

State Care Solutions Limited

State Care Solutions - Main Office

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?	Requires Improvement ●

Summary of findings

Overall summary

About the service

Stare Care Solutions is a domiciliary care service providing personal care people in their own home. At the time of the inspection, one person was receiving support from 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 who used the service praised that the kindness and compassionate nature of staff and told us they were always attentive to their needs and they felt safe amongst staff.

People's care plans provided staff with the information they needed to support people and to understand their preferences and choices. However, staff would benefit from some information about people's risks and management of homely remedies (over the counter medicines) such as creams.

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.

Staff were safely recruited and supported by the registered manager. The registered manager was sourcing additional practical training to supplement staff's eLearning training and was implementing competency assessments to check staff practices.

Systems were in place for people to raise concerns and for the registered manager to receive feedback from people who used the service. This enabled them to monitor the quality of the service being provided to people.

The provider planned to review their quality assurance systems, policies and business contingency plan to ensure they had clear systems in place to safely manage and monitor the service before it expanded. The service does not currently support autistic people and people with a learning disability. However, we have signposted them to current guidance and the principles of Right support, right care, right culture when supporting people with a learning disability.

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 in March 2021 and this is the first inspection.

Why we inspected

This service had not been inspected since their registration; therefore, this inspection was carried out to gain assurances about the quality of care and systems used to monitor and manage the service.

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 not always well-led.

Details are in our well-Led findings below.

Requires Improvement ●

State Care Solutions - Main Office

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 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.

The service had a manager registered with the Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection

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 registered manager would be in the office to support the inspection.

Inspection activity started on 30 March 2022 and ended on 30 March 2022. We visited the location's office/service on 30 March 2022.

What we did before the inspection

We reviewed information we had received about the service since their registration. We sought feedback from the local authority who work with 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. We used all of this information to plan our inspection.

During the inspection

We spoke by telephone with one person and two members of staff including the registered manager and one care staff.

We reviewed a range of care records. We looked at two staff files in relation to recruitment and staff development and support. A variety of records relating to the management of the service, including policies and procedures and staff training and quality assurance records.

After the inspection

We continued to seek clarification from the provider to validate evidence found.

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

- Systems were in place which safeguarded people from harm and abuse. Staff had been trained in safeguarding.
- Staff had access to the providers safeguarding and whistleblowing policies to guide them in the actions they should take if there was a concern or allegation of abuse.
- There had been no safeguarding concerns since the provider's registration with CQC. However, the registered manager was able to describe their safeguarding processes and how they would respond, report and record any safeguarding concerns in line with their policy.
- A person receiving care told us they felt safe when being supported by staff and added, "They are very good people."

Assessing risk, safety monitoring and management; Using medicines safely

- People's support with their personal risks and the management of their medicines had been identified and assessed as part of their initial assessment.
- Moving and handling assessments provided staff with the information they needed to safely support and transfer people.
- Whilst staff were not responsible for some aspects of people's care and risks, they would benefit from some information about how to identify changes in people's well-being and where to escalate any concerns.
- The registered manager regularly reviewed people's needs and risks and made changes to people's care plans as needed.
- At the time of this inspection, staff were not supporting any one with their prescribed medicines. However, we discussed the provider's homely remedies protocols and their medicines policy with the registered manager. They agreed to take immediate action and obtain a record of a medical practitioner's consent for staff to administer homely medicines such as non-prescribed creams.
- Staff had been trained in medicines management. The registered manager said a separate medication care plan would be in place to guide staff on the type of medicines management support people required as needed.
- A medicine's policy was available which reflected the various levels of medicines support that people may require in a domiciliary care setting.

Staffing and recruitment

- There were enough staff available to support people. The registered manager carried out care calls when there were staff shortages which gave them an opportunity to receive feedback from people.

- Plans were in place to introduce an electronic call monitoring system which would provide the registered manager with accurate information about the punctuality of staff.
- People who used the service confirmed that staff were reliable and punctual.
- Safe recruitment practices were followed when employing new staff. The registered manager was able to describe the actions they would take if the background checks of new staff did not provide them with the assurances that the staff were of good character.

Preventing and controlling infection

- Safe infection control practices were being followed by staff when supporting people with their personal care. This was confirmed by people who used the service.
- Staff completed regular COVID-19 tests, had access to adequate supply of personal protective equipment (PPE) and had been trained in infection control.

Learning lessons when things go wrong

- Systems were in place for staff to report and record incidents and accidents.

The registered manager stated there had been no accidents or incidents but was able to describe their procedure in managing all incidents and the actions they would take to prevent further incidents of a similar nature. Staff confirmed this process.

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 physical, mental and social needs were assessed to ensure their care was delivered in a person-centred manner and underpinned by good current care in the home standards.
- People received effective care based on current best practice for people being supported in their own home.
- The provider was registered to support people in supported living settings however was not currently supporting anyone. We were therefore unable to make a judgment on this service type.

Staff support: induction, training, skills and experience

- All new staff were provided with an effective induction period. They were supported to complete the Care Certificate a (nationally recognised set of care standards)
- Staff had received eLearning training to carry out their role which had been determined as being essential by the provider in order for staff to deliver a safe and effective service. The registered manager recognised that further assessments of staff skills and training was required to ensure they were competent in supporting people with their specific needs and in line with the provider's policy.
- Staff received regular support from the registered manager to enable them to develop their practices and share any concerns.

