

Carepoint HC Limited

Carepoint HC

Inspection report

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22 November 2023

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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

Carepoint HC is a domiciliary care agency registered to provide personal care to people in their own homes.

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 the inspection, there were a total of 15 people using the service, with 9 people receiving personal care.

People's experience of 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. We considered this guidance as there were people using the service who have a learning disability and or who are autistic.

Right support

There were sufficient numbers of staff deployed to meet people's needs and ensure their safety. The provider had an appropriate recruitment procedure, however there were some shortfalls in staff recruitment records. The registered manager took immediate action and sent us information to confirm their actions after the inspection.

People were supported by staff who had been trained and were appropriately supervised. People's needs were assessed prior to the receipt of service. People were also protected from the risks associated with the spread of infection. People received their medicines safely and were supported to eat and drink in accordance with their care plan.

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.

Right care

People and their relatives told us staff were caring and treated them with kindness and respect. People and where appropriate their relatives had been consulted about their care needs and were closely involved in their ongoing care and support. Staff respected people's privacy and dignity. People and their relatives had access to a complaints procedure, if they wished to raise a concern.

Right culture

The provider promoted a person-centred culture which was focused on meeting people's individual needs. The registered manager carried out a series of audits to check the quality and safety of the service. People and their relatives were asked for feedback on the service. All people, staff and relatives praised the care and support provided by the registered manager. They confirmed the registered manager was approachable and helpful.

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 22/11/2021 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?

Good ●

The service was safe.

Details are in our safe findings below.

Is the service effective?

Good ●

The service was effective.

Details are in our effective findings below.

Is the service caring?

Good ●

The service was caring.

Details are in our caring findings below.

Is the service responsive?

Good ●

The service was responsive.

Details are in our responsive findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

Carepoint HC

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 was carried out by 1 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.

Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

At the time of our inspection there was a registered manager in post.

Notice of inspection

We gave the service short notice of the inspection. This was because it is a small service and we needed to be sure the registered manager would be in the office to support the inspection. We also requested consent from people, their relatives and staff members to call them over the telephone.

Inspection activity started on 21 November 2023 and ended on 22 November 2023. We visited the location's office on both days.

What we did before the inspection

We reviewed information we had received about the service and asked the local authority for feedback.

The provider completed a Provider Information Return (PIR). This is information providers are required to send us annually with key information about the service, what it does well and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

With their permission, we spoke with 4 people using the service, 3 relatives and 3 members of staff over the telephone. We also spoke with the registered manager at the agency's office. The registered manager is also the nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

We reviewed a range of records. This included 3 people's care plans and associated records. We looked at 2 staff files in relation to recruitment. In addition, we looked at records relating to the management of the service including policies and procedures and staff training as well as a sample of audits and quality checks.

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

- People were protected from the risk of abuse or avoidable harm. One person told us, "The carers are all lovely. I can't find any fault at all." Relatives had no concerns for the safety of their family members. One relative said, "The carers go above and beyond. They help us in every way they can."
- Staff had received training in safeguarding vulnerable adults and were knowledgeable of the internal and external reporting procedures.

Staffing and recruitment

- The provider had a recruitment and selection procedure which reflected the current regulations. However, we noted there were some shortfalls in the staff recruitment records and checks. The registered manager took immediate action and sent us details of their actions following the inspection.
- A sufficient number of staff was deployed to meet people's needs in a person-centred way.
- People told us they usually received care from the same team of staff. This meant there was a good level of consistency and staff were familiar with people's needs and preferences. One person told us, "I have a very good rapport with the staff. They are all friendly and helpful."

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- Risks to people's personal safety were assessed, monitored and managed effectively. People's care plan documentation included a series of risk assessments, which had considered risks associated with the person's environment, their care, medicines and any other factors.
- The provider had a business continuity plan which described how people would continue to receive a service in the event of adverse circumstances.
- The provider used computer-based systems to record any accidents and incidents. We noted the data was continually monitored and reviewed to identify any patterns or trends.
- Various methods had been established to ensure any lessons learned from observations of people's care, incidents, audits and people's feedback were communicated to the staff team.

Using medicines safely

- Medicines were managed safely. The provider's systems and processes were designed to ensure people had the level of support they needed to manage and take their medicines safely.
- Staff had access to best practice guidance and appropriate policies and procedures. Staff were trained to administer medicines and checks were carried out on their practice.
- Staff maintained appropriate records following the administration of medicines.

Preventing and controlling infection

- The provider had developed systems to help prevent and control the spread of infection. The provider had an infection prevention and control policy.
- Staff received training in infection control and the safe use of personal protective equipment (PPE), to reduce the risk of infections.
- Staff had access to PPE and people confirmed staff used the equipment when providing personal care.

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.

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.

- The registered manager and staff had completed appropriate training and applied the principles of the MCA. Staff understood the need to ask people for consent before carrying out care and people using the service confirmed this approach.
- People had signed consent forms to indicate their agreement to the care provided.
- There were no restrictions placed on people's liberty.

