

Innovations Wiltshire Limited

Innovations Wiltshire Limited - Pelham Court

Inspection report

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21 June 2022

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Innovations Wiltshire Limited – Pelham Court is a small domiciliary care agency providing care and support to people living in their own homes and flats. The office location for this service is in Marlborough.

The service also has supported living accommodation for three people living in Marlborough and Pewsey. 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.

Not everyone using Innovations Wiltshire Limited - Pelham Court receives regulated activity; CQC only inspects the service being received by people provided with 'personal care'; help with tasks related to personal hygiene and eating. Where they do we also take into account any wider social care provided.

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

People's experience of using this service and what we found

Right Support

People had the care and support they needed to help them live as independently as possible. People were supported to take their medicines as prescribed and staff made sure professionals reviewed medicines regularly. Risks were identified and assessed with detailed management plans in place.

Staff worked with professionals to create personalised behaviour support plans for people where needed. Staff were knowledgeable about strategies they should use to reduce distress and work in a safe way. Reviews were carried out regularly so any changes in people's lives were added to management plans.

Right Care

People were cared for by staff who enjoyed their work and understood their responsibilities for safeguarding. Staff had received training on what abuse was and signs to look for. Systems were in place to make sure any concerns were investigated and reported in a timely way.

Feedback from people about the staff was all positive. People appreciated the staff approach and relied on them to maintain independence. There were enough staff available to support people safely. The provider had faced staffing challenges and was looking at new methods of attracting applicants to work with people. There had been no missed visits.

Right culture

People were supported by staff who understood person-centred care. The registered manager and the provider were passionate about making sure people had the care and support they needed. Care plans were personalised and staff we spoke with knew people well. There was an open culture at the service where all concerns were taken seriously, and action taken in response. The provider worked with local authorities and healthcare professionals to make sure people had their needs met.

Quality monitoring systems were in place to assess and monitor quality and safety. Senior management met regularly to discuss people's needs and identify any improvements to the service.

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

Why we inspected

We undertook this inspection to assess that the service is applying the principles of Right support right care right culture.

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?

Good ●

The service was safe.

Details are in our safe findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

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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 two inspectors 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.

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.

Notice of inspection

We gave the service 24 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 14 June 2022 and ended on 13 July 2022. We visited the office location on 14

June 2022.

What we did before inspection

We reviewed information we had received about the service since the last inspection. We used information gathered as part of the monitoring activity that took place on 9 February 2022 to help plan the inspection and inform our judgements. 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 used all this information to plan our inspection.

During the inspection

We spoke with seven people who used the service and six relatives about their experience of the care provided. We spoke with 14 members of staff including the registered manager and managing director. We contacted five healthcare professionals for their views about the service.

We reviewed a range of records. This included five people's care records and medication records. We looked at five 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.

Is the service safe?

Our findings

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

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People and relatives told us they felt safe using the service. Comments included, "I am safe, well looked after and I trust them [staff]" and, "We've had them [service] four to five years, very happy - nice and safe. We can't live without them [staff]."
- Systems were in place to safeguard people. Staff had been trained in safeguarding and understood their responsibility to keep people safe.
- Staff we spoke with told us they would report any concern and they were confident appropriate action would be taken. One member of staff said, "I would report [concerns] to my line manager, if nothing was done then I would report it further up the chain. If needed I would go outside of the organisation."
- Any concern was shared with the local authority. Senior management understood their roles in the safeguarding process and worked with the local authority to resolve and review concerns.

Assessing risk, safety monitoring and management

- Risks to people's safety had been assessed. Risk management plans were in place to give staff the guidance they needed. This included positive behaviour support plans which in some cases had been written by external professionals.
- Staff we spoke with knew the strategies in the positive behaviour support plans and the order in which any intervention should be implemented. This meant people were getting the support they needed to keep themselves and others safe.
- Senior management met regularly to discuss people's risk management plans. The provider had oversight of support provided and where needed, updated plans to reflect any changes to people's needs.

