

Britannia Social Care Ltd.

Britannia Social Care HQ

Inspection report

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17 March 2022

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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

Britannia Social Care HQ provides personal care to people living in their own homes. There were six people using the service at the time of our inspection.

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.

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

There were enough suitably trained staff to support people. Individual risks to people were considered and reviewed and changes made when needed. Medicines were managed in a safe way. There were procedures in place to protect people from potential harm. Infection control procedures were also followed.

People had access to health professionals when needed. People made choices about what they ate, their dietary needs were considered.

People were supported in a kind and caring way by staff that knew them well. They were happy with the support they received from the staff. People's privacy and dignity was considered and maintained. They were encouraged to make choices and remain independent.

People's preferences, including their likes and dislikes, were considered, and they received support based on these needs. People's communication was considered. There was a complaint policy in place.

Quality checks were completed throughout the service that identified areas of improvement. These improvements were made when needed. When things had gone wrong within the service lessons had been learnt. Staff felt supported and listened to by the registered manager and were able to make suggestions. They ensured they notified us of significant events that occurred in line with our requirements. People and relatives spoke positively about the company and the support they received.

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

Rating at last inspection and update

This service was registered with us on 18 January 2018 and this is the first inspection.

Why we inspected

This inspection was prompted by a review of the information we held about this service.

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.

Britannia Social Care HQ

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 one inspector 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.

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

We gave the service 48 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 16 March 2022 and ended on 17 March 2022. We visited the location's office on 17 March 2022.

What we did before the inspection

We reviewed information we had received about the service since it had registered with us. We also gathered feedback from the local authority. Local authorities, together with other agencies may have responsibility for funding people who used the service and monitoring its quality.

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 two people who used the service and three relatives or visitors about their experience of the care provided. We spoke with three members of staff including, the registered manager.

We reviewed a range of records. This included people's care records. We also looked at records relating to the management of the service, including procedures and governance records.

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 told us they felt safe being supported by staff. One person said, "All is going very well thank you and I feel very safe with all the people looking after me."
- There were procedures in place to identify and report safeguarding concerns. These procedures were followed when needed.
- Staff had received training in safeguarding, and they knew how to recognise and report potential abuse. One staff member told us, "It's keeping people safe, looking out for changes or anything we are concerned about. We have the telephone number so we could report this to the safeguarding team, if needed."

Assessing risk, safety monitoring and management

- Individual risks to people were considered and assessed, including any health needs. When people's needs had changed these plans were reviewed to reflect this.
- Environmental risks in people's homes had been considered to ensure staff were aware and any action needed taken to keep people safe.

Staffing and recruitment

- People and relatives told us there were enough staff to support them. One relative said, "They get the care when they need it, they are always on time."
- The records we reviewed showed us that people received care calls, on time in line with their assessed needs.
- Staff told us, and we saw, they received pre employment checks before working with people to ensure they were safely recruited.

Using medicines safely

- People told us they received their medicines as prescribed. Records we reviewed confirmed this.
- Staff administering medicines had completed training and their competency was reviewed to ensure they continued to be safe to administer medicines.
- There were systems in place to monitor medicines, to ensure people did not run out or that errors had occurred.

Preventing and controlling infection

- People and staff raised no concerns around staff practice in relation to infection control.
- Staff told us how they used personal protective equipment such as masks and gloves and how this was

freely available for them.

- Staff had received training and there were infection control procedures in place.

Learning lessons when things go wrong

- The registered manager was able to give us examples of how lessons had been learnt when things went wrong.
- They told us about a recent safeguarding, what had happened, what action had been taken and how they would do this differently if it occurred 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 of 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 gender, culture and religion were considered as part of the assessment process.
- People's physical, mental and social needs were also assessed and considered.
- People and those important to them were involved throughout the process.

Staff support: induction, training, skills and experience

- People and relatives told us staff had the knowledge and skills to support them. One person said, "I think the carers are wonderful and so well trained and know just what to do to help."
- Staff received an induction and ongoing training. During the induction staff had the opportunity to shadow more experienced staff. They also were introduced to the person they would support as part of this process.
- When people had individual needs, staff received specific training that related to this and this training was individual for the person.

