

Better Support Staffing Ltd

Better Support Staffing - Main Office

Inspection report

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Ratings

Overall rating for this service

Requires Improvement 

Is the service safe?

Requires Improvement 

Is the service effective?

Good 

Is the service caring?

Good 

Is the service responsive?

Good 

Is the service well-led?

Requires Improvement 

Summary of findings

Overall summary

About the service

Better Support Staffing is a domiciliary care agency. It provides personal care to people living in their own homes. The service provides personal care to older people. At the time of our inspection there were two people using the service.

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

The provider did not always effectively manage risks to people's health and safety. Although the registered manager was the only person providing care and knew people's needs well, care records did not always clearly identify risks to people's care. The provider was not consistently safe in the management of people's medicines. Although the registered manager knew people's needs well, their medicines care plan was not completely clear on the side effects associated with people's medicines.

The provider conducted audits, but these did not identify the issues we found in relation to people's risk assessments and their medicines care plans.

People's needs and choices were assessed as part of the assessment process, and the provider supported people with their healthcare needs.

The registered manager had the skills, knowledge and experience to provide people with care. They had a good understanding of how to support other staff in providing people with care and told us they were in the process of hiring another staff member to support people.

The provider promoted a positive culture within the service. The registered manager sought and acted on people's feedback and people confirmed they felt comfortable in addressing any concerns with them directly.

The registered manager was aware of their responsibilities to ensure people were safe from the risk of abuse and took appropriate measures to prevent and control infection. There was also an appropriate system in place to manage accidents and incidents.

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 told us they were well treated and supported and their care records included details of their backgrounds, ethnicity and religions. People told us their privacy and dignity was respected and promoted and they were encouraged to maintain their independence as far as possible.

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

Rating at last inspection:

We registered this service on 23 December 2021 and this was the first inspection.

Why we inspected

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

Recommendations

We have made recommendations in relation to managing risks to people's care, medicines management and good governance. We will check if the provider has acted on the recommendations at our next comprehensive inspection.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

This was an 'inspection using remote technology'. This means we did not visit the office location and instead used technology such as electronic file sharing to gather information, and video and phone calls to engage with people using the service as part of this performance review and assessment.

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 not always safe.

Requires Improvement 

Is the service effective?

The service was effective.

Good 

Is the service caring?

The service was caring.

Good 

Is the service responsive?

The service was responsive.

Good 

Is the service well-led?

The service was not always well-led.

Requires Improvement 

Better Support Staffing - Main Office

Detailed findings

Background to this inspection

Inspection team

We carried out this performance review and assessment under Section 46 of the Health and Social Care Act 2008 (the Act). We checked whether the provider was meeting the legal requirements of the regulations associated with the Act and looked at the quality of the service to provide a rating.

Unlike our standard approach to assessing performance, we did not physically visit the office of the location. This is a new approach we have introduced to reviewing and assessing performance of some care at home providers. Instead of visiting the office location we use technology such as electronic file sharing and video or phone calls to engage with people using the service and staff.

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 and specialist housing.

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 provider a short period of notice of the inspection. This was because it is a small service.

What we did before the inspection

The provider was not asked to complete a Provider Information Return (PIR) prior to this inspection. A PIR is information providers send us to give some key information about the service, what the service does well and improvements they plan to make. We reviewed information we had received prior to completing our inspection.

We used all of this information to plan our inspection.

During the inspection

This performance review and assessment was carried out without a visit to the location's office. We conducted telephone calls to enable us to engage with people using the service, and electronic file sharing to enable us to review documentation.

Inspection activity started on 24 January 2023 and ended on 27 March 2023. We reviewed a range of records related to two people's care and support. This included people's care plans and risk assessments. We also reviewed records relating to the registered manager's training. We reviewed records related to the management of the service, which included quality assurance records and a range of policies and procedures.

We spoke with the registered manager for the service. We also spoke with one person using the service and the other person's relative.

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 requires improvement. This meant some aspects of the service were not always safe and there was limited assurance about safety. There was an increased risk that people could be harmed.

Assessing risk, safety monitoring and management;

- The provider did not consistently ensure risks to people were managed as clear risk management guidelines were not always in place. We reviewed the risk assessments for the two people using the service at the time of our inspection and found an example of one person with moving and handling needs without having clear risk management guidelines recorded in their care records. We also found information relating to risks to people's health and safety was spread across different documents and not always contained within their risk assessment.
- We spoke with the registered manager about this and they confirmed they had been the only person providing care to people and knew their needs well. They demonstrated a clear and detailed knowledge of people's care needs and the risks relating to their care. However, they told us they were in the process of hiring another member of staff and for this reason agreed the risk assessments needed to be clearer. The provider demonstrated they had made changes to people's care plans following our inspection.

We recommend the provider seek advice about devising clear and comprehensive risk management guidelines.

