

Teesside Care Services Ltd

Support Solutions Middlesbrough

Inspection report

101 The Greenway
Thorntree
Middlesbrough
TS3 9PA

Tel: 01642030525

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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

Support Solutions Middlesbrough is a domiciliary care agency providing support for people in their own homes. The service was supporting 5 people at the time of the inspection.

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

People and relatives spoke positively about the care and support received. People were supported by a regular team of staff. The registered manager ensured staff had the appropriate skills and experience to support people safely. A robust recruitment process was in place.

The provider had systems in place to ensure people were protected from abuse and harm. Staff had completed safeguarding training. Individual and environmental risks were identified and mitigated against. Systems were in place to ensure people would continue to receive support in the event of an emergency.

The registered manager constantly reflected on the service provided. Information was reviewed with lessons learnt cascaded to staff. The service embraced the use of technology to promote people's care and support and to achieve positive outcomes.

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.

People were treated with respect and dignity. Staff had good knowledge about people, their interests, likes and dislikes. People and relatives were involved in reviews of their care and support.

Care plans were person centred and provided staff with clear information on how to support people in line with their preferences. People and relatives told us they had no complaints about the service but were aware of the complaint's procedure.

The provider had an effective quality assurance process to monitor the quality and safety of the service provided. The registered manager was passionate about ensuring people received the best care possible. Staff told us they felt supported by the management team. People, relatives and staff were encouraged to offer feedback.

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

Rating at last inspection

This service was registered with us on 28 October 2021, and this is the first inspection.

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 ●

Support Solutions Middlesbrough

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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Inspection team

The inspection was completed by 1 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

This inspection was announced. We gave the service 24 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the provider or registered manager would be in the office to support the inspection.

Inspection activity started on 24 March 2023 and ended on 5 April 2023. We visited the office on 28 March 2023 and the Expert by Experience spoke with people on the telephone on 29 March 2023.

What we did before the inspection

We reviewed information we had received about the service since it was registered. 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. This information helps support our inspections.

During the inspection

We spoke with 4 people who used the service and 1 relative. We looked at records relating to the management of the service. We looked at 3 people's care and support files. We spoke with the registered manager and asked a number of staff to answer some questions about the service via email which 3 staff completed.

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 of 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; Staffing and recruitment

- The provider had systems in place to reduce the risk of abuse and harm. Staff had completed safeguarding training.
- The registered manager had acted on concerns. These were fully investigated and referred to the appropriate authorities.
- Effective recruitment procedures were in place. The provider ensured new staff were suitable to work independently in people's homes. This included obtaining references and conducting checks with the Disclosure and Barring Service (DBS). DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.
- People received care and support from suitably skilled and experienced staff.
- People were supported by a consistent staff team. New staff were introduced to people prior to supporting them.

Assessing risk, safety monitoring and management

- Environmental and individual risks were identified, with risk assessments put in place with control measures to reduce the risk.
- Live information was monitored by the provider's electronic system. The electronic system sent an alert message to the registered manager if a call was missed, or staff were late. This allowed the service to take immediate action to resolve the matter.
- Contingency plans were in place to ensure people received continued care in the event of an emergency.

Using medicines safely

- Medicines were managed safely. Staff had completed safe handling of medicines training. The provider conducted regular checks to confirm staff remained competent to support people with their medicines.
- The provider's electronic system alerted the registered manager to any missed medicines. This meant staff were able to address the situation straight away.

Learning lessons when things go wrong

- The service had systems in place to learn when things went wrong. The management constantly reflected on the performance of the service and lessons learnt were cascaded to staff.
- Accidents and incidents were recorded and investigated.

Preventing and controlling infection

- Staff followed safe practices and used personal protective equipment to help prevent the spread of

infections.

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.

- Full assessments were conducted to ensure the service could meet people's needs.
- Information gathered was used to create people's care and support plans. These clearly set out people's needs and how they wished to be supported.

Staff support: induction, training, skills and experience.

