

Guild Healthcare Ltd

Guild Healthcare

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

Guild Healthcare is a domiciliary care agency that, at the time of the inspection, was supporting 58 people living in their own homes within the local community. 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

We had concerns at our last inspection and rated the service requires improvement in two key questions and overall. We also found two breaches of the Health and Social Act 2008 (Regulated Activities) Regulations 2014.

At this inspection we found improvements had been made in relation to how the service was monitored and audited which had resulted in improvements in the management of risk, medicines and compliance with the Mental Capacity Act. The service was no longer in breach of the regulations.

There were sufficient numbers of safely recruited staff available to meet people's needs. People received their care visits at the times they expected, for the length of time agreed, and from staff they were familiar with. One person's relative said, "There are enough staff to carry out the care package. We have one carer for most of the time and the replacements for time-off etc are fairly regular. I'm kept up to date with a weekly schedule and if there any unforeseen changes I'm promptly kept informed."

Medicines were managed safely, and staff were appropriately trained. People and their relatives were assured that safe infection control measures were taken by staff such as wearing PPE and following infection control procedures to reduce the risks of infection.

People receiving the service and their relatives both told us they were satisfied with the standard of care and support provided. People were cared for and supported by staff who were suitably trained. Assessments of people's support needs and wishes were carried out before they were provided with a service. Where staff were responsible for assisting people to eat and drink, their dietary needs and wishes were assessed and met. People were supported to stay healthy and well, and to access relevant community health and social care services as and when required.

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. One person's relative said, " I feel that my [family member] is safe and receives the care and support they need. The care package was put together in consultation with me as my [family member] lacks the mental capacity for any discussion."

The service was well-led by a management team who maintained good oversight of the service and who

were passionate about delivering quality care and achieving the best possible outcomes for people.

At the time of the inspection, the location did not care or support for anyone with a learning disability or an autistic person. However, we assessed the care provision under Right Support, Right Care, Right Culture, as it is registered as a specialist service for this population group.

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

The last rating for this service was requires improvement (published 1 May 2019) and there were breaches of regulation. The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Guild Healthcare on our website at www.cqc.org.uk.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

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 ●

Guild Healthcare

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

This 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 and specialist housing. This service also provides care and support to people living in 2 'supported living' settings, so that they can live as independently as possible. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for supported living; this inspection looked at people's personal care and support.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

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 6 February 2023 and ended on 16 February 2023. We visited the location's

office on 6 February 2023.

What we did before the inspection

We reviewed our systems and information we held about the service. 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. We took this into account when we inspected the service and made judgements in this report.

During the inspection

We spoke with 5 people who used the service and 11 relatives about their experience of the care provided. We also had contact with 12 members of staff including care staff, the registered manager and the care manager. We reviewed a range of records. This included care plans and a variety of other records relating to the management of the service were also considered as part of the inspection.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At our last inspection we rated this key question requires improvement. At this inspection the rating has changed to good. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management

At the last inspection there was a failure to ensure the proper and safe management of medicines. This was a breach of regulation 12 (Safe care and treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014

At this inspection improvements had been made and the provider was no longer in breach of the regulations in respect of the management of risk

- People's care and support needs were assessed before the service started to ensure these could be met safely.
- Risks associated with people's care and home environments were assessed and well managed. Risk assessments were in place to inform staff how to provide safe care and were regularly reviewed. A member of staff told us, "There is care plan in each [person's] home which includes all risks and how they are managed."
- Risks were regularly reviewed to ensure people were safely supported. People were usually supported by regular staff who knew them well, understood their needs and could respond swiftly as and when their needs changed.

Using medicines safely

- At our last inspection we found some discrepancies in medication administration (MAR) charts and care plans relating to medicines. We also found that PRN charts were not in place. At this inspection we found improvements had been made.
- People's medicines were managed safely. One person's relative told us, "We have a MAR Chart and [family member] always gets their medicines on time." Another relative commented, "They [care staff] are always on time and [family member] gets their medicines on time as well."
- Staff received medicines training and their practice was assessed to check they were competent to manage medicines safely.
- Staff supported people with their medicines according to their care plans.
- Care plans included details about the medicines that people had been prescribed and the type of support they needed. Care workers completed records when they administered medicines, and these were audited by the registered or care manager.

