

New Wings Ltd

New Wings

Inspection report

Southam House,
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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

New Wings is a domiciliary care agency. It is registered to provide personal care to people living 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 our inspection, two people were receiving personal care.

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

An electronic system was used to update care records and people and their relatives had access to them. Records were comprehensive and up to date. Staff were aware of people's communication needs and how best to provide support.

Relatives were very complimentary the care their loved ones received.

Medicines were managed safely. Staff were trained on how to identify and report safeguarding concerns. Safe recruitment practices were followed. Staff followed infection control procedures, had access to personal protective equipment (PPE) and had been trained in how to use it safely.

Training the provider deemed mandatory was up to date. People were supported by a range of healthcare professionals and staff sought medical assistance when people were unwell. Where people required support with eating and drinking, staff had the skills to support them safely.

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.

Staff promoted people's independence and respected their rights, privacy and dignity.

The registered manager had systems in place to monitor and improve the quality and safety of the service provided. People's views about the service were sought individually and through surveys. The registered manager worked with us in a positive manner and provided all the information we requested.

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 26 September 2020 and this is their first inspection.

Why we inspected

This was a planned inspection based on the date the service was registered.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner

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 ●

New Wings

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 Care Act 2014.

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.

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 service 24 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the provider or registered manager would be in the office to support the inspection.

Inspection activity started on 28 October 2021 and ended on 1 November 2021. We visited the office location on 1 November 2021

What we did before the inspection

We reviewed information we had received about the service since they became registered. We sought feedback from the local authority and professionals who work with the service. 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 of this information to plan our inspection.

During the inspection

We spoke with three relatives about their experience of the care provided. We spoke with the registered manager who is also the registered provider and a carer.

We reviewed a range of records. This included two people's care and medicine records. We looked at one staff file in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at a number of records sent to us electronically.

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 for this newly registered service. This key question has been rated good. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management

- Risk assessments were regularly reviewed and updated to ensure staff had accurate information to support people safely and effectively.
- Staff understood where people required support to reduce the risk of avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- Systems were in place to safeguard people from the risk of abuse. The registered manager knew how to take appropriate action if there were any concerns and staff understood their safeguarding responsibilities well. One staff member said, "Safeguarding is about protecting the health and wellbeing of vulnerable people."
- Relatives felt their loved ones were safe when New Wings were in their home. Comments included "[Name] is 100% safe" and "Since New Wings were engaged in caring for [person's name] the objective of keeping them happy and safe in their own home has been made possible."

Staffing and recruitment

- The provider had processes to ensure the safe recruitment of staff. These processes had been correctly followed, ensuring only people who were suitable to work with vulnerable adults were employed.
- Systems were in place to ensure enough suitably trained staff were available to meet people's care needs. The service never used agency staff.

Using medicines safely

- Medicines were administered safely.
- The registered manager carried out regular medicine audits.
- Staff had checks to ensure they were competent to administer medicines.

Preventing and controlling infection

- The service had an infection prevention and control policy (IPC) in place. Additional guidance in relation to IPC during the pandemic was introduced to provide staff with current information about COVID-19.
- Staff had received IPC training, including how to put on and take off PPE safely. Staff told us they always had access to PPE and relatives confirmed staff always wore it.
- The provider's electronic system had a PPE check in place that staff had to complete before starting a call.
- The provider was accessing regular testing for staff.

Learning lessons when things go wrong

- Accidents and incidents were reported and recorded appropriately. Although very few the registered

manager analysed them and looked for any patterns or trends so lessons could be learnt to keep others safe in the future.

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.

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

- People's care needs were assessed when they started to use the service and reviewed regularly.
- Care records included information about people's choices and staff were aware of individual's preferences.

Staff support: induction, training, skills and experience

- Training the provider had deemed mandatory was up to date. Staff had the skills and knowledge to carry out their role effectively. A staff member said, "[Registered manager] is always looking out for further training courses. I have recently been put forward for my NVQ 3." A relative said, "They [staff] have taught me a lot of safe practices for when I am there."
- New staff were provided with an induction programme to ensure they could carry out their role safely and competently and completed two weeks shadowing the registered manager on care calls prior to attending alone.
- Staff supervisions were taking place. One staff member said, "I receive excellent support from my manager."

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

- People's nutritional and hydration needs were met. Staff provided support with food preparation where people required it. One relative said, "[Carer's name] brought [persons name] fish and chips for lunch and sat and ate with them which encouraged them [person] to eat."
- Nutrition care plans were in place that provided staff with very person-centred detail on what the person likes to eat or drink and how they like it. For example, one person liked weak tea and only half a cup.

