

TrinityX Care Services Ltd

TrinityX Care Services Ltd (Howbury Lane)

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

About the service

TrinityX Care Services Ltd (Howbury Lane) is a domiciliary care agency located within the Borough of Bexley. It provides personal care and support to people living within their own homes. Not everyone using TrinityX Care Services Ltd (Howbury Lane) may receive a regulated activity. CQC only inspects the service being received by people provided with personal care; that 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 the service was providing support to one person.

People's experience of using this service

A relative spoke positively about the service and the kindness of staff. There were safeguarding and whistle blowing policies and procedures in place and staff had a good understanding of them and how to manage concerns. Recruitment checks were in place and there were enough staff to meet people's needs appropriately. Risks to people were robustly assessed to ensure their needs were safely met. Systems in place ensured that medicines were managed safely if required. Procedures were in place to reduce the risk of infections and staff had enough personal protective equipment.

Assessments of people's needs and wishes were completed and reviewed. People received support to maintain their health and to access services where required. People were supported to maintain a healthy diet where this was part of their plan of care. People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service supported this practice. Staff understood people's diverse needs and supported them appropriately. People's communication needs were assessed and appropriately met. People knew how to contact the service and to make a complaint if they were unhappy.

There were systems in place to ensure good oversight and management of the service. The service worked in partnership with health and social care professionals to meet people's needs. The provider took people's views into account and used their feedback to help drive service improvements.

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

Rating at last inspection

This was the first inspection of the service since the provider registered with the CQC.

Why we inspected

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

Follow up

We will continue to monitor intelligence we receive about the service until we return to visit as per our re-inspection programme. If any concerning information is received, 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?

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.

TrinityX Care Services Ltd (Howbury Lane)

Detailed findings

Background to this 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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Inspection team

The inspection was carried out by one inspector.

Service and service type

TrinityX Care Services Ltd (Howbury Lane) is a domiciliary care agency. It provides personal care and support to people with varying needs living within their own homes. At the time of our inspection there was a registered manager in place. 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 48 hours' notice of the inspection to ensure the registered manager would be present and available to speak with.

What we did before the inspection

We checked the information we had about the service including notifications they had sent since registering with us. A notification is information about incidents or events that providers are required to inform us about. We asked the local authority commissioning and safeguarding teams for any information they had about 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.

During the inspection

We met and spoke with the registered manager. Following the office visit we spoke with one relative of a person using the service to seek their feedback on the service provided. We reviewed a range of records including one care plan and care records and staff recruitment and training records. We also reviewed records used in managing the service for example, policies and procedures, monitoring tools and audits.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at records related to the management of the service.

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 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

- Systems were in place to protect people from the risk of abuse or harm.
- Staff had a good awareness of safeguarding policies and procedures in place to help keep people safe. Staff had received safeguarding training and were aware of their responsibilities to report and respond to concerns.
- There were systems in place to oversee any learning from safeguarding and accidents and incidents. This supported service improvements.

Assessing risk, safety monitoring and management

- There were systems in place that ensured people were kept safe from the risk of avoidable harm.
- Risks associated with the care people received were assessed and mitigated. Staff had access to detailed information about the risks posed to people and clear guidance was documented within care plans to help minimise identified risks.
- Risks to people were reviewed on a regular basis to ensure risk management and the care they received was reflective of their needs and risks.
- Staff knew people well and how best to support them to meet their needs and risks. A relative told us, "The carer is fabulous, they have a great relationship with [loved one] and know just how to support [loved one]."

Using medicines safely

- At the time of our inspection there was no one using the service that required support with administering their medicines. However, the service had systems in place that ensured people's medicines were managed safely as support with medicines management had been provided to people previously.
- Staff had completed up to date medicines training to ensure medicines were managed safely.

Learning lessons when things go wrong

- There were systems in place to monitor and support learning from accidents, incidents and safeguarding.
- Staff understood the importance of reporting and recording accidents and incidents and how best to respond.

Staffing and recruitment

- There were enough staff to meet people's needs when they required and in a timely manner.
- There were systems in place to identify if staff were late which allowed for issues to be remedied. Systems

included staff spot checks and observations and telephone monitoring.

- Staff were safely recruited and pre-employment checks were completed before new staff started work. Checks included employment history, identification, references, right to work in the United Kingdom and criminal records checks through the Disclosure and Barring Service (DBS). The DBS helps employers make safe recruitment decisions and helps prevent unsuitable people from working with people who use care services.

Preventing and controlling infection

- People were protected from the risk of infection.
- Personal protective equipment (PPE) such as facemasks, aprons and gloves were made available to staff.
- Staff had completed training on infection control and COVID-19.
- Staff supported people to understand how to reduce the risk of infection and helped them to maintain their personal hygiene and their home environment where required.

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 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 needs were effectively assessed before they started to use the service. This ensured the service could meet their needs and risks appropriately.
- A relative commented, "Communication is very good. We have consistency in care and we all know what's required."
- People's diverse needs were assessed, documented and supported. Assessments completed were holistic and included individual needs relating to any protected characteristics in line with the Equality Act. This included age, gender, disability, sexual orientation and race.

