

Goodwin Healthcare Services Ltd

Goodwin Healthcare Services Ltd

Inspection report

Ground Floor, Prince House
Queensway Court Business Park, Arkwright Way
Scunthorpe
South Humberside
DN16 1AD

Date of inspection visit:
19 December 2018

Date of publication:
17 January 2019

Tel: 01724231100

Website: www.goodwinhealthcare.co.uk

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

Goodwin Healthcare Limited is a domiciliary care agency. It provides personal care to people living in their own houses and flats in the community. Not everyone using Goodwin Healthcare Limited receives regulated activity. The Care Quality Commission (CQC) only inspects the service being received by people provided with 'personal care'; help with tasks related to personal hygiene and eating. Where they do we also take into account any wider social care provided. During the inspection there were 30 people receiving personal care. It provides a service to adults and children.

The announced inspection took place on 19 December 2018. At our last inspection we rated the service good. At this inspection we found the evidence continued to support the rating of good and there was no evidence or information from our inspection and ongoing monitoring that demonstrated serious risks or concerns. This inspection report is written in a shorter format because our overall rating of the service has not changed since our last inspection.

People were supported to have choice and control over their lives. Staff supported people in the least restrictive way. Policies supported this practice. Staff had a good understanding of the Mental Capacity Act 2005 and legislation relating to children.

Staff knew how to recognise and report potential harm or abuse. Safeguarding issues raised were reported and acted upon. Incidents and accidents were investigated. Risks to people's wellbeing were assessed and reviewed to maintain their safety and wellbeing.

There was enough staff available to meet people's needs. Training was provided to staff in a variety of subjects to develop and maintain their skills. Staff supervision and appraisals were undertaken to support staff.

People's dietary needs were understood by staff and were met.

People were involved in making decisions about their care and support. People told us the staff were caring and kind.

People's preferences for their care were recorded. Reassessments of people's needs occurred as their needs changed.

Complaints raised were investigated and this information was used to help to improve the service.

An 'on call' system operated outside of office hours to allow people, their relatives or staff to gain help and advice, at any time. Quality monitoring checks and audits took place. Senior staff undertook 'spot checks' to observe how staff deliver care. People were asked for their opinions about the service provided, feedback received was acted upon.

There was an open and transparent culture promoted at the service. The directors, registered manager and staff supported local sporting events and charities. The management team worked well with the local authority and other relevant organisations and health care professionals to promote an effective service.

Further information is in the detailed findings below.

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 remains good.	Good ●
Is the service effective? The service had improved to good.	Good ●
Is the service caring? The service remains caring.	Good ●
Is the service responsive? The service remains good.	Good ●
Is the service well-led? The service remains well-led.	Good ●

Goodwin Healthcare Services Ltd

Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection checked whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service and to provide a rating for the service under the Care Act 2014.

This inspection took place on 19 December 2018. It was announced and was undertaken by one inspector. We gave the service 48 hours' notice of the inspection visit because we needed to be sure that the registered manager would be in. Inspection site visit activity started on 19 December 2018 and ended the same day.

We visited the office location to see the registered manager, directors and staff. We reviewed care records and policies and procedures and spoke with people using the service by phone.

We used information the provider sent us in the Provider Information Return (PIR). This is information we require providers to send us at least once annually to give some key information about the service, what the service does well and improvements they plan to make. We looked at the notifications we had received and reviewed all the intelligence the Care Quality Commission (CQC) held to help inform us about the level of risk present and make a judgement about this service.

During our inspection we looked at a variety of records; this included three people's care records, risk assessments and medicine administration records (MARs). We looked at records relating to the management of the service, policies and procedures, maintenance records, quality assurance documentation and complaints information. We also looked at three staff files, which included staff's training, supervision and appraisal records, as well as recruitment documentation and staff rotas. We spoke with the registered manager, two directors, four staff, and three people using the service to gain their views.

We also asked the local authority commissioning and safeguarding teams and Healthwatch (a consumer

champion) for their views about this service prior to our inspection. We did not receive any information of concern.

Is the service safe?

Our findings

At the last comprehensive inspection, we found the service was safe and awarded a rating of Good. At this inspection, we found the service continued to be safe.

People confirmed they felt safe from harm and abuse. People told us, "I feel safe with the staff" and, "Yes, I am safe with the staff." A relative commented, "Mum felt safe and protected."

The provider had safeguarding and whistleblowing policies and procedures in place. Staff undertook training about how to protect people from harm and abuse. Potential issues were reported to the local authority and Care Quality Commission (CQC). This helped to keep people safe. Staff knew about the different types of abuse that may occur and understood what action they must take to help protect people. A member of staff said, "I would raise any issues and follow them through."

Risk was managed effectively and safely. People had risk assessments completed by staff at the service regarding their health for example, the risk of falls and risks present when bathing. Risk's in people's home environment were assessed and recorded for example, trip hazards or gas and electrical safety issues. This information was reviewed and updated when necessary. Staff supported people to ensure their safety was maintained without restricting their freedom of choice.