Using medicines safely

- The provider did not consistently ensure people's medicines were managed safely. The registered manager demonstrated a good level of understanding about the medicines people were taking and the level of support they required. However, we found people's care records did not always contain enough information for a new member of staff in managing people's medicines.
- For example, whilst we found people's needs assessments detailed the level of support they required and their risk assessments detailed which medicines they were taking as well as known side effects, we found it was not clear which side effect related to which medicine. The registered manager completed electronic MAR charts when recording medication administration and we found these had been fully completed.

We recommend the provider seek advice about developing clear and comprehensive medicines care records.

- People's relatives confirmed they received their medicines on time and as required. The provider had a clear medication policy and procedure in place which stipulated their responsibilities.

Staffing and recruitment

- The provider ensured there were enough staff in place to meet people's needs. At the time of our

inspection the registered manager was providing care to two people and completed two care calls a day. They confirmed they were in the process of hiring someone else in order to serve a greater number of clients.

- People confirmed the registered manager attended to them on time and for the full length of the call. The registered manager completed an electronic visit log when attending to people and this showed that they often stayed in excess of the call length time depending on people's needs.
- The registered manager demonstrated they met all relevant requirements for providing people with care. This included a reference attesting to their good character, right to work in the UK as well as Disclosure and Barring Service (DBS) checks. DBS checks provide information including details about convictions and cautions held on the Police National Computer. The registered manager also confirmed they understood the checks they were required to conduct before hiring anyone to work with people.

Systems and processes to safeguard people from the risk from abuse

- The provider took appropriate action to safeguard people from the risk of abuse. People confirmed they felt safe using the service. One person described the registered manager as "very trustworthy".
- The registered manager confirmed they had undertaken training in safeguarding adults at risk of abuse and we saw their recent safeguarding training certificate. They demonstrated a good level of understanding about signs of abuse to look out for and knew what to do if they suspected someone was being abused. The registered manager confirmed they had not had any concerns about people using the service.
- The provider had a clear safeguarding policy and procedure in place which included details of relevant agencies.

Preventing and controlling infection

- The provider took appropriate action to prevent the risk of infection. People confirmed the registered manager wore appropriate PPE when attending to them and provided care in a hygienic way. One person told us "well prepared" when providing care and had the PPE required.
- The registered manager confirmed they had training in infection control and we saw a copy of a recent certificate. They demonstrated a good level of understanding in their responsibilities which included the actions they would take if they suspected they had contracted an illness such as COVID- 19. The provider had a clear infection control policy and procedure in place, which included up to date guidance.

Learning lessons when things go wrong

- The provider was able to learn lessons when things went wrong. At the time of our inspection there had been no accidents and incidents in the provision of care to people using the service. However, the registered manager confirmed they knew what to do in the event of a medical emergency or incident. They had completed recent training in Basic Life Support and First Aid.
- The provider had an accident and incident policy and procedure in place which stipulated their responsibilities.

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.

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

- The provider worked with other agencies when needed to provide effective care. The registered manager confirmed they had not had any need to have extensive contact with other agencies, but they had worked alongside social services for some previous clients. They explained this was for those previous clients who had paid for services directly and they had liaised with social services to ensure they had all the relevant information to provide care.
- The provider supported people to live healthier lives. We saw people's care records included information about their health conditions and how staff should support them. The registered manager demonstrated a good understanding about people's health conditions and the level of support they required.

Staff support, training, skills and experience

- The registered manager had the training, skills and experience to conduct her role. We reviewed the provider's records and saw the registered manager had completed recent training in a number of areas and demonstrated a good understanding in these areas.
- The registered manager demonstrated a clear understanding of how to support other staff. Although at the time of our inspection the registered manager was providing support to people alone, they confirmed that they were looking to hire other staff. They told us they understood they would need to conduct regular supervisions, spot checks and appraisals of their work force.

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

- The provider assessed people's needs and choices before providing care. We found both people's care records contained information about the level of support they required as well as the tasks they required support in.
- People using the service confirmed they had an assessment of their needs completed before they started using the service. One person told us they had a discussion prior to the provision of their care and that they found the provider was "very accommodating" to their specific needs.
- The provider had clear policies and procedures in place which reflected current legislation. This included the infection control policy and procedure which included relevant guidance relating to COVID-19 safety measures.

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

- The provider supported people with their nutritional needs. People's care records showed neither person using the service had any specific nutritional needs, although some dietary preferences were recorded. We

found people's care records contained a basic record of the tasks the registered manager needed to carry out to support them in this area. The registered manager explained that they asked people exactly what they wanted when they attended to them and we saw this was recorded on logs of people's daily care.

- People using the service confirmed the registered manager assisted them with their meal preparation as required.

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

- The provider worked with other agencies to provide care where needed. The registered manager confirmed that although they had not had the need to work closely with different healthcare professionals due to the limited needs of her clients, they had worked with social services in the provision of care to some people.

- The registered manager demonstrated a good level of understanding about people's health conditions and their health needs.

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.

- We found the provider was working within the principles of the MCA. Both people using the service had signed declarations showing they consented to their care. Neither person using the service had any issues with their capacity, but the registered manager demonstrated an understanding of current legislation regarding the MCA.

