

Mrs Gillian Ann Harris

# Clifton Care

## Inspection report

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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

Clifton Care is a home care service registered to provide the regulated activity of personal care. They provided care and support to people in their own homes. At the time of the inspection the service was provided to four people.

Staff recruitment procedures were safe and robust. Pre-employment checks were in place. The management of medicines and the support for those people who needed assistance, was safe and clear records were maintained. Staff recruitment procedures were robust and safer. Pre-employment checks were being completed.

Staff induction training and on-going mandatory training for the team was up to date. The feedback we had received from relatives we spoke with showed people were always happy with the service their family member received.

Care plans clearly set out the care and information staff needed to be able to support people with their care. Feedback we received from relatives we spoke with showed they were very happy with the service.

People benefitted because the service was a small family run business. One of the providers was also the registered manager. They took a very 'hands on' approach to running the service. People knew the registered manager very well and said the care was highly personalised to their needs.

The service continued to be well led This was seen in many ways, for example the registered manager knew each person who used the service extremely well. They ensured any shortfalls were swiftly picked up by their very regular contact with each person. There was clear evidence that the provider acted on the views and experiences of people using the service.

The service was effective. A system of staff supervision was in place to regular check and monitor staff performance and development.

People and relatives praised the caring nature of all the staff they saw. Relatives told us all the staff were very kind to their family members.

The service people received was responsive. This was because care plans provided staff with the information they needed to support people with the tasks and care they needed. Feedback from relatives and people was clear that staff were flexible and responsive to people's needs.

There was really clear evidence the provider acted on feedback about the service although this was not always recorded.

## 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 ●

# Clifton Care

## 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 continued to be 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 Care Act 2014.

#### Inspection team

The inspection was carried out by one Inspector.

#### Service and service type

This service provides care and support to people in their own homes. The service had a manager registered with the Care Quality Commission. 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.

#### Notice of inspection

This inspection was announced. We gave the provider 48 hours' notice because we needed to be sure staff and people who use the service were available to talk with us

#### What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. This helps support our inspections.

The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service

does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report.

We used all this information to plan our inspection.

During the inspection

We spoke with three people who used the service and one relative about their experience of the care provided.

We spoke with two members of staff including the provider/ registered manager.

# Is the service safe?

## Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At the last inspection this key question was rated as Good . At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were kept safe from avoidable harm and abuse. People told us they felt totally safe with all the staff.
- To make sure staff knew how to keep people safe there were systems, policies and processes in place. This ensured staff knew how to record and report safeguarding concerns if they ever had them.
- Staff had a good awareness of how to recognise abuse and when to report it. Staff told us if they had any concerns they would report them to the registered manager.
- The registered manager was very aware of their responsibility to swiftly report safeguarding incidents to the right authorities.

Staffing and recruitment

- People told us their care visits were always on time with no calls ever late.
- People expressed a lot of satisfaction with the consistency of regular staff. People told us that changes to staff visits occasionally happened. When this continued to be the case other staff were sent to support them.
- People told us and we saw there were enough staff to provide care to people. Additional staff were available to cover at short notice.
- Risks to people from unsuitable staff were minimised. This was because there continued to be a thorough recruitment process. This involved a screening of applicants, interviews, background checks and references.
- Staff received an induction, worked with senior staff and had competency checks prior to working with people on their own. Spot checks and audits were completed to ensure staff were working safely with people.

Using medicines safely

- There were safe systems for the management of people's medicines.
- People who received support with medicines had risk assessments and care plans to guide staff. Care plans set out how people liked to take their medicines.
- Staff had been trained to give medicines safely to people.

Preventing and controlling infection

- Systems were in place to support people to be protected from the spread of infections. This was because staff followed safe practices and procedures.
- The staff were trained in preventing infection. They used protective equipment, such as disposable gloves and aprons, to reduce the risk of infection.

### Learning lessons when things go wrong

- There were systems in place so lessons would be learnt from any incidents, accidents and occurrences. Incidents and accidents were recorded and monitored. Records showed guidance from health and social care professionals continued to be sought where needed.

# 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 the last inspection this key question continued to be rated as Good. At this inspection this key question has remained the same.

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

- People told us and care records showed how their needs were fully assessed before they had started receiving care and support from the agency.
- People received care delivered in line with best practice guidance. For example, an assessment tool was used to identify each person's needs around safe moving and handling, skin integrity, nutrition and hydration.
- People and their families were actively encouraged to be fully involved in identifying what their needs were. They were also involved in devising a plan of care to meet them. When care plans were reviewed people and their families were included in these reviews. This continued to be to ensure a shared agreement about the care and support to be provided.

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

- If any issues around people's health were picked up staff contacted health services. This included GPs district nurses and occupational therapists. This was to make sure people were fully supported to receive further treatment if needed.
- People were supported to maintain good health by staff working with other agencies to provide consistent, effective, timely care.
- Staff told us they knew people well and this meant they swiftly recognised changes in a person's health and wellbeing. Staff said where there continued to be any concern about a person's health it would be reported right away.
- Care records contained clear guidance about people's specific health conditions and how these impacted on their daily living and the support staff might need to provide.

Staff support: induction, training, skills and experience

- People were supported by staff with the skills and knowledge to provide safe and suitable care. New staff went on a full induction to learn about the role they would be doing. Additional training was also given if needed. A highly accredited social care training provider was used to provide staff training.
- Training included opportunities for staff to work with senior care staff in a shadowing role. Senior staff completed spot checks before staff provided care on their own to ensure new staff were safe.
- Staff we spoke to felt happy about the training they received. One member of staff told us they felt there continued to be always lots of training to do. They also said training needs identified were then put in place.

