

Care Signature Christian Homecare Services Number 12 Chapeltown Enterprise Centre

Inspection report

231-235 Chapeltown Road
Chapeltown
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West Yorkshire
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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

Number 12 Chapeltown Enterprise Centre is a domiciliary care agency providing personal care. The service provides support to adults living in their own homes. At the time of our inspection there were 40 people using the service.

People's experience of the service and what we found:

We found the provider did not always follow safe recruitment processes, carry out decision specific mental capacity assessments, or record details of 'when required' medications in care plans. We made recommendations in these areas. We found people who used the service were happy with their care. The provider care plans were person centred and detailed.

We expect health and social care providers to guarantee autistic people and people with a learning disability the choices, dignity, independence and good access to local communities that most people take for granted. Right support, right care, right culture is the statutory guidance which supports CQC to make assessments and judgements about services providing support to people with a learning disability and/or autistic people. 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

The staff supported people to have the maximum possible choice, control, and independence. Staff spoke confidently about always offering people choice. One person told us, "They [carer staff] are all very good to me and are always asking permission."

Right Care

People received kind and compassionate care. Staff protected and respected people's privacy and dignity. They understood and responded to their individual needs. People told us, "They {care staff} have shown so much care and compassion, it's been unreal."

Right Culture

People received good quality care, support and treatment because trained staff and specialists could meet their needs and wishes. A staff member told us the team "Is like a family" and one person told us, "I can rely on them."

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.

We have made recommendations about recording information of 'when required' medication in care plans,

safe recruitment processes, and completing capacity assessments in line with current guidance and legislation.

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

Rating at last inspection

The last rating for this service was Good published 13 June 2019.

Why we inspected

The inspection was prompted in part due to concerns received about staff competencies, Disclosure and Barring Service (DBS) checks, and medication administration. A decision was made for us to inspect and examine those risks.

We undertook a focused inspection to review the key questions of safe and well-led only. For those key question not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

You can read the report from our last comprehensive inspection by selecting the 'all reports' link for Number 12 Chapeltown Enterprise Centre on our website at 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.

Is the service well-led?

Good ●

The service was well-led.

Number 12 Chapeltown Enterprise Centre

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 2 inspectors 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

The 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 the provider or registered manager would be in the office to support the inspection.

What we did before the 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 reviewed all the information we held about the service including information about important events which the service is required to tell us about by law. We requested and received feedback from other stakeholders in Leeds and York. These included the local authority safeguarding team, Healthwatch, and commissioners. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England. We used all this information to plan our inspection.

During the inspection

We spoke with 7 people who were using the service, 1 carer, and 2 relatives of people using the service. We spoke with 10 support workers, the office administrator, and the registered manager. We looked at care records for 3 people. This included medication administration records, risk assessments, care plans, and daily records. We reviewed staff recruitment files, various policies and procedures, and the quality assurance and monitoring systems 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 has remained Good. This meant people were safe and protected from avoidable harm.

Using medicines safely

- People were supported to receive their medicines safely. People told us staff supported them with medicines well. One person told us the staff, "Go out of their way to make sure it's all covered".
- Staff spoke confidently about administering 'when required' medications, however, the provider did not have protocols in place that described when 'when required' medications should be administered.

We recommend the provider record any additional information to help manage 'when required' medicines in the care plan.

Systems and processes to safeguard people from the risk of abuse and avoidable harm

- People were safeguarded from abuse and avoidable harm. The provider had effective safeguarding systems and policies in place. Staff were familiar with the policy and spoke confidently about raising concerns. People told us they felt safe. One person said: "They do a proper job in keeping me safe at home, they really do".

Assessing risk, safety monitoring and management

- The provider assessed risks to ensure people were safe. Staff took action to mitigate any identified risks. Risk assessments were completed for people and specific to their needs. We found some risk assessments relating to moving and handling did not contain enough detail. We raised this with the registered manager who told us they would review and update these risk assessments.
- The registered manager did not have a process in place to ensure maintenance and checks of equipment were taking place in line with Lifting Operations and Lifting Equipment Regulations 1998 (LOLER). As part of this inspection we asked the registered manager to provide assurance the checks and maintenance had been completed. The registered manager provided the information within 24 hours and detailed a process for auditing moving forward.

Staffing and recruitment

- The provider ensured there were sufficient numbers of suitable staff. Staff received mandatory and specialist training. Staff told us managers carried out competency checks for medication administration and manual handling regularly, however we found not all records were available to view. The provider kept a comprehensive record of where training had been completed, however we found some staff refresher training was overdue.
- People told us staff were sometimes late to their visits. When this happened staff kept people informed. The registered manager monitored late visits on a weekly basis and addressed lateness with care staff directly.

- The provider did not always operate safe recruitment processes. Pre-employment checks did not always include explanation of gaps in employment. The provider did not submit evidence of completed staff file audits.

We recommend the provider follow relevant legislation and guidance, including Health and Social Care Act 2008 (Regulated Activities) Regulations 2014: Regulation 19, to carry out safe recruitment processes.

Preventing and controlling infection

- The provider managed the control and prevention of infection well. People were protected from the risk of infection as staff were following safe infection prevention and control practices. People and their relatives did not report any concerns relating to cleanliness or hygiene.

Learning lessons when things go wrong

- The provider learned lessons when things had gone wrong. Staff spoke confidently about managing and reporting accidents and incidents. The registered manager kept a complaints and compliments log for the service detailing what action had been taken in response. Complaints and compliments were reviewed by the management team on a weekly basis.

Is consent to care and treatment always sought in line with legislation 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.

- Staff carried out mental capacity assessments for all people using the service. We found the assessments were not always indicated under the MCA based on the person's needs, however, the registered manager told us this was due to instructions from their local authority commissioners. The assessments were not decision specific.

We recommend the provider follow relevant legislation and guidance, including the Mental Capacity Act 2005, to carry out decision specific capacity assessments with people where it is indicated.

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 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

- There was a positive and open culture at the service. The provider had systems to provide person-centred care that achieved good outcomes for people. Care plans were detailed and contained person-centred information. People's history was captured in care plans. Managers carried out monthly care plan audits.
- People were happy with the support they received. One person noted, "They treat me as an individual."
- Staff told us they felt supported by their management team and they found managers to be approachable.

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

- The provider had a clear management structure that monitored the quality of care to drive improvements in service delivery. The provider followed a program of audit that reviewed care plans and medication administration records (MARs). The registered manager carried out weekly audits looking for trends or themes in specific areas such as medication errors, falls, and skin integrity.

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

- People and staff were involved in the running of the service. The provider fully understood and took into account people's protected characteristics. The provider understood their responsibilities under the duty of candour.
- The provider conducted regular people satisfaction surveys and reviews for people. One person told us, "They always receive comments well and act on them if they are able to or explain why not."

Continuous learning and improving care

- The provider had created a learning culture at the service which improved the care people received. The registered manager spoke passionately about systems of audit and use of technology to lead service development and change. Staff felt the training they received was robust and noted managers encouraged and supported them to access additional training.

Working in partnership with others

- The provider worked in partnership with others. A care manager working with the provider suggested a

closer way of working which has been accepted well.