Staffing and recruitment

- People told us they received consistently good care from a small group of staff who were familiar with

their needs, preferences and daily routines. One person told us, "I have a schedule of carer`s and they always come on time, they are all lovely, very occasionally late, but that doesn't matter as its only 5 minutes. I have chosen the times [my preferences] and I'm really pleased with that." Another person told us, "They never miss [my care calls] and are always on time. I get different carer's, but I know them all. They are rarely late."

- Staffing was arranged around peoples commissioned hours, preferences and needs. The agency provided staff to two of the providers supported living services where staff were available on a 24-hour basis with staffing levels determined by people's needs.
- Staff told us their scheduled care visits were well coordinated, which meant they were able to get to their visits on time and complete all the tasks they were expected to do in the allocated time they had been given. A staff member said, "I have found travel time to be realistic, call times to be reasonable and if there are any issues, they have been dealt with promptly and feedback given." Another staff member said, " If there is an absence by a staff member the coordinator/assistant manager will put out a message offering the hours that need covering. Between the team we will cover all of the care calls. [People] always get a rota of what staff are attending."
- Staff were recruited safely, with all the necessary pre-employment checks carried out. This included Disclosure and Barring Service (DBS) checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions. References were also sought from previous employers.

Systems and processes to safeguard people from the risk of abuse

- People told us they felt safe with the care staff who regularly visited them at home and were confident any safeguarding issues would be taken seriously and appropriately dealt with by the provider. One person told us, "Yes, I'm absolutely safe, no grumbles. I would speak to the [registered manager] if I had to complain." Another person told us, "Yes, I'm safe. I`d speak to the [registered] manager if I wasn't happy but I am happy."
- People were kept safe from avoidable harm because staff knew them well and understood how to recognise and protect them from abuse. One member of staff told us, "Any safeguarding issues would immediately be taken to the [registered] manager. Safeguarding is taken seriously. Staff are trained and have knowledge."

Preventing and controlling infection

- People were protected from the risk of the spread of infection. Staff understood how to use PPE (personal protective equipment) when they were providing care and support.
- Staff wore gloves and aprons when required and regularly washed their hands. One person told us, "Care staff, they wash their hands frequently." Another person's relative said, "They wear everything especially gloves when doing personal care. The first thing they do when they come in is wash their hands."
- The registered manager carried out spot checks of staff practice including infection control.

Learning lessons when things go wrong

- The provider had systems in place to report and record any incidents and accidents that occurred and to learn lessons from them.
- All incidents/accidents and complaints were recorded and reviewed. They were analysed for any trends and to identify any outcomes and/or learning.
- Learning from these were shared with the wider staff team during staff meetings or through a weekly update provided to all staff.

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.

At our last inspection we rated this key question requires improvement. At this inspection the rating has changed to good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

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

- At our last inspection we were concerned that whilst people's care plans contained information on their dietary needs, this needed to be more detailed. At this inspection we found improvements had been made.
- People's dietary needs and preferences were known, recorded in their care plans and met. This included their likes, dislikes and any known food intolerances or allergies.
- Where people required support with their meals, this was clearly recorded, including what level of support was needed.

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.

- At our last inspection we identified that improvement was needed where people were living with dementia, so their care plans were clear about what decisions they were still able to make for themselves regarding their daily living activities. At this inspection we found improvements had been made.
- People were supported to have as much choice and control over their care as possible. One person told us, "They are helpful, friendly and I can't fault them. They know me very well and ask me if it`s okay to [provide my personal care]. Yes, communication is good."
- People's mental capacity had been considered as part of the pre-admission assessment process. Where people lacked capacity, consent had been given on the person's behalf by relatives with the necessary legal authority to do so.
- The registered manager and staff team completed MCA assessments to make sure choice and consent was upheld.
- Staff received training in relation to the MCA and had a good understanding of its principles. People were supported wherever possible to make their own decisions. One staff member explained how the MCA

affected their work. They said, "Mental capacity means that you must not assume that the person does not lack capacity until this has been confirmed by a [whoever is best placed to complete] a mental capacity assessment. Staff must not presume the [person] does not have capacity, it's not up to us to make that decision."