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

- People's nutrition and hydration needs, risks and preferences were met and supported by staff where this was part of their plan of care.
- Care plans documented individual nutritional needs, meal preparation, known allergies and risks when eating such as choking risks and any special dietary or cultural requirements.
- Staff received training on safe food handling and were aware of people's dietary needs, risks and preferences.

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

- People received support from staff to access services when required in order to maintain good health and well-being.
- Staff worked in partnership with health and social care professionals to ensure people's physical and mental well-being. For example, GP's, community nursing teams and local authorities.
- Staff monitored people's well-being at each visit and documented any issues or concerns taking appropriate actions when required.

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.

- People were consulted and supported to make choices and decisions for themselves. Staff promoted people's rights and worked within the principles of the MCA to ensure these were upheld. Staff received training on the MCA and understood the principles and application of these in practice.
- Care plans documented people's choices and decisions made about their care.

Staff support: induction, training, skills and experience

- Staff had the knowledge and skills to meet people's needs. A relative told us they felt staff were knowledgeable and well trained. They said, "They carer is very well trained and experienced. They are so good with [loved one]. The carer really enjoys what they do and it really shows."
- Staff were supported and trained through an induction programme, regular supervision and an on-going programme of training appropriate to the needs of the people using the service. Training provided covered areas such as health and safety, moving and handling, dementia awareness and equality and diversity.

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 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 told us they were supported by kind and respectful staff. A relative commented, "They [staff] are very caring, we are very happy with the care received. There is great continuity and a respectful relationship between the carer and [loved one] has been made."
- Staff understood people's individual and diverse needs. They were aware of the importance of working within the principles of the Equality Act. This means supporting people to meet their needs in relation to their age, race, disability, sexual orientation and faith.

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

- People and their relatives where appropriate, were involved in making decisions and choices about their care and support. People told us they were provided with information about the service and decisions they had made and wishes that were expressed were respected and met by staff.
- People's decisions and choices were documented within their plan of care. Care plans were reviewed on a regular basis to ensure people's needs and wishes were met and respected.

Respecting and promoting people's privacy, dignity and independence

- People were supported by staff that promoted their independence and treated them with dignity. A relative said, "The carer is very skilled, they know just how to work with my [loved one] sensitively to ensure [loved one] gets the care they need."
- Staff knew how to support people's privacy and dignity and were aware of the importance of maintaining confidentiality.

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 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; end of life care and support

- People received care and support that was tailored to their individual needs and wishes.
- Care plans were detailed and person centred, documenting individual's physical, emotional and mental health needs and things that were important to them. People's preferences were documented, respected and supported by staff where required. Staff reviewed and maintained care plans with people and their relatives where appropriate, to ensure they were reflective of their individual needs and wishes.
- At the time of our inspection no one required end of life care and support. However, care plans allowed for people to document their end of life care wishes if they chose. The registered manager told us that if required, they would work in partnership with health and social care professionals to ensure people's end of life care needs and wishes were met.

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.

- People's communication needs were identified, assessed and documented in their care plan to ensure staff knew how best to communicate and support them. Where people used hearing aids and or wore glasses, care plans informed staff and reminded them to support people to wear them where required.
- Care plans contained hospital passports which supported health and social care staff to be able to effectively communicate with people if they required medical support.
- Staff understood the importance of good communication and communication methods.
- Information was produced in formats that met people's needs. For example, easy to read or large print information and care plan documents were made available upon request.

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 supported to meet their social interests where this formed part of their plan of care.
- Care plans documented people's interests, hobbies and social networks and any support required from staff to enable them to meet those needs.

Improving care quality in response to complaints or concerns.

- There were systems in place to manage and respond to complaints appropriately in line with the

providers policy.

- A relative told us they were aware of how to raise a complaint and how to contact the manager if required.
- Systems were in place to monitor and investigate formal complaints. This ensured the service responded to them appropriately.

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 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.

Planning and promoting person-centred, high-quality care and support with openness; how the provider understands and acts on the duty of candour responsibility

- People received support that was tailored to their needs. A relative told us they received good care tailored to their needs and spoke positively about the manager and how the service was run. They commented, "We are very happy with the service. They [staff] come on time and are very caring."
- There was a registered manager in post who was aware of their responsibilities under the Duty of Candour and acted with openness and transparency during our inspection. The Duty of Candour is a regulation that all providers must adhere to.
- The registered manager was actively involved in the day to day running of the service and worked with people to meet their needs. This promoted a well-led person-centred service.

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

- The service had a registered manager in post. They were aware of their registration requirements with CQC and the legal requirement to display their CQC rating. The registered manager understood the importance of quality monitoring and continuous learning and improvement within the service.
- There were systems in place to assess and monitor the quality and safety of the service provided. The registered manager completed regular checks and audits in areas such as, care plans and records, safeguarding and medicines management. If issues or improvements were identified and required, systems were in place to ensure action was taken to improve the quality of the service where needed.

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

- There were systems in place to seek the views of people and their relatives through accessible means. These included regular reviews of care, staff spot checks, telephone monitoring and satisfaction surveys that were conducted twice a year. We looked at the feedback from the last survey completed in March 2022 which had very positive results.

Working in partnership with others

- The service worked effectively with health and social care professionals to ensure people received good holistic care. Records showed that staff worked alongside and communicated with professionals such as, GP's, community nursing services and the local authority to ensure people's needs were met appropriately.