- Training was up to date. The service used subjects contained in the care certificate. The registered manager completed regular spot checks to ensure staff remained at the appropriate standard.
- New staff completed an induction programme and had a period of shadowing an experienced staff member. One person told us, "New starters always come out with another carer."
- Staff were well supported in their roles and had regular supervisions and observations.

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.

We checked whether the service was working within the principles of the MCA, whether any restrictions on people's liberty had been authorised and whether any conditions on such authorisations were being met.

- Staff had completed MCA training.
- The majority of people could make decisions for themselves.

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

- People were supported in line with their preferences. One person told us, "My meal is heated up for me in the microwave, brought out on a tray with knife and fork. Always served with a cup of tea, [staff] always ask if I want any water or juice." Another person said, "[Staff] will prepare my vegetables for me so I can cook them later."
- Staff had completed food safety training.

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

- The service worked in partnership with healthcare professionals to ensure people received joined up care

and support.

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 and relatives were complimentary about the care and support provided. Comments included, "They (staff) definitely look after me. If I am too ill to go out to Bingo, the carer will play a game of cards or dominoes instead. It's good for me, I enjoy their visits," "Cannot fault them (staff), they are polite and respectful, they go the extra mile helping with the hoovering when I couldn't manage it," and "Carers (staff) all do a pretty good job, some go that extra mile to help out."

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

- People and relatives told us they were regularly involved in reviews of care and support. People had been consulted with about how and when they wanted support.
- The registered manager conducted regular reviews and often visited people to gather their views.

Respecting and promoting people's privacy, dignity and independence.

- People and relatives told us staff treated them with dignity and respect. One person told us, "Always have a lady carer, gives me a strip wash and helps to dry. She makes sure I'm warm, keeps me covered up." Another person said, "Always respectful and help when I need it."
- Staff could clearly explain how they respected people's right to have privacy and dignity.
- People were promoted to be as independent as they were able and wished to be. One person told us, "They (staff) have allowed me to get my independence back. I have a stool in the shower so able to wash myself, the carer stays just in case I need them."

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 requires good. This meant people's needs were met through good organisation and delivery.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control.

- Care plans were personalised and contained a good level of detail outlining people's routines and preferences. Information from external healthcare professionals was adopted into care plans ensuring staff had up to date accurate information.
- Staff were responsive when people's needs changed and alerted the management team immediately.
- The service supported people to remain part of the community. One person told us, "The (manager) visited and we discussed what help they could give me to help me. I don't like going out, so they arranged that a carer comes out with me to Bingo."

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 service complied with the Accessible Information Standard. People's communication needs were identified during pre-assessment.

Improving care quality in response to complaints or concerns

- People and relatives told us that they hadn't need to raise any formal complains as issues were dealt with straight away.
- The service had processes in place to respond to complaints and to learn from the information received. At the time of our inspection, no complaints had been received.

End of life care and support.

- At the time of the inspection there was no one receiving 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 service was managed well. The registered manager was passionate about providing good care. They had strong oversight of the service and demonstrated a clear understanding of people's needs.
- The provider had a clear mission statement and values. People's comments evidenced that staff were demonstrating these values throughout their calls.

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

- The registered manager was clear about their role and responsibilities and led the service well. They had submitted the required statutory notifications to CQC.
- Robust checks were completed by the registered manager. These included observational visits to monitor individual staff performance and ensure people received good safe care.
- The provider had an effective quality assurance system to review areas of the service and to drive improvement.

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

- People were regularly asked for feedback. One person told us, "One of the managers visits regularly and brought a feedback form for me to fill out. I have got no issues with the carers or the way they look after me." A relative said, "Manager gives us an opportunity to voice our concerns, they listen and take on board what we say."
- Effective communication systems were in place to ensure staff were kept up to date.
- Staff were respected, valued and supported.

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 understood their responsibilities under the duty of candour and was open and honest.

Working in partnership with others

- The service worked in partnership with other professionals to achieve good outcomes for people