- The registered manager confirmed they sought people's consent before providing daily care. They told us, "I always ask permission before I give... any personal care."

- The provider had a clear mental capacity policy and procedure in place which reflected current guidelines.

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 of this newly registered service. We have rated this key question 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 were well treated and supported. One person described the registered manager as "very respectful and kind".
- The registered manager confirmed they respected people's individual circumstances and demonstrated an understanding of the cultures and religions of her clients. They gave us an example of the specific religious needs of one of her clients and how they ensured they respected this. People's care records included details of their cultures and religions.

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

- The registered manager supported people to express their views and make decisions about their care. The registered manager told us, "I am constantly talking to people and listening to their views, asking their opinions and delivering care in line with their decisions. A lot of the time we sit and chat."
- People confirmed they spoke with the registered manager regularly and their needs were met. One person told us they had a "good relationship" with the registered manager and discussed their needs with them regularly.

Respecting and promoting people's privacy, dignity and independence

- People told us their privacy and dignity was respected and promoted. The registered manager confirmed they supported people in a dignified way. They gave us practical examples of how they did so and told us, "I will make sure I deliver personal care in a dignified way. I will ask [the person] to clean [themselves] where [they] can and make sure no area is exposed if it doesn't need to be."
- The registered manager supported people to be more independent and encouraged them to do what they could for themselves. At the start of our inspection we heard one person was in receipt of care for a short period of time. They told us the registered manager had supported them through this period and encouraged them to regain their independence.

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

- The provider ensured people received personalised care that met their needs. The registered manager told us and people confirmed that they had clear lines of communication and discussed their care needs at every care call.
- People's care records contained some information about their needs. This included the care tasks the provider was required to carry out. Although we noted there was a limited amount of detail within these records, the registered manager told us, and people confirmed their specific care needs were met at every call. For example, one person told us the specific food they wanted the registered manager to prepare at every care call and they met their daily preference.

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.

- The provider ensured people's communication needs were met. The registered manager told us and it was clear from our conversations with people that they did not have any particular communication needs. However, the registered manager demonstrated a good level of understanding about the requirements of the AIS and told us they were able to provide information in different formats if needed.

Improving care quality in response to complaints or concerns

- The provider demonstrated they were able to manage complaints appropriately. At the time of our inspection, the registered manager told us and people confirmed there had been no complaints in the provision of their care. However, people told us they would feel comfortable in complaining if there were any issues. One person told us they would feel comfortable telling the registered manager "straight away" if they had any concerns.
- The provider had a clear complaints policy and procedure in place. This included details of how a complaint should be managed including timescales. People confirmed they had received a copy of this prior to using the service.

End of life care and support

- The provider understood their responsibilities to deliver effective end of life care to people who needed it. At the time of our inspection the provider was not delivering end of life care to anyone. We saw the provider

had an end of life section within their care plan template form for those who needed this type of support.

- The registered manager explained that if the service were required to provide end of life care, they would work with the person's family and any other professionals as required. We saw there was an appropriate end of life policy and procedure in place which gave further details about how the provider was supposed to deliver this 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 requires improvement. This meant the service management and leadership was inconsistent. Leaders and the culture they created did not always support the delivery of 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

- The provider did not always take appropriate action to improve care. Although we found the provider was conducting a range of audits, these did not identify the issues we found in relation to people's care records.
- Following our inspection, the provider demonstrated they had made changes to people's care records in line with our comments.

The above issue constitutes a breach of Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014."

- The registered manager was clear about her role and understood her responsibilities. They demonstrated an understanding of her responsibility to manage risks related to people's care as well as other 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 provider understood their legal responsibility to be open and honest when things went wrong. At the time of our inspection there had been no need for the provider to report any significant incidents to the CQC, but the registered manager demonstrated an understanding of the circumstances in which they would be required to do so.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- The provider promoted a positive culture that achieved good outcomes for people. People told us they felt comfortable speaking to the registered manager about any issues.

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

- The provider engaged and involved people using the service. The registered manager confirmed they completed annual questionnaires with people using the service in order to obtain their feedback on the care they were receiving. We reviewed the latest questionnaire that had been completed and found this was positive.
- The registered manager told us and people confirmed, because they was providing people with their care directly, they could give feedback to her at every care call. This meant any issues were identified and

rectified immediately.

Working in partnership with others

- The provider worked with other agencies in the provision of people's care when needed. The registered manager confirmed they had worked with social services in the past for some clients and would work with people's healthcare professionals if needed.

This section is primarily information for the provider

Action we have told the provider to take

The table below shows where regulations were not being met and we have asked the provider to send us a report that says what action they are going to take. We will check that this action is taken by the provider.

Regulated activity	Regulation
Personal care	Regulation 17 HSCA RA Regulations 2014 Good governance Regulation 17 HSCA RA Regulations 2014 Good governance The provider did not always assess, monitor and mitigate the risks relating to the health, safety and welfare of service users. Regulation 17 (1)(2)(b).