Staffing levels were monitored by the registered manager and directors of the service to ensure there were enough staff employed to meet people's needs in a timely way. A member of staff told us, "There is enough staff to cover the calls." We saw staffing levels were flexible and staff could support people with personal care, outings, social events and stay with people in emergency situations. The recruitment process included checks to ensure staff were suitable to work with children.

Staff were provided with regular training and supervision about how to assist and prompt people with medicine in line with the provider's medicine management policies. People's medication administration records (MAR) were used to record people's prescribed medicines. Known allergies were recorded to inform staff and health care professionals of any potential hazards. Medicine management audits were implemented to help to make sure people received their medicine as prescribed.

Staff were provided with personal protective equipment, for example; gloves and aprons, which helped them maintain effective infection control.

The management team monitored the safety and wellbeing of people using the service and staff. If accidents or incidents occurred they reviewed the information and took corrective action to prevent any further re-occurrence. Fire safety and maintenance checks of equipment and utilities were undertaken.

Is the service effective?

Our findings

At our previous inspection in June 2016, we rated this key question as 'requires improvement'. We found that a member of staff was unable to demonstrate they understood the Mental Capacity Act 2005. At this inspection we found that the necessary improvements had been made.

People told us the staff met their needs and understood how to support them. One person said, "Staff do everything I need them to do. Staff help with no hesitation." Another person said, "Staff do everything and ask me if there is anything else I want to do."

An assessment of people's needs was undertaken to make sure staff understood the care and support people required. Staff had a good understanding of legislation and guidance relating to children. Information was gathered from people, their relatives, from the local authority, relevant health care professionals and from discharging hospitals. This information was used to plan effective care and support for people.

Staff undertook training in a variety of subjects for example, safeguarding of adults and children, medicine management, health and safety, first aid, fire safety and maintaining infection control and the wellbeing of children. New staff undertook induction which, included working with senior staff and undertaking the care certificate (an agreed set of standards that sets out the knowledge, skills and behaviours expected of specific job roles in the health and social care sector). Staff told us "The training is really good."

Staff were provided with regular supervision and had a yearly appraisal which, enabled them to reflect on their practice, discuss their performance and any further training needs. Staff supervision was increased if there were any performance issues so they were addressed. Staff told us they were well supported.

People were provided with person-centred care. Small teams of staff were allocated to geographical areas which helped to develop trust and a good working relationship with adults and children. Staff understood people's individual needs and provided the care and support people wanted.

Staff monitored people's wellbeing and sought help and advice from relevant parties and health care professionals when people's needs changed. The registered manager told us they had good working relationships with local health providers to promote people's wellbeing.

People dietary needs were assessed and monitored and information about their dietary needs, preferences or food allergies were recorded. Staff encouraged people to take a balanced diet and prompted people to eat and drink, where necessary. Concerns about people's dietary intake were reported to relevant health care professionals which, ensured people's dietary needs were met.

We checked whether the service was working within the principles of the Mental Capacity Act 2005 (MCA), whether any restrictions on people's liberty had been authorised and whether any conditions on such authorisations were being met. People were encouraged to make their own decisions about their care and

support. Where people lacked capacity, care was provided in their best interests following discussions with their relatives and relevant health care professionals. This helped to protect people's rights. Staff told us, "We gain consent to provide care and ask people what they want, for example what they want to eat and wear."

The office was accessible for people wishing to visit the service and parking was available.

Is the service caring?

Our findings

At the last comprehensive inspection, we found the service was caring and awarded a rating of Good. At this inspection, we found the service continued to be caring.

People told us the staff were kind and caring. We received the following comments; "Every one of my carers are excellent they are professional and provide a quality service", "The carers are caring, helpful and very friendly", "Thank you very much for the kindness you [the staff] have shown me" and, "I am very happy with the consistency of the care staff."

People were looked after by small teams of staff to maintain continuity of care for people. People told us staff were friendly, reliable and felt the staff cared about their wellbeing. Staff understood people's needs. Providing consistent staff to support people ensured they were knowledgeable about people's background, life history and needs and this helped them to develop positive working relationships with people and their relatives.

People told us the staff discussed their care with them and they were asked to consent to the support provided. Where this was not possible staff acted in people's best interests and followed the information recorded in their care records to protect their rights. Staff confirmed people were encouraged to remain as independent as possible, with their support as required.

Staff told us how they used good eye contact and gentle appropriate touch to aid good communication with people. This helped people to feel cared for. People's communication needs were recorded in their care records. Staff were aware of this information.

People confirmed staff maintained their privacy and dignity. They told us personal care was provided in bathrooms or bedrooms with doors and curtains closed. People told us staff addressed them by their preferred name and friendly banter took place which, they enjoyed.