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

- People were supported to live healthier lives and access healthcare services.
- People's physical and mental healthcare conditions were documented within their care plan.
- Staff closely monitored people's health. One person told us how staff had recognised a significant deterioration in their health and had obtained timely medical assistance.
- The registered manager and staff worked with other social care and healthcare professionals as well as other organisations to ensure people received a coordinated and consistent service.

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

- The provider had established systems to ensure people's individual needs and choices were met.
- The registered manager completed an assessment prior to a person receiving a service. The assessment considered people's protected characteristics, such as sexuality, religion or belief and all aspects of their needs and choices.

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

- People were supported to eat and drink in line with their needs and preferences.
- The registered manager carried out risk assessments as necessary and monitored people's intake if they were at risk of poor nutrition and hydration.

Staff support: induction, training, skills and experience

- Staff were provided with appropriate support and training. People and their relatives told us the staff were competent and well trained. One relative said, "The carers are amazing. I can't praise them enough."
- New staff were supported through an induction programme, which included the provider's ongoing mandatory training. Staff training was monitored, to ensure staff completed their training in a timely way.
- Staff were provided with supervision sessions and an annual appraisal. This facilitated discussions around work performance, training needs and areas of good practice.

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.

Ensuring people are well treated and supported; respecting equality and diversity

- People were well treated and their rights were promoted and supported.
- People and their relatives expressed satisfaction with the care provided and made complimentary comments about the staff team. One person told us, "The carers are kind, respectful and very caring."
- The registered manager promoted and encouraged inclusion. Staff had received training on equality and diversity issues and had access to a set of policies and procedures.
- Staff understood their role in providing people with compassionate care and support. They were knowledgeable and respectful about people's individual needs, backgrounds and personalities.

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

- People were supported to express their views and were consulted in individual and meaningful ways. This ensured people were fully involved in decisions about their care and support.
- People told us the staff understood their individual needs and preferences and always accommodated these when delivering their care.
- Staff were committed to ensuring the best possible outcomes were achieved.

Respecting and promoting people's privacy, dignity and independence

- People's privacy, dignity and independence was respected. Staff offered people opportunities to increase their independence and to have freedom and control over their lives.
- Staff had access to policies and procedures and training about caring for people in a dignified way. This helped to make sure staff understood how they should respect people's privacy and dignity in a care setting.
- Staff understood their responsibilities for keeping people's personal information confidential. People's information was stored and held in line with the provider's policies and current legislation.

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 to ensure people have choice and control and to meet their needs and preferences

- People received personalised care and support specific to their needs and preferences. People told us they were happy with their care and staff responded to any requests made for assistance.
- People's care plans were personalised to reflect their care needs. The plans identified people's specific support needs and preferences, including details of the care to be provided.
- Staff understood people's needs and it was evident people were supported to make choices and decisions, wherever possible. Staff documented the care people had received, in a respectful way.

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 were identified and recorded in their care documentation.
- The registered manager agreed to add information to the statement of purpose to ensure people knew what to expect from the service. The registered manager also explained they will develop include an easy read version.

Improving care quality in response to complaints or concerns

- People had access to a complaints' procedure. The procedure was clear in explaining how a complaint could be made and reassured people their concerns would be dealt with.
- The registered manager had ensured complaints had been investigated and resolved.

End of life care and support

- At the time of the inspection, there was no one in receipt of end of life care. However, in these circumstances the registered manager explained the service would work closely with health and social care professionals to ensure the comfort and dignity of the person.
- People were offered the opportunity to discuss their end of life wishes if they wished to.

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.

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

- The registered manager and staff had a clear understanding of their roles and contributions to service delivery. We found staff morale was good and they felt valued and respected.
- The provider had established systems to monitor the quality of the service. The registered manager carried out audits and monitored the standards and safety of the service.
- The registered manager used various communication systems with staff, to ensure continuous learning and improvements took place. Staff told us they were comfortable raising any issues or concerns and confirmed the registered manager was open to feedback.

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 and acted on the duty of candour responsibilities.
- Good relationships had been developed between the registered manager, staff and people using the service.

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

- The registered manager and staff promoted the provision of person-centred care to achieve the best outcomes for people.
- Staff confirmed they felt everyone was well supported and they all told us how much they enjoyed their work. One member of staff told us, "I always look forward to going to work. I enjoy looking after people."
- Throughout the inspection, people and their relatives spoke positively about the registered manager and the staff team. One relative told us, "They are all absolutely wonderful. I can't praise them enough. Nothing is ever too much trouble."
- Organisational policies and procedures set out what was expected of staff when supporting people. Staff had access to these, and they were familiar with the key policies.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- Staff involved and engaged people in the service and considered their equality characteristics.
- People were actively consulted about the service and about their care. The registered manager had asked for ongoing feedback and acted on individual comments. The registered manager agreed to carry out an

analysis of the feedback as a whole to identify any patterns and trends. We received information of the analysis following the inspection.

- The registered manager and staff worked in partnership with external agencies to learn and share knowledge and information which promoted the continued development of the service.