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

- The registered manager and staff were knowledgeable and well informed about people's health and wellbeing.
- The service made referrals to external professionals where needed, and advice was incorporated into people's care plans.

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

- People's needs were assessed prior to commencing their care in order to ensure their care needs could be met in line with current guidance and best practice.
- Care plans were regularly reviewed and updated, by the provider, as people's care needs changed. The reviews were carried out with the full involvement of people and/or their relatives.

Staff support: induction, training, skills and experience

- People received personal care from staff who had the right mix of skills, knowledge, and support to deliver it safely and effectively. One person's relative told us, "Yes, they are well trained... [family member] was [qualified healthcare professional] so knows about good care and feels that she is getting it [from Guild Healthcare]."
- New staff received a comprehensive induction and worked with an experienced staff member to get to know people and understand their care needs.
- The registered manager actively invested in staff learning and development and supported care staff to undertake additional training and qualifications wherever possible.
- Staff received regular supervision meetings which gave them the opportunity to discuss any concerns or development needs. A staff member said, " Management are very approachable, so you always feel supported and part of a solid working team."

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.

At our last inspection we rated this key question good. At this inspection the rating for this key question has remained 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 were supported by staff who were caring and treated them with kindness. One person's relative said, "We are treated with respect, compassion and understanding."
- People and their relatives told us staff were considerate and respectful. One person's relative said, "I would describe them as compassionate; we have a laugh. They know [family member], who [is living with] dementia and they all seem to be experienced in that field. They communicate in a non-communicative way if you know what I mean. They communicate through emotion; I hear them talking to [family member]."
- The registered manager and staff team put people first and foremost by providing a consistent and knowledgeable staff team wherever possible. One person's relative told us, "There are enough staff to carry out the care package. We have one carer for most of the time and the replacements for time-off etc are fairly regular." Another relative commented, "We have a schedule of carer`s and they always come on time-they are all lovely."

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

- Care plans were developed with people and their relatives, where appropriate. One person's relative said, "Me and Guild [Healthcare] staff did the care plan between us." Another person's relative told us, "Yes, the care plan was written with me, [family member] and the Guild Healthcare staff."
- People and, where appropriate, their relatives told us they felt involved in decisions about the care and support they received. One person's relative told us, "I`m definitely involved, we have just had the annual review and-we have changed things...They explain what they are going to do."
- The service kept a record of compliments from people and relatives which were shared with staff.

Respecting and promoting people's privacy, dignity and independence

- People and their relatives told us staff supported them in a way that maintained their privacy and dignity. This included when helping them with personal care. One person's relative said, "They help [family member] with their personal care and keep their dignity. They close the blinds and give [personal care] but it`s all done with dignity in mind." Another relative commented, "They help [family member] get in the shower and [family member] then washes themselves. They put a towel over [family member] to keep their dignity."
- Staff were observed in their usual work duties as part of the provider's quality monitoring processes. During these spot checks, members of the management team made sure that people's independence, dignity and privacy was promoted and respected.

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs.

At our last inspection we rated this key question requires improvement. At this inspection the rating has changed to 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 told us the service they received was person-centred and staff respected their expressed wishes.
- Care plans were detailed with clear information for staff to follow so they could support people safely and in the way they preferred. One person's relative told us, "They are very kind and caring. Two or three on the rota have consistency and text me and say we need 'such and such' they always have an eye on [family member] as nothing is too much trouble. They engage [family member] in conversations and help them with jigsaw puzzles as [family member] hates tv." Another person's relative said, "They nurture a 'family atmosphere' and look after [family member] as an individual."
- People's assessments and care plans were reviewed regularly as their needs changed. A relative told us, "We do a monthly review. No complaints and they are patient and understanding-they are 'above and beyond' all the time!"

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.

- People's communication needs were identified, recorded and highlighted in their care plan.
- People and their relatives told us staff communicated with them well and understood how they wished their care to be provided.
- The service was able to provide documentation, such as care plans, in different formats if needed.

