguard people from the risk of abuse

- People and relatives felt safe with staff. One person said, "I do feel safe with the staff who are well trained and experienced." One relative said, "[Person] is very happy with their care and staff who know them well. The support is amazing, and we have no concerns."
- Staff had received safeguarding training and understood their responsibilities to report any concerns to the registered manager. Staff were confident that their concerns would be followed up.
- The registered manager understood their responsibility to report any concerns to the local authority and to CQC to ensure any allegations or suspected abuse were investigated.

Using medicines safely

- People received their medicines as prescribed. There were systems in place to ensure this was done safely. One relative told us, "Staff give [Person] their medication we have no complaints or concerns about this."
- Staff completed training to administer medicines and competency assessments were completed to confirm they did so safely.

Preventing and controlling infection

- People and relatives confirmed that staff wore personal protective equipment (PPE).
- Staff received training in infection control and understood their responsibilities. They told us there was a good supply of PPE to maintain good infection control practice.

# 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.

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

- Since our last inspection managerial oversight and monitoring of the service had improved. Quality monitoring systems were in place to monitor the service and drive forward improvements. For example, checks of care records, staff competencies and care call times.
- Relatives spoke positively about staff. One said, "The staff are very good, lovely with a great sense of humour too." Another relative said, "I'm very happy with the staff nothing is too much trouble for them."
- Staff felt supported and received the guidance they needed to fulfil their roles through individual and team meetings. One staff member told us, "I love my job, everyone is really supportive and happy to help."
- The registered manager demonstrated an understanding of the regulations and their responsibilities. For example, they had informed us about important events within the service.

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

- People were happy with the service provided. One person told us, "I'm happy they are organised, and I would recommend them." A relative said, "The service is well managed and organised, the staff are very good."
- People and relatives were encouraged to provide feedback about the service through annual surveys. Relatives said, "The manager and office staff are helpful." One relative told us, "There was a personality clash between [Person] and a staff member. I raised this with the company, and they responded immediately and resolved it very quickly."
- Staff gave positive feedback regarding the open, honest and supportive culture of the service. One staff member said, "I feel valued and appreciated by the management team and I feel comfortable to speak to them about anything."
- The providers' policies and procedures prompted inclusion and diversity and reflected protected characteristics as defined by the Equality Act 2010.

Working in partnership with others; 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

- Staff liaised with a range of health and social care professionals involved in people's care to support their physical health and wellbeing as seen in the records we viewed.
- The registered manager understood the need to be open and honest when things went wrong in line with

the responsibilities under the duty of candour.