

Spring Retirement Limited

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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

Spring Retirement Limited is a domiciliary care agency which provides personal care and support to people who live in their own homes across the country. The service provides live-in care staff.

The service is registered to support younger adults, older adults, people living with dementia, physical disability and sensory impairment. At the time of the inspection the service were providing personal care to five people.

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 received safe care and support by staff that were trained, experienced and understood how to keep people safe from harm. Risk assessments were in place and showed what action had been taken to mitigate identified risks.

The provider followed safe recruitment processes.

Where required people received their medicines safely. Staff were trained to administer medicines and complete medicine administration records (MARs) fully which identified people had been receiving their medicines as prescribed.

Safe practices were followed to reduce the risk of infection. Staff wore personal protective equipment (PPE) in line with current guidance. The manager reviewed any accidents and incidents ensuring any lessons learnt were acted on and shared with the staff team.

Where required people were supported by staff to eat and drink enough to maintain a healthy balanced diet.

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.

People's health needs were met as staff and the management team had a detailed knowledge of the people they were supporting. Staff and managers engaged with healthcare professionals where required to ensure people's identified health care needs were met.

Staff had developed good relationships with the people they were supporting. This was supported by care

plans that were personalised to each individual. Care plans contained detailed information to assist staff to provide care in a way that respected individual's needs and wishes.

People and their relatives had access to information on how to raise any complaints. Procedures were in place for the manager to monitor, investigate and respond to complaints in an effective way.

The provider's quality monitoring processes included regular checks to ensure good quality care was provided to meet people's needs.

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 15/05/2019 and this is the first inspection.

Why we inspected

This was a planned inspection.

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 ●

Spring Retirement Limited

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 live-in care services to people living in their own homes.

The service had a manager in post who had applied to register with the Care Quality Commission. This means the provider is 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. This was because it is a small service and we needed to be sure that the provider or manager would be in the office to support the inspection.

What we did before the inspection

We reviewed information we held about the service and the provider. 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 the provider, the manager and the nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

We reviewed a range of records. This included two people's care records. We looked at six staff files 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 spoke with two people's family members who spoke to us on their behalf about their experience of the care provided. We did this because some people who used the service had difficulties speaking with us by using the telephone. We spoke with two members of staff.

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.

Systems and processes to safeguard people from the risk of abuse

- People were supported by staff that were trained and understood how to recognise signs of abuse.
- Staff told us what action they would take if they had any concerns.
- The provider had a safeguarding policy which was available to staff.

Assessing risk, safety monitoring and management

- Risks associated with people's care and support had been properly assessed and managed. Where concerns had been identified, appropriate actions had been taken to reduce risks and keep people safe. For example, one person's risk assessment detailed the measures needed to help reduce the risk of falls.

Staffing and recruitment

- Staff were not directly employed by the service, they were self-employed care staff.
- The provider had robust registration processes in place which ensured people were supported by staff that had the appropriate skills and experience. Staff had undergone detailed checks which included Disclosure and Barring Service (DBS) checks.
- There were sufficient numbers of staff. The service worked on the principle of having up to three members of staff available for each person receiving care and support.

Using medicines safely

- Not all people using the service required support with their medicines. For those people that required support staff were trained to administer them safely. Relatives told us their family members got their medicines as prescribed.
- Staff regularly had their skills and competency checked by the manager.
- The manager carried out audits on medicines administration records. This ensured people's medicine administration was effectively managed.

Preventing and controlling infection

- Staff said they had enough personal protective equipment (PPE) and had access to regular testing. One staff told us, "They [managers] always check we have enough stock and will always send stock out if supplies are becoming low."

Learning lessons when things go wrong

- Staff knew how to report any accidents and incidents and told us they were confident if there were any incidents these would be acted on appropriately.

- Accidents and incident records were reviewed by the manager and any learning from these were shared with the staff team.

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 prior to receiving a service. Relatives confirmed they, and their relative were involved in the assessment process.
- People and their relatives were actively involved in selecting the right members of staff in order to meet their particular needs. The provider created personal profiles on each member of staff which were shared with people prior to them receiving care. Profiles included staff likes and dislikes, such as hobbies and provided detailed information to enable people to choose the right support for them.

