

Trinity Care Services Limited

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Inspection report

1445 London Road
Norbury
SW16 4AQ

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15 February 2023

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14 March 2023

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

Trinity Care Services Limited is a domiciliary care agency providing personal care. The service provides support to people living in their own homes in the community. 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 the service was providing personal care to 40 people.

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

People were safe using the service. Staff had received training to safeguard people from abuse and knew when and how to report safeguarding concerns to the relevant agencies. Staff understood how to manage risks to people to keep them safe. The provider carried out recruitment and criminal records checks on staff to make sure they were suitable to support people.

There were enough staff to support people. Staff attended care calls on time and people were supported by regular staff so that the care they received was consistent.

Staff followed current infection control and hygiene practice to reduce the risk of infection when providing care and support to people. Staff made sure peoples' homes were kept clean and hygienic.

Where the service was responsible for this, people were helped to eat and drink enough to meet their needs and to take their prescribed medicines. People were supported to manage their health and medical conditions. Staff were observant to changes in people's health and wellbeing and sought appropriate support for people when this was required.

People were supported in planning and making decisions about their care and support and could state their preferences for how this was provided. Staff knew how to meet people's needs in line with their preferences.

Staff were provided with training to help them meet people's needs. The provider supported staff to continually learn and improve in their role through regular supervision and staff meetings.

Staff were kind and caring. They treated people well and supported people in a dignified way which helped maintain their privacy and independence. People's feedback confirmed they were satisfied with the care and support provided by staff.

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.

The service was managed well. The provider monitored the safety and quality of care and support provided to people at regular intervals. They checked with people that care and support was delivered to a high

standard and continuing to meet their needs. The provider sought people's views through these checks about how the service could improve further.

The provider had systems to investigate accidents, incidents and complaints and used the learning from these to make improvements to the quality of care and support provided.

The provider was continually improving the service and had implemented new technology to help them do this. They worked proactively with partners to provide care and support that met people's needs.

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

Rating at last inspection

The last rating for this service was requires improvement (published 13 January 2021).

Why we inspected

This inspection was prompted by a review of the information we held about this service.

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?

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 ●

Trinity Care Services Limited

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 team consisted of 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 48 hours' notice of the inspection. This was because we needed to be sure that the registered manager would be in the office to support the inspection. Inspection activity started on 15 February 2023 and ended on 20 February 2023. We visited the location's office on 15 February 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. We used all this information to plan our inspection.

During the inspection

We spoke with 4 people and 2 relatives about their experiences of using the service. We spoke with the head office team which included the registered manager, the care coordinator and administrator. The head office team were trained to provide care and support to people using the service. We reviewed a range of records including 4 people's care records, records relating to staffing, recruitment, training and supervision and other records relating to the management 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 good. At this inspection the rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were safe using the service. People's feedback confirmed they felt safe when being supported by staff. One person told us, "They are very polite and trustworthy."
- Staff had been trained to safeguard people from abuse. They understood safeguarding procedures and how and when to report safeguarding concerns to the appropriate person or authority.
- The registered manager understood their responsibility to liaise with the relevant agencies if a safeguarding concern about a person was reported to them.

Assessing risk, safety monitoring and management

- The provider managed risks to people's safety and wellbeing. People's records contained information about identified risks to their safety and wellbeing. There was guidance and instructions for staff on how to manage these risks to keep people safe.
- When undertaking reviews of people's care the provider checked that measures in place to manage risks to people continued to remain appropriate.
- Staff had been trained to deal with emergency situations and events in people's homes to help them take appropriate action to support people in these instances.

Staffing and recruitment

- There were enough staff to meet the needs of people using the service. The provider used an electronic call monitoring system to schedule care calls which helped them make sure all available staff were allocated appropriately to meet these.
- Staff attended scheduled care calls on time. If they were running late, they let people know. One person told us, "Yes, they are on time...If they are stuck somewhere they will phone me to let me know that they are on their way."
- The provider used the electronic call monitoring system to monitor care calls. The system alerted the head office team if a staff member was running late for a care call so that they could let people know and when to expect them.
- The provider operated safe recruitment practices. They carried out appropriate checks on staff that applied to work at the service to make sure they were suitable to support people. This included checks with the Disclosure and Barring Service (DBS) who provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.

Using medicines safely

- Where the service was responsible for this, people received their medicines safely and as prescribed.
- People's records contained information about their medicines and how staff should support them to take them in a timely and appropriate way. Our checks of records showed people consistently received the medicines prescribed to them.
- Senior staff undertook competency checks on staff and audits on people's records to make sure staff administered medicines safely.