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

- People were supported to have access to a range of healthcare professionals to help ensure they remained healthy.
- Staff had a good understanding of the people they were caring for and how to manage any health-related concerns.
- The service had worked alongside other health professionals to meet people's needs, such as occupational therapists and district nurses.

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 Act 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.

- Nobody was subject to any restrictions authorised by the Court of Protection at the time of our inspection. Consent was obtained prior to care being delivered and we saw evidence of this.

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

- Relatives we spoke with were very happy with the care provided. Relatives we spoke with said "The standard of care is outstanding, they are committed to what they do and I can't speak highly enough of them", "They [staff] are so willing, so good and so kind, they go above and beyond, they are perfect" and "They [staff] go above and beyond in their thoughtfulness."
- The provider ensured staff had training on equality and diversity. Care plans contained person-centred information about their needs.

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

- Staff encouraged people to make decisions about their day to day routines and their care needs, in line with their personal preferences. One relative said, "They are so positive and cheerful which makes [person's name] more smiley." The registered manager said, "We give all service users choice, we listen to what they need and try to do the best to meet them."

Respecting and promoting people's privacy, dignity and independence

- The registered manager and staff respected and promoted people's privacy and dignity. One relative said, "They [staff] provide privacy when they use the bathroom, they allow him private time and wait outside."
- Care plans recorded the support people required to enable staff to meet people's needs. Staff encouraged people to be independent whenever possible. Relatives we spoke with said, "They [staff] provide choice, they go for walk's but he takes the lead and decides where they are going and he enjoys that independence" and "They always promote independence, they never choose the easy route."
- People's information was stored securely and used appropriately in line with the provider's confidentiality policy.

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 care and support that was focused on their individual needs, preferences and what was important to them. Care plans contained information to support staff with this.
- People and relatives were involved in the development of care plans. Relatives comments included, "They provide individual care, it is as if we are looking after my [loved one]" and their personal care is marvellous."
- The registered manager and staff understood the importance of promoting equality and diversity and respecting individual differences.

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 was 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.

- The management team ensured people's communication needs were assessed and any measures put in place to support them. Care plans contained relevant information about people's communication needs and information could be provided in different formats if this was required.
- The registered manager was trained in British Sign Language (BSL) and was teaching one person new signs to enable them to communicate more effectively. Once they had learnt one sign, they went onto learn a new one.
- A relative we spoke with said, "[Registered managers name] speaks to [person's name] all the time and their communication has improved, they have a very special relationship. She [registered manager] always keeps the conversation going and is very tuned into them. She is engaged with them all the time and they respond to this, which is very special."

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- People were offered choice with what they wanted to do. A relative we spoke with said, "They [staff] lets [person's name] choose whether they want a book or to watch a music video. [Registered managers name] dances with them, which they love. She is very tuned into him and his needs." One person was supported by New Wings to visit family. A Staff member said, "Family is important to this person so we picked them up and took them to visit."
- One relative commented on New Wings thoughtfulness stating, "They brought a DVD player for entertaining [person] while the television wasn't working."

Improving care quality in response to complaints or concerns

- The provider had a complaints procedure in place. However, no complaints had been received.

End of life care and support

- No one was receiving end of life care at the time of our visit. However, care plans recorded people's wishes and preferences.

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.

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

- Staff felt supported by the registered manger. One staff member commented, "I am very well supported by [registered manager] in all aspects of my role."
- Due to the service being so small official staff meetings had not took place, however the registered manager was in daily contact with staff and they met on a weekly basis or more often if needed.
- The service had systems in place to ensure people's individual support needs were met, including a detailed and person-centred approach to care planning. Relatives comments included, "They are absolutely brilliant, it couldn't be better" and "They are so professional and organised."

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 their duty of candour responsibilities. They knew when to submit notifications to CQC in line with legal requirements.
- The registered manager was open and responsive to our inspection feedback.

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

- The registered manager undertook a range of audits and checks on a regular basis to help ensure high standards were maintained. The registered manager said, "I just love what we do and want the company to be the best I can make it."
- Spot checks were done to ensure staff were arriving at calls on time, in the correct uniform and PPE and delivering care in an appropriate way.

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

- The provider had a clear and comprehensive policy on equality and human rights. We saw evidence within people's care records this policy was followed. People were treated with respect and as unique individuals.
- Questionnaires were used to obtain feedback from people. Every response was extremely positive. One relative said, "We are delighted with the service, I can't sing their praises enough, they are of a high calibre and a delight to have in our home, we are very lucky"
- The electronic care plan system was accessible to family members. One person said, "I have access to the care plan on the iPad and can see the notes they write."

Working in partnership with others

- The registered manager and staff worked in partnership with health and social care professionals who were involved in people's care.