Publications were produced and were shared with people using the service, For example, 'How to Keep Well and Warm this Winter' and 'Keep Safe Keep Well'. The registered manager confirmed this was undertaken because they cared about people's wellbeing.

We saw that equality and diversity information such as gender, race, religion, nationality and sexual orientation was recorded in the care files. From speaking with staff, we could see that people were receiving care and support which reflected their diverse needs in respect of the nine protected characteristics of the Equality Act 2010. We saw no evidence to suggest that anyone who used the service was discriminated against and no one told us anything to contradict this.

Is the service responsive?

Our findings

At the last comprehensive inspection, we found the service was responsive and awarded a rating of Good. At this inspection, we found the service continued to be responsive.

People told us staff were responsive to their needs. We received the following comments; "The staff make sure I am clean and tidy. Staff do everything I need without any hesitation" and, "The staff are the reason I am able to stay at home. The staff work together they come out and do what I need them to do." A healthcare professional commented, "I have developed a very good working relationship with this service. The carers inform me of any concerns they have."

An assessment of people's needs was undertaken before people were offered a service. Information was gathered from people, their relatives, from the local authority, discharging hospitals and from relevant health care professionals. Staff used this information to create people's individual support plans and risk assessments. Risks such as falls, bathing, and medicine management were considered. Care records we inspected detailed people's likes, dislikes and preferences for their care and support.

If people's needs changed their care records were reviewed and updated to make sure people received the care and support they required. Staff were informed about people's changing needs. A member of staff told us, "We are kept informed and tailor make the support people require. We discuss the care options and have held multi-disciplinary team meetings to make sure people get the right support." One person commented, "I feel I am now ready to start to manage on my own. My health and confidence have improved significantly in recent weeks. Your staff have played an important part in my recovery and I will always be grateful for their support and friendship."

If staff were concerns about people's wellbeing they contacted the person's next of kin, the office staff, relevant health care professionals or the emergency services for help and advice. Staff assisted people to attend local health care facilities, their GP or hospital to promote their wellbeing. The provider had taken part in a pilot scheme with the local hospital to monitor people's admission to hospital and support their timely discharge.

There was a complaints policy in place which, was provided to people in a format that met their needs. People told us they could make a complaint but had none to raise. One person said, "I cannot say anything bad about the service. I would complain if I needed to." Complaints received were recorded and investigated and this information was used to maintain or enhance the service provided.

End of life care was provided for people. Staff worked with health care professionals to make sure people had a pain free and dignified death. Compliments about this type of care had been received including, "Thank you everyone who looked after mum for your caring and loving attitude" and, "A huge thank you for all the care and support that you gave mum and our family."

Is the service well-led?

Our findings

At the last comprehensive inspection, we found the service was well-led and awarded a rating of good. At this inspection, we found the service continued to be well-led.

People told us the service was well-led. One person said, "I think my service is wonderful. Staff are trustworthy and reliable. I have just completed a survey about my service." Another person said, "I could not wish for a better company. I get my rotas and know what is happening." A health care professional commented, "I would just like to say thank you for all the hard work, commitment, dedication and high level of support you provide to people in the community. You do a great job."

The service had a registered manager in place. A registered manager is a person who has registered with the Care Quality Commission (CQC) to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

The provider's ethos was to provide a good reliable service to people and to promote the diversity of people using the service and their staff. The management team implemented new ideas to enhance the service delivery for example, staff were now assigned to geographical areas to help the provider deliver their local authority contractual work.

There was an 'open door' policy in place and feedback about the service was welcomed. The registered manager and senior staff operated an 'on call' system so people using the service, their relatives and staff could gain help and advice at any time.

People's views were sought through feedback, by spot check's and through surveys. Any feedback received was acted upon to maintain or improve the service. We saw action plans were put in place to address any issues found.

Staff were asked for their views about the service through staff meetings and surveys. Minutes of staff meetings were created so those who were unable to attend were kept informed. Staff told us they were well supported. The directors worked with staff to see how further improvements could be made. A member of staff said, "The service is really good and well organised. All the support we need is there. The team meetings are good and the on-call team are always there to give advice." Another said, "The management team involve staff. They ask our opinions and ask for suggestions to make sure they have good outcomes for people and get things right."

Quality monitoring checks and audits were in place of areas such as people's care records, staff training and personnel files. Audit of people's medicine administration charts and accident and incidents that occurred took place. The registered manager liaised with health care professionals and other services to make sure people received the care and support they required. The management kept up to date with good practice guidance in the care sector, information was shared with all parties, in their newsletter. The last one, Winter

2018 informed people about calendar events and National Heart Month. Staff attended Local Authority forums and meetings.

The management team and staff supporting good causes in the local community such as, Lindsay Lodge Hospice and McMillan Cancer Research through taking part in 'It's a Knock Out' charity games. They also sponsored a local junior football team and Brigg Town Football Club and a person undertaking a charity boxing match.

The management team worked positively with the local authority commissioning and safeguarding team and with CQC.