

Cadog Homecare Ltd

Sea Mills 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

About the service

Sea Mills Care is a domiciliary care agency providing personal care to people in their own homes. At the time of our inspection there were six people using the service.

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

People were happy with the service they received and had built positive relationships with staff. Staff often undertook extra tasks around the house, outside of the care package in order to support people in their everyday lives. People felt safe and staff had support plans and risk assessments in place to guide them with people's individual needs.

People and their relatives, where appropriate were involved in planning care. Regular reviews were undertaken to ensure care plans were up to date and reflective of people's current needs. People felt able to talk to staff if they had any issues or concerns. There was a policy in place to support people in making formal complaints if necessary.

Staff worked with healthcare professionals when necessary, such as district nurses and GPs. Staff received training and ongoing support to ensure they were able to meet people's individual health needs.

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.

The service was well led. There were systems in place to monitor the quality and safety of the service. People and staff felt well supported and confident they would be listened to if they needed to raise concerns.

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

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 ●

Sea Mills 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 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.

Service and service type

This service is a domiciliary care agency. It provides personal care to people living in their own houses and flats.

Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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.

At the time of our inspection there was a registered manager in post. The Operational Business Manager was registered with CQC, however there was also a manager in place running the service on a day to day basis and this person was intending to register.

Notice of inspection

We gave a short period notice of the inspection in order to be sure that there would be someone available to support the inspection.

What we did before the inspection

We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make.

During the inspection

We spoke with the registered manager, manager and contacted the two care staff employed by the company. We spoke with four out of the six people receiving support with personal care. We reviewed three people's care records and looked at other records relating to the running of the agency such as audits and policies.

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 using the service told us they felt safe with the staff that supported them.
- Staff were trained in safeguarding and knew what to do if they suspected abuse.
- There were no safeguarding concerns ongoing at the time of our inspection. However, the registered manager was aware of the processes to follow in reporting concerns to the local authority.

Assessing risk, safety monitoring and management

- There were risk assessments in place to guide staff in providing safe care and support. We did note that in some areas these lacked complete information. This was fed back to the registered manager who told us they would review assessments to ensure they contained sufficient detail.
- Staff told us they had sufficient information about people to enable them to provide care. One member of staff told us they were, "Very well prepared before attending on our own".

Staffing and recruitment

- People told us they had not experienced significant concerns with late or missed visits. On occasion staff ran late due to unforeseen circumstances. People understood this and told us communication was good at these times. This meant people were fully informed with what was happening.
- The service was small at the time of our inspection. However, in the future it was looking to expand, taking on more packages of care. The registered manager told us that recruitment had been challenging but they were continually exploring new ways of advertising; such as advertising on social media.
- The manager and care coordinators were able to carry out personal care in the event of unexpected absence of care staff.
- There were systems in place to recruit people safely. This included undertaking a disclosure and barring service (DBS) check. The DBS identifies any convictions that would affect a person's suitability to be employed and whether they are barred from working with vulnerable adults. References were sought from previous employers.

Using medicines safely

- People received their medicines safely. Not all people at the time of our inspection required support with their medicines. There was clear information in people's care plans about the specific support they required, including the list of medicines they were prescribed.
- Medicines Administration Records (MAR) confirmed people had received their medicines as required. These were returned to the office and audited on a monthly basis.

- Staff competencies were assessed to ensure they were able to support people with their medicines safely.

Preventing and controlling infection

- The registered manager told us they had experienced no concerns with supply of PPE and monitored to ensure that staff were using it in line with guidance.

Learning lessons when things go wrong

- There were systems in place to record accidents and incidents. These detailed what had happened and how the person had been supported.
- Recording accidents in this way allowed any common themes or trends to be identified.

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 needs were assessed at the outset of the care package. Staff met with the person and relatives if appropriate. A six week review then took place to check whether the person was happy and whether any changes were required. Reviews would then take place on a yearly basis, or when the person's needs changed.

Staff support: induction, training, skills and experience

- People were satisfied with the skills of staff who supported them. One person told us how happy they were with the support provided with a particular clinical procedure.
- Staff were satisfied with their training and support. One member of staff when asked about their training told us, "Very happy. I have not been rushed or pressurised in completing it within a timescale."
- Care staff had only recently been recruited but there were plans in place to carry out supervision on a regular basis.
- Spot checks were carried out to monitor staff performance and ensure they were carrying out care safely.