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

- The registered manager told us that where required, people would be supported to prepare and eat a healthy diet and keep hydrated. They recognised the importance of maintaining a nutritionally balanced diet and fluid intake to help reduce the risk of unnecessary infections, dehydration and malnutrition related illness. Changes in people's appetite or weight loss would be raised with their GP.
- Staff were aware and respectful of people's cultural and dietary requirements.

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

- Staff worked in partnership with people and their families to help them to maintain a healthy lifestyle and access appropriate health care services as needed such as physiotherapist.
- The registered manager recognised the importance of networking with health care professionals to ensure staff remained current in good care practices and to further develop their knowledge and understanding of people's personal needs and risks.

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. 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 who were currently supported by State Care Solutions had the mental capacity to agree and be involved in decisions about their care.
- We checked and were satisfied with the registered manager's understanding of the MCA and the provider's systems when obtaining consent from people who may lack mental capacity to specific decisions about their care.
- Staff told us they always asked people's permission to provide them with the care they needed and were respectful of people's unique and diverse needs.
- People told us staff respected their wishes, views and choices.

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 told us they received care from staff who were kind and who knew them well. One person told us they received care and support from regular staff and said, "They are very caring."
- Staff told us they were aware of the importance of being respectable and offering people choice about how they wished to receive their care.

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

- People confirmed that they were fully involved in decisions about their care and daily support. Staff encouraged them to make day to day decisions about their care and promoted people's independence.
- The registered manager provided examples of they had worked with people and their families to accommodate their needs and requests.

Respecting and promoting people's privacy, dignity and independence

- People told us staff were respectful of their belonging and property and supported them with dignity and kindness. They respected people's dignity and encouraged people to retain their independence.
- Staff worked in collaboration with people and their families to ensure good and consistent outcomes for people.

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 were consulted as part of their initial assessment and ongoing reviews. They said, "Yes, I was involved in the planning of my care." We found that people's care plans were comprehensive and person-centred and covered all aspects of their support and care requirements.
- Information about people's cultural and religious backgrounds and protected characteristics were recorded to help guide staff and prevent discrimination.
- People told us they were happy with the staff who supported them. They said staff knew how to meet their personal care needs and their preferences.
- Where people's needs changed, the registered manager told us they would undertake a review of their needs and said they would communicate any changes with their families and funding authorities.
- Staff completed daily care records to reflect the care that they had provided to people and any concerns. These records were regularly reviewed by the registered manager.

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 assessed, recorded and met. Information about people's speech, visual and hearing impairments was recorded which assisted staff in understanding people's preferred methods of communication.

Improving care quality in response to complaints or concerns

- People had access to information on how to raise concerns in line with the provider's policy and service user guide.
- The registered manager said they hadn't received any complaints. They explained they would address any issues informally with each person if concerns were raised with them. We were assured that people's complaints would be taken seriously and responded to in a timely manner.

End of life care and support

- No one was receiving end of life care at the time of our inspection. The registered manager said they planned to review and implement end of life care plans, policies and staff training before they would support people with end of life care needs.

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 requires improvement. This meant the service management and leadership was inconsistent. Leaders and the culture they created did not always support the delivery of high-quality, person-centred care.

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

- The registered manager used feedback from staff and people who use the service as well as spot checks of staff practices to monitor the quality of care being provided. They recognised that some aspects of the service needed to be further developed to ensure people would be safely supported such as the principles of supporting people with end of life care and those who may lack mental capacity.
- Whilst staff practices were checked, a comprehensive assessment of staff skills including medicines management and manual handling competencies was needed to assure the registered manager that staff practices were current and safe. The registered manager was sourcing additional practical training to support staff eLearning training.
- Staff regularly tested for COVID-19, however the registered manager had not implemented a system to monitor the regularity of staff testing and the results. This meant they could not be assured that people were being supported in line with government COVID-19 guidance and practice at the time of this inspection.
- The provider was not currently providing supported living care; however we have signposted them to guidance to help them in developing their supported living systems to enable people to maximise their independence and choice over their lives.
- Some of the provider's quality assurance systems, policies and business contingency plan needed to be further developed to ensure they had clear systems in place to safely manage and monitor the service before it expanded.
- We found there was no risk to people as the areas of development did not reflect the support needs of people who currently used the service. The registered manager said they would review and update their governance systems before they agreed to support new people.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- The registered manager had a clear vision of expanding the service slowly and safely and to deliver high quality care. They had both experience and qualifications in health and social care and said they were "passionate to give back to the community and support vulnerable 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

- The registered manager was aware of their role and legal responsibility to be honest with people when things go wrong and to report and learn from any incidents.

- Incidents and near misses would be reviewed and actioned.

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

- Staff felt supported by the registered manager and was aware of their responsibility to report any accidents or concerns about people's wellbeing to the registered manager.
- People told us they felt communication from the service was good and they felt confident in approaching staff and the registered manager and providing feedback or raising a concern.

Continuous learning and improving care

- The registered manager was open to receiving feedback about the service and had a drive to continuously learn, improve and sustained good quality of care.

Working in partnership with others

- The service worked in partnership with other agencies to review and address any changes in people's support requirements as required.