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

- When needed, staff would support people at mealtimes and with drinks.
- People's dietary and nutritional needs had been assessed; these assessments had also considered people's preferences.

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

- People's health needs were monitored and reviewed. They had access to health professionals. When referrals and support were needed, we saw this was completed in a timely manner.
- Staff and records confirmed when they had supported people to access health care. For example, we saw that staff had contacted the GP for people when needed.
- People's oral health care was assessed to ensure people received the support.

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.

- Nobody was currently being supported in line with MCA.
- The registered manager and staff had received training in this area and were able to demonstrate a verbal understanding of what they would need to do, should someone start using the service.

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 of 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

- People and relatives were happy with the staff that supported them. They felt they knew them well and were treated in a kind and caring way. One person told us, "They are so very caring, I can't tell you what a difference they make." A relative said, "They are so compassionate, caring and empathetic they really are."
- Staff were able to give detailed accounts of people, including their likes and dislikes and what was important to them.

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

- People's records reflected their preferences and choices and how these were made.
- We saw people and relatives were involved in their care and this was regularly reviewed.
- Staff told us they offered people choices throughout the day. Including when they got up, if they had a wash or a shower and what they would like to eat or drink.

Respecting and promoting people's privacy, dignity and independence

- People's privacy and dignity was encouraged and promoted. Staff gave examples of how they would support people with this. Including enabling people to access the bathroom independently. People confirmed staff supported them in this way.
- Staff told us how they encouraged people to do tasks for themselves when they could to encourage their independence.
- Records we reviewed reflected the levels of support people needed.

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 of 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 had personalised care plans which considered their preferences. For example, how people liked to be supported with personal care.
- Where possible people had a small staff team that could offer them consistent support. The staff team had been identified with the person based on their preferences.

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.

- The Accessible Information Standard were considered. The registered manager and staff were aware of this.
- People's communication had been assessed. There were care plans in place identifying people's preferred methods. This also gave staff guidance as to how to support people.

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 able to pursue their hobbies and interests. We saw documented where staff had completed activities with people, such as crafts.
- Staff told us, and people confirmed, they ensured they were comfortable before leaving the call.
- During the pandemic the registered manager told us people had been offered a live-in service to help with the social isolation, some people had received this.

Improving care quality in response to complaints or concerns

- People and relatives felt able to, and knew how to, complain.
- There was a complaints policy in place.
- No formal complaints had been made at the time of the inspection.

End of life care and support

- There was no one currently receiving end of life.

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 of 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

- People, relatives and staff spoke positively about the company and the support they received. A person said, "I honestly do think that it is a jolly good service that I simply could not do without." One relative told us, "Top notch service and I would highly recommend them to anyone."
- Staff worked closely with people and their relatives to ensure good outcomes were achieved. Staff were able to give examples of this, like when they supported someone's mobility to improve after a stay in hospital.

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

- Duty of candour requirements were understood and met by the registered manager.
- When incidents had happened in the service, the registered manager was open and honest and had shared this information with people and relatives.

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

- Quality checks and audits were completed within the service. These covered key areas such as medicines and care planning. Where areas of improvement had been identified there was evidence of the action that had been taken to make these improvements.
- All staff understood their roles and responsibilities and there were clear lines of delegation.
- Staff felt supported by the registered manager. They had the opportunity to raise concerns by attending supervision. One staff member told us, "It's a really nice place to work, very supportive and if you have any problems everyone pulls together."
- The registered manager ensured that we received notifications about important events so that we could check that appropriate action had been taken.

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

- Feedback was sought from people who used the service, in the form of surveys. The information was analysed and shared. The feedback received was mainly positive.
- Staff attended team meeting so that they could share their views. They felt involved with the company and

that they were listened to.

Working in partnership with others

- The service worked closely with other agencies to ensure people received the care they needed.