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

- Not everyone required support with their nutrition and hydration. Where people did there was clear information in their support plans. This included their food and drink preferences. In one person's plan it was recorded how they liked to have their cereal and how they liked to drink their tea.

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

- Initial assessments contained details of people's health conditions, such as Alzheimer's disease, angina and high blood pressure. This meant staff were able to monitor for any concerns relating to these conditions and report to the person's GP if necessary.
- The registered manager told us they would also liaise with other professionals as required. For example the dementia wellbeing service and district nurse.

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.

We checked whether the service was working within the principles of the MCA

- There was information recorded in people's support plans about their capacity to make decisions.
- If a person had power of attorney registered, details of this were included in their care notes

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

- People felt staff treated them well. Comments included, "Yes, I'm happy, they're good people", "Yes, I'm happy with them, they're friendly" and "They've been brilliant".
- People's care plans referenced people's cultural needs and backgrounds. For example we read that one person had been born in another country and worked as a nurse there.
- The registered manager gave examples of when staff had gone above their role to provide care and support to people. Example's included, watering the garden and putting bird seed out so that they could see birds visiting the garden.

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

- People and their families, where appropriate, were involved in the initial discussions about what they required from the service. The care was then reviewed at six weeks to ensure it was working and whether any changes were required. After this, the registered manager told us the care would be reviewed on a yearly basis.
- There was a system in place to undertake spot checks on people's care packages. During these spot checks people were given the opportunity to provide their opinion and raise any issues. One spot check record confirmed, "I am very happy to receive excellent service".
- The registered manager explained that satisfaction surveys were due to go out imminently. These had been planned at a time when people had been receiving care for a few months. This enabled people to experience a period of care so that they could feedback their care experience.

Respecting and promoting people's privacy, dignity and independence

- People's independence was promoted and encouraged. People's support plans contained important information in relation to which parts of their care routine they were able to manage for themselves.
- People confirmed staff treated them with dignity and respect.

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's support plans were person centred and contained specific details about how the person wished their support to be delivered.
- Reviews of support plans took place to ensure they were up to date and reflective of people's current needs.
- Staff told us support plans were clear and gave good information about the support people required. When a person's support needs changed, staff told us this was communicated well.

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.

- Nobody using the service at the time of the inspection required information in a particular format or another language. The registered manager told us they would accommodate any communication needs as required.

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

- It was clear that people had been able to build positive relationships with people that supported them. One person for example told us how staff had supported them to fill out forms they were struggling to complete.
- Staff were willing to support people with extra tasks around their homes. For example, staff helped to defrost one person's freezer so that it would continue to work properly.

Improving care quality in response to complaints or concerns

- There had been no formal complaints in the time the service had been operating. However, people told us they felt confident about raising issues if they had them. One person said, "Yes I can talk to them if I need to complain, I trust them".
- There was a complaints policy in place setting out how complaints would be managed. This meant staff and people using the service had a clear understanding of how complaints would be responded to.

End of life care and support

- Nobody was receiving end of life care at the time of our inspection.

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

- People felt well treated and happy with the service. One person commented, "They've been brilliant, they offer to come back if there's anything more they can do. Very, very good".
- Staff felt well supported and able to raise any concerns or issues if they had them. All staff felt confident they would be listened to.
- There were systems in place to monitor the service. For example, daily notes and MAR charts were checked for accuracy when they were returned to the office from people's homes. Action was taken if any discrepancies were identified.
- The service was visited regularly by the Operational Business Manager to keep an overview of the service.

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

- There had been no incidents or accidents that would fall within the duty of candour regulation, since the service had started to operate. The manager was aware of their duty to report incidents and accidents and be open and honest with people they supported.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- The manager and staff engaged people they supported through regular reviews of their care and through formal process such as feedback surveys.
- Staff told us communication was good. Messaging systems were used to ensure staff were up to date with important news and developments.

Continuous learning and improving care

- At the time of the inspection the service was small. This helped staff provide a personalised and good quality service. We discussed how this would potentially become more difficult to maintain as the service grew bigger. However, there were systems in place to support this. Regular contact was made with people using the service to gather their views and experiences and monitor for any issues or concerns with how the service was running.