Preventing and controlling infection

- The provider managed risks associated with infection control and hygiene.
- Staff had been trained to keep people safe from risks associated with poor infection control and hygiene.
- Staff used personal protective equipment (PPE) effectively and safely. People's feedback confirmed staff wore PPE when attending their homes.
- Staff supported people to keep their homes clean and hygienic to prevent the spread of infection. One person told us, "I am very strict with hygiene and they are very hygienic."
- The provider's infection prevention and control policy was up to date. The provider had plans in place to make sure that infection outbreaks could be effectively prevented or managed.
- Staff had been trained in food hygiene to help them reduce hygiene risks to people when preparing and serving food.

Learning lessons when things go wrong

- There were systems in place for staff to report and record accidents and incidents. The provider investigated accidents and incidents and took action when this was needed to reduce the risks of these reoccurring.
- Learning from accidents and incidents was used to reduce safety risks to people. We saw an example of this where the provider requested a funding authority increase a person's care package to add an additional care call following an incident involving the person. This was agreed and there had been no further incidents involving the person since the additional care call was introduced.

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.

At our inspection in September 2019 we rated this key question requires improvement. At this inspection the rating has changed to good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

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

At our last inspection we recommended the provider consulted current best practice to ensure appropriate assessments were recorded and retained in line with guidance. This was because the provider did not always carry out MCA assessments for those people who may lack capacity to make particular decisions.

- At this inspection we found systems were in place to assess people's capacity to make and consent to decisions about specific aspects of their care and support. Where people lacked capacity to make specific decisions, there were processes to involve people's representatives and healthcare professionals to ensure decisions would be made in people's best interests.
- Staff had received training in the MCA and associated codes of practice. The registered manager understood their responsibilities under this Act.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- The provider made sure people's care and support needs were met by the service. They undertook assessments of people's needs, prior to them using the service, to make sure these could be delivered in line with current practice and guidance.
- People and others involved in their care had been involved in these assessments and could state their choices about how they wanted their care and support to be provided. One person told us, "When the service was starting, I told them what I needed."

Staff support: induction, training, skills and experience

- Staff were provided training to help them meet the range of people's needs. Training was refreshed at

regular intervals so that staff stayed up to date with current practice.

- New staff had to successfully complete a period of induction prior to supporting people unsupervised. This included an assessment by senior staff of their competency to meet people's needs.
- Staff had supervision meetings with managers to support them in their role and to identify any further training or learning they might need.
- People's feedback indicated they were confident in the ability and experience of staff. One person told us, "They know where everything is and don't have to depend on me."

Supporting people to eat and drink enough to maintain a balanced diet; supporting people to live healthier lives, access healthcare services and support; staff working with other agencies to provide consistent, effective, timely care

- Where the provider was responsible for this, people were supported to eat and drink enough to meet their needs.
- People's records included their preferences for meals and drinks. This helped staff make sure people were supported to receive food and drink of their choice.
- People were supported to manage their health and medical conditions. People's records contained information for staff about how they should do this.
- Staff were observant to changes in people's needs or when they became unwell and sought support for this where appropriate. A relative told us, "They are good at highlighting problems. Just this week they alerted the district nurse."

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.

At our last inspection we rated this key question good. At this inspection the rating for this key question has remained 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 were treated well by staff. One person told us, "They are very good. Always smiling. They are very patient. It takes time for me to sit up and when I do they will give me a little massage." A relative said, "They are very kind and caring."
- People received support from the same staff so that the care they received was consistent. The provider used their electronic call monitoring system to allocate staff to the same people wherever possible. One person told us, "I get regular carers and they are used to me. I don't have to keep explaining what needs to be done."
- People's preferences for who they received care from were respected. For example, people could state if they preferred to be supported by a male or female staff member. A relative told us, "They give us people we want. We wanted [male care support workers] who can speak our language, and that's who we have."
- People's wishes in relation to how their social, cultural and spiritual needs should be met were recorded so that staff had access to information about how people should be supported with their needs.
- Staff received equality and diversity training as part of their role to help them make sure people were not subjected to discriminatory behaviours and practices.

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

- People had been supported to express their views and be involved in making decisions. People's care records reflected the choices and decisions they had made about how their care and support was provided.
- People's feedback was obtained at regular intervals and through reviews to make sure the care and support they received was continuing to meet their needs.