Staffing and recruitment

- People were being supported by sufficient numbers of staff. Whilst the provider had faced staffing challenges, people had core groups of staff who provided their support.
- People and relatives told us staff arrived on time and stayed for the allocated visit times. People told us they never felt rushed by the staff. One relative said, "[staff] turn up on time - only on an odd occasion run a bit late. [Relative] is not rushed and they stay the right time. We work together as a team which is really good."
- The registered manager told us they were looking at different ways in which to attract staff into roles. Until new staff were recruited the service was not taking any new packages of care.
- Staff were recruited safely. The required pre-employment checks had been carried out.

Using medicines safely

- People had their medicines as prescribed. People had their own medicines administration record (MAR) which staff used to record all medicines given. We observed no gaps in any records.
- Staff had training on medicines administration and senior management checked their practice to make sure staff were competent. Competence checks were completed annually.

Preventing and controlling infection

- Staff had access to personal protective equipment (PPE) and told us they had never been short of stock. Training and guidance on using PPE safely was provided and updated as government guidance changed. One person told us, "They [staff] wear mask and gloves. I think they kept mum safe throughout COVID-19 and were always kitted up during the pandemic."
- The provider had updated their policy on infection prevention and control. Senior management were in touch with local authority support systems and knew where to go for additional guidance.

Learning lessons when things go wrong

- Accidents and incidents had been recorded. Follow up actions such as a notification to CQC or a referral to the local authority had been taken.
- Senior management reviewed forms and took action where needed to prevent reoccurrence. If risk management plans needed a review, this action was also taken.
- The provider analysed incidents to monitor for any trends across all their services.

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 the last inspection this key question was rated as good. At this inspection this key question has remained the same. 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

- The registered manager and senior staff were knowledgeable about people's support needs and the care provided. All staff were passionate about providing a good person-centred service.
- Feedback about the registered manager was positive. Comments included, "The manager is [name] and I ring her up if I need to. She phones me to see how I am. As far as I'm concerned, it's well managed", "[name] is the manager, she comes here, she's a nice person, she's a good listener, she treats me very well. Innovations is an inspirational service" and, "Yes, I know [registered manager], she is brilliant. I ring her if I have any concerns as she does me. She goes above and beyond. She made [relative] a birthday cake, she does that for all [people]."
- Staff spoke to us about the positive, open culture at the service. Staff felt able to talk about any person's needs and what was working well or not so well with senior management. Staff told us changes were made to people's care plans where needed which helped them feel valued and listened to. One member of staff said, "I can raise things with the office, they like your input, they are more than happy with any suggestions, they will also ask us what we think."
- People and relatives were happy with the service and the care and support provided by staff. Comments about the care received included, "They [staff] go above and beyond. The service is family oriented; one big family and I feel a part of it", "I'm very pleased with them [staff] - they meet all my needs and they are like family to me" and, "Very satisfied with the care they [staff] provide for [relative]. The best thing for me generally is the communication between me and the carers. They [management] try to make sure [relative] has carers with whom [relative] is familiar. This is important to [relative] as [they] doesn't like to have people [they] don't know."

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

- The registered manager understood their responsibility to notify CQC when needed about specific incidents or events.
- Staff were clear about their roles and knew the line management structure in the service. Staff spoke to us about the visibility at the service of the senior management. Staff knew who directors were and talked about how they felt at ease to approach anyone.
- There was an effective on-call system which meant staff always had access to a manager. Staff spoke with us about how having the on-call system gave them assurances when working on their own.
- Systems were in place to carry out quality monitoring checks. Regular audits were completed, and any

actions shared with senior management and staff.

- Unannounced spot checks were completed in people's homes. Senior staff checked staff were following the provider's policies when completing visits.

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

- People were asked for their views about care provided on a regular basis. The registered manager told us they were visiting people regularly and talked with them about their visits.
- The provider carried out formal surveys and made sure people had a regular review with the local authority. One person said, "I've had two questionnaires in the last six months, they [management] do listen to us and make changes – there that kind of people."
- Staff had opportunity to discuss ideas, concerns and working practice at team meetings which were held regularly. Staff told us during the COVID-19 pandemic they had been able to attend meetings via online formats.

Working in partnership with others

- The registered manager and other senior management worked with many local healthcare professionals. Staff contacted professionals in a timely way to make sure people's health needs were met.