Improving care quality in response to complaints or concerns

- The provider had a complaints policy which detailed how people could raise concerns if they were dissatisfied with the service they received and the process for dealing with their concerns.
- People and their relatives told us they knew who to speak with if they had any complaints to raise and were confident their concerns would be appropriately addressed. One relative said, "I get texts and e-mail updates. [I have] no complaints, they do everything well and keep an eye on [family member]."

End of life care and support

- The service worked in partnership with GPs, district nurses and other healthcare professionals to support people to have a dignified, pain free death.

- The registered manager told us they would respond to any requests or advance wishes and described a time when the service made adjustments to staff working patterns to ensure a person who was at the end of their life could stay at home and receive care as per their wishes.

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.

At our last inspection we rated this key question requires improvement. At this inspection the rating has changed to 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; 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

At our last inspection we were concerned that the auditing processes in place had failed to identify some of the issues we found with documentation. At that inspection we found improvements needed with the safe management of medicines and that care plans and risks assessments were not sufficiently detailed.

This was a breach of regulation 17 (Good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

At this inspection improvements had been made and the provider was no longer in breach of the regulations.

- People and their relatives told us they were happy with the service and support provided and would recommend them. One person told us, "Yes I would recommend as I like to see the carer`s-they chat to me and cheer me up in the morning when I`m grumpy!" Another person's relative said, "Of course I would recommend. They are very good and look after [family member], they are very caring, and nothing is too much trouble!"
- The staff team spoke of a positive culture at the service and said they enjoyed their roles. One member of staff said, "I received presents from Guild Healthcare on my birthday and Christmas, and other occasions. I feel valued and my work is appreciated." Another staff member told us, "The culture of the service is great. All the staff go above and beyond [for people] and it feels great to put a smile on their face." A third staff member said, "I can honestly say hand on heart I am so proud to be working for Guild Healthcare and would not want to work anywhere else. I love my job."
- Duty of candour requirements were met. This regulation requires safety incidents to be managed transparently and apologies provided where necessary. The registered manager fully understood the responsibilities to be open and honest with people.
- People spoke positively about the way this home care agency was managed. A relative said, "I know the manager based at Acl and have confidence in their leadership. They do not let me down in any way."

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

- There was a range of checks and audits to monitor the quality and safety of the service and to help drive improvements. The service was in the process of moving to an electronic care planning system which the registered manager told us would enable enhanced oversight.
- The provider was actively involved in the service and met with the registered manager on a daily basis.
- There were processes in place to monitor the quality of service, these included regular care plan reviews, medicines and daily notes audits.
- The provider understood their regulatory requirements and submitted notifications to CQC appropriately.

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

- People and their relatives were encouraged to express their opinions. Systems were in place to gather feedback and hear the views of people, relatives, and staff. One person told us, "We did a questionnaire last year asking if I was happy- and I was! There was also a questionnaire for both of us-no issues-other than [specific request] and they do that now. We get e-mails, word of mouth and letters." Another person's relative told us, "It couldn't be done any better! We haven't completed a questionnaire but the carer's tell me everything. I would recommend it to anybody; I mean to anybody. They do everything!"
- Staff had a clear understanding of their roles and their day to day work which focused on the people they supported. This was aided through good communication amongst the team. One staff member told us, "We have a great [registered] manager who leads the team very well. Our [registered] manager holds regular meetings for the care staff, so we all have a chance to discuss any issues regarding the [people who use the service]."

Continuous learning and improving care

- There were systems in place to monitor the quality of service provided to ensure good oversight. 'Spot checks' were carried out so that the registered manager could observe staff delivering care and identify areas of good practice and offer training and support if needed.
- Staff and the management team worked in partnership with health and social care professionals to ensure people had the care and support they needed to maintain their health and wellbeing. One member of staff told us about how the registered manager had listened to their concerns about a person's health needs which resulted in action being taken. They told us, "[Registered manager] and the family got together... they listened to my concerns and immediately took action to help the [person] in a friendly and professional caring manner, ensuring the [person] got the necessary help needed."