For example, they had asked for training around dementia care and this had been provided.

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

- People had their needs met to eat and drink enough to maintain a balanced diet. People's dietary needs were identified as part of their assessment. When support continued to be identified, people's preferences were included part of their care plan.
- Where there were risks relating to food intake, for example, if people had certain allergies or could choke, a risk assessment continued to be put in place. This continued to provide guidance to staff.

# 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 the last inspection this key question continued to be rated as Good. At this inspection this key question has remained the same. This meant people had their needs met and were 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 very positive comments about the care and support they received and how staff treated them. Examples of comments made included, "They are excellent."
- The staff we met and spoke to knew people well. They spoke about people who used the service in kind and caring ways. Staff conveyed a real warmth and compassion for people they supported.
- Staff spoke respectfully and with great regard for the people they supported. They told us they enjoyed their work.
- The service complied with the Equality Act 2010 and ensured people were not treated unfairly because of any characteristics protected under the legislation. Records showed as well as our discussion with the registered manager, staff and people that they were not discriminated against. Services were organised to ensure people's cultural, religious and spiritual needs were respected.

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 about their care. For example, about the level of support required and the time the service should be provided. Records showed people were involved in devising care plans and had signed to confirm they agreed with what continued to be in them.
- People were provided with choice and their choices were respected. One person told us how staff carried out a range of care and household tasks for them in the way they wanted things to be done.
- People were given information, including a service user guide so they could make informed decisions for themselves about the service. The service user guide also provided people with information about the level of support they should expect.

Respecting and promoting people's privacy, dignity and independence

- People's privacy and dignity was well respected by the staff who supported them. People confirmed they were always treated in ways that ensured privacy and dignity continued to be respected and upheld.
- Staff told us they promoted privacy and dignity when supporting people.
- Staff knew the importance of keeping information confidential. Care records were kept securely in locked cabinets in the office.

# Is the service responsive?

## Our findings

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

At the last inspection this key question continued to be rated as Good. At this inspection this key question has remained the same. 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 preference

- The registered manager took a very hand on approach to running the service. They were also one of the providers. They clearly had a passion and a drive to provide highly personalised care to meet people's needs. One recent example of this had been making sure staff always say a friendly 'good morning' to people before they begin any household tasks.
- People told us they received personalised care that ensured they had choice and control in their life. One person also told us "They have a chat with me they tell me about their families and their animals, which is very nice. "
- Each person had a care plan in place which gave clear guidance to staff on how they should be supported and in the way they preferred. Care plans contained information on people's medical, physical and social care needs; likes and dislikes and the level of support they wanted .
- Staff knew people they supported well, and they told us about the support they provided to ensure their needs were met safely.
- Daily care records confirmed how care and support for each person continued to be in line with the care and support planned with people.

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 continued to be 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.

- Care records explained how people's communication needs had been assessed and met. People told us they received information in formats that met their needs. Most people received information in the standard format. However, where required people were provided with information in formats such as large print or verbally.

Improving care quality in response to complaints or concerns

- The registered provider had a complaints policy and procedure for managing complaints. There had been no complaints raised since our last visit. From records viewed, we saw concerns and complaints were dealt with seriously and very promptly.

End of life care and support

- The registered manager confirmed people had been supported with end of their life care. They said if people started to need end of life care support they always fully involved the person and the most important aim was to respect their wishes. The service had worked in the past with other health professionals to ensure people received high quality 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.

At the last inspection this key question continued to be rated as Good. At this inspection this key question has now remained the same. This meant the service continued to be 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 a small family run business. This created a very person-centred, open culture achieving very good outcomes for people. For example, each person saw the registered manager on a very regular basis. They could also phone them at any time. The registered manager spoke with real warmth, care and passion about each person they supported. They told us how much they valued their role and the service they ran.
- People received care and support that continued to be person-centred, and met their needs. People said the registered manager was, "An excellent person."
- The management team empowered people to be in control of their care and support needs. For example, people chose when and how long each home visit should last and the level of support to be provided.

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

- People were very regularly consulted about the care they received and records showed people were very happy with the support they received. Comments included high praise for the staff people saw, as well as for the package of care they received.
- Office staff meetings were held where a range of subjects were discussed, such as risk assessments and care plans, new referrals or any important information. There were also regular care workers meetings, where staff had the opportunity to discuss any concerns and share communication.

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 had a clear vision for the service. They said this was to empower and enable people to live independently for as long as possible. Staff understood and embraced this value. This meant they provided people with the support they needed to live a fulfilling life.
- The registered manager conveyed a full understanding of the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong. They were very open, clear and transparent in their approach.
- The rating from the last inspection was on display in the office.

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

regulatory requirements

- There was a manager registered with the Care Quality Commission.
- There continued to be a clear structure in place and staff understood their individual roles, responsibilities and contribution they made to the service.
- The service had a simple but effective quality monitoring checking system in place. There were regular checks carried out by staff and managers. If issues were identified, for example around times of visits, these were addressed. This continued to ensure people's needs were met safely and to improve the quality of the service.

Working in partnership with others

- The service worked in partnership with other key organisations. This included the local authority and health and social care professionals to provide joined-up care.