Respecting and promoting people's privacy, dignity and independence

- People were treated with respect by staff who maintained their privacy and dignity when providing care and support. A relative told us "They treat [family member] with dignity and respect."
- People were supported to be as independent as they could be. People's care records prompted staff to support people to undertake as much of the tasks of daily living as they could. A person told us, "I take my own (medicines) to keep my mind active, but they do remind me to take it."

Is the service responsive?

Our findings

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

At our inspection in September 2019 we rated this key question requires improvement. At this inspection the rating has changed to 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; support to follow interests and to take part in activities that are socially and culturally relevant to people; supporting them to develop and maintain relationships to avoid social isolation

- People had choice and control over how their care and support was provided. Since our inspection in September 2019, the provider had updated people's records to make sure these reflected their preferences and choices for how and when they received support, taking account of their specific needs.
- People's records contained information about their life history and interests to help staff get to know people and meet their needs more effectively. People's records also contained information for staff about the important relationships in people's lives and how people should be supported to maintain these.
- Staff recorded the care and support they provided to people at each care call. Senior staff reviewed these records to make sure people were receiving the care and support planned and agreed with them.

Improving care quality in response to complaints or concerns

- There were arrangements in place to deal with people's concerns and formal complaints. People's feedback confirmed they knew how to raise a concern or make a complaint to the provider.
- When people had raised concerns and complaints we saw these were dealt with appropriately by the provider.
- Since our inspection in September 2019 the provider had improved their analysis and oversight of complaints which helped them promptly identify areas where service quality could be improved for people.

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- People's communication needs had been identified, recorded and highlighted so that staff had access to relevant information about how they should be supported with these.
- The provider had made key information available to people in accessible formats. We saw for one person, information had been provided to them about their scheduled care calls in large print to make this easier for them to read.

End of life care and support

- Staff had received end of life training to help them provide appropriate support to people if this need should arise.

- None of the people using the service required end of life care and support at the time of this 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.

At our last inspection we rated this key question good. At this inspection the rating for this key question has remained 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; engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- The provider encouraged a culture at the service which was focussed on people receiving high quality care and support from staff. Senior staff undertook telephone monitoring calls and home visits to people at regular intervals, to check staff were delivering care and support to people to a high quality standard.
- The registered manager and head office team were accessible and available to speak with people, their relatives and staff when needed. People told us they had no problems contacting the head office team when they needed to speak with them.
- People's feedback about the service was sought by the provider. The provider used telephone monitoring calls and home visits to gather people's views and ask what improvements they would like to see. Staff were encouraged through supervision and team meetings to give their ideas about how care and support could continually be improved for people.

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

- The provider had systems in place to check people received safe, high quality care and support. Senior staff used outcomes from monitoring checks to support staff to learn from and improve their working practices.
- The registered manager had the skills, knowledge and experience to perform their role, a clear understanding of people's needs and oversight of the service.
- People's feedback confirmed they were satisfied with the care and support provided by staff. People praised staff for being kind, caring and reliable. One person told us, "They are very good." A relative said, "People like to complain but I would like to take this opportunity to say how grateful I am. We have been paired with some really wonderful carers."
- Recent compliments received by the service showed people thought highly of staff and praised them for the care and support they provided.

Continuous learning and improving care; 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; working in partnership with others

- The provider had invested in technology to support the service to continually learn and improve. They had implemented a new electronic call monitoring system. The registered manager told us this had

improved scheduling and monitoring of care calls and given staff improved accessibility to information about people's care and support needs.

- The registered manager told us the new system allowed them to respond more quickly to issues or concerns raised about people by staff. We saw during a morning care call, staff alert the head office team via the system to report a person appeared unwell. The head office team immediately called the person to see what support could be provided and contacted the person's GP on their behalf in response.
- The provider was working with local faith based organisations to provide information and guidance to people in the community about the services they could offer. The registered manager told us this was because some people in the community were reluctant to access care and support from agencies as they were concerned their specific cultural needs would not be met. The registered manager said they were using this opportunity to demonstrate to people how the culturally diverse staff team at the service could meet their specific cultural needs when being cared for and supported.
- The provider notified CQC of events or incidents involving people which helped us check they took appropriate action to ensure people's safety and welfare in these instances.
- The registered manager understood their duty to give honest information and suitable support, and to apply duty of candour where appropriate.
- The provider worked proactively with a range of healthcare professionals involved in people's care and support. They acted on their recommendations and advice to plan and deliver care and support that met people's needs and helped them achieve positive outcomes in relation to their safety and wellbeing.