Staff support: induction, training, skills and experience

- Relatives told us their family members were cared for by staff that were trained, skilled and experienced.

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

- People's support needs varied depending on their individual circumstances.
- Care plans detailed people's personal preferences enabling staff to prepare meals that were enjoyed.

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

- Staff supported people and their relatives to access appropriate healthcare services 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. Records showed people's capacity was assessed and where they were able to, people signed to consent to the care they received. The manager was aware of their legal responsibilities under the Act.

- Relatives confirmed staff always sought their family member's consent before they provided personal care.

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; Respecting and promoting people's privacy, dignity and independence

- Relatives reported staff were caring, compassionate, respectful and empowering. Staff had an good understanding of protecting and respecting people's human rights and about the importance of supporting and responding to people's diverse needs.
- Relatives spoke positively about the staff telling us how good they were and how their relative felt safe with staff in their homes. Comments included, "They [staff] are lovely, really diligent, helpful, reliable."
- We saw positive feedback from relatives. Comments included, "[staff member] was very calm, talking kindly to [relative's name] during personal care, they [staff] were very understanding," and, "They [staff] are doing such a fantastic job."

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

- Records showed, and relatives confirmed people receiving a service were actively encouraged to be involved in their care planning, during regular reviews and when their health and care needs change.
- Staff were focused on the people in their care and anticipated people's needs and wishes where people were not able to make these decisions themselves.

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 care plans were personalised and reflected how they wanted to be supported.
- People and their relatives had access to their care records. This enabled them to add notes such as upcoming appointments, and to see information such as completed tasks.

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 manager told us they would make information accessible to people in their preferred method where necessary.

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

- Care records gave details of important relationships and how best to support the person to maintain these.

Improving care quality in response to complaints or concerns

- The provider's complaints policy and procedure had been made available for people, relatives and staff to follow should they need to raise a complaint. We saw evidence that complaints had been handled effectively and responded to in a timely manner.
- A relative said they were very impressed with how a complaint they raised had been dealt with. Telling us, "I was listened to and it was dealt with immediately."

End of life care and support

- People and where appropriate their relatives, continued to be involved in making advanced decisions and developing any end of life plans if they wanted to. If people did not wish to discuss this, their wishes were respected and documented. We saw a compliment received from a relative describing the support offered to them plus the dedication and kindness of staff in providing end of life care to their family member.
- Staff and the management team were committed to continue to provide the best care they could when people were nearing the end of their lives. This including working closely with palliative care and community nursing teams to ensure people remained comfortable and as pain free as possible.

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

- Relatives told us the service is well managed, with one saying, "It's very professional."
- There was a positive culture of management and staff working together to provide good outcomes for people. For example, managers were fully committed to supporting staff to promote good infection control practice. Managers invested their time in transporting staff. This meant the staff did not have to use public transport during the pandemic, and risks of infection to people and staff were reduced.
- Relatives told us they were involved in aspects of their family member's care, and were kept up to date in changes in their health and care needs.
- The provider and manager actively sought feedback from people receiving care, their relatives and staff. One staff member told us, "They [staff] are offered great support from the management team". Another member of staff said, "They [managers] are always available if you need them, we [staff] can ring, email and they [managers] always get back to us [staff]."

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; Continuous learning and improving care

- The manager understood the importance of being open and honest when things go wrong. Staff told us the management team were supportive and they could raise any concerns they may have.
- The manager carried out regular audits to ensure the service was being delivered safely and any shortfalls identified were used to drive improvements.

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

- The manager and provider understood their responsibility to notify the CQC and other agencies of any significant events.
- Staff understood their roles and responsibilities. Managers monitored staff performance through spot checks and regular supervisions.

Working in partnership with others

- The service understood the importance of working closely with external health professionals such as the GP, with people's consent they will keep health professionals informed about the care the service is providing.

- The service supports people to make any necessary referrals if required. For example, specialist support such as from a physiotherapist.