

Great Care Support 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

Great Care and Support is a domiciliary care agency providing support for people in their own homes. The service was supporting around 14 people at the time of the inspection.

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

People spoke positively about their experience of receiving care from this provider. One person's relative said: "We're really happy with everything so far." Another said: "No complaints at all, all praise."

The registered manager carried out regular audits of the service, and these identified where there were any shortfalls so that there was continuous improvement.

Staff told us the registered manager was accessible and supportive and said they could contact them whenever they needed guidance or assistance.

Medicines were managed safely. The management team undertook regular audits to ensure people were receiving their medicines appropriately, and detailed records were maintained.

The provider took steps to involve people in their care, and people's relatives confirmed this.

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.

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 October 2021 and this is the first inspection.

Why we inspected

This inspection was prompted by a review of the information we held about this 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 well led.

Details are in our well led findings below.

Good ●

Great Care Support Limited

Detailed findings

Background to this inspection

The inspection

We carried out this performance review and assessment under Section 46 of the Health and Social Care Act 2008 (the Act). We checked whether the provider was meeting the legal requirements of the regulations associated with the Act and looked at the quality of the service to provide a rating.

Unlike our standard approach to assessing performance, we did not physically visit the office of the location. This is a new approach we have introduced to reviewing and assessing performance of some care at home providers. Instead of visiting the office location we use technology such as electronic file sharing and video or phone calls to engage with people and staff.

Inspection team

The inspection was carried out by 2 inspectors.

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 short notice of the inspection in order for the registered manager to provide us with the documentation we needed to look at.

Inspection activity started on 13 June 2023 and ended on 19 June 2023.

What we did before the inspection

We reviewed information we had received about the service since the last 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. We used all this information to plan our inspection.

During the inspection

We spoke with 9 people using the service or their family members and obtained feedback from 4 members of staff. We reviewed a range of records. This included 3 people's care records and various medication records. We looked at 2 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.

This performance review and assessment was carried out without a visit to the location's office. We used technology such as phone and video calls to enable us to engage with people and staff, and electronic file sharing to enable us to review documentation.

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.

Using medicines safely

- People's medicines were managed safely.
- Records of medication administered were accurately maintained.
- Staff told us they had received training in relation to medicines management and said they felt confident when handling medicines. The provider's training records supported this.

Systems and processes to safeguard people from the risk of abuse

- People's relatives had no concerns regarding the safety of their loved ones when receiving care.
- Staff told us they were confident in reporting any concerns they had and could give examples of the type of issues they would need to report. Records showed they had received training relating to safeguarding.

Assessing risk, safety monitoring and management

- Risks people were vulnerable to, such as falls or self neglect, were identified during the initial assessment of a person's needs, and appropriate risk assessments were put in place.
- Staff told us they always had time to read people's care records before providing care, so that they understood how to manage risks and care for the person safely.

Preventing and controlling infection

- The provider's records showed staff had received training regarding infection control, and staff we asked confirmed they had understood this training and incorporated it into their work.
- Personal protective equipment (PPE) was available for staff to use, Staff told us they found it easy to obtain additional supplies of PPE whenever needed.
- People's relatives told us staff always used PPE when providing care.

Staffing and recruitment

- Staff were safely recruited.
- Appropriate background checks had been carried out before people started work.
- Staff told us they felt the induction process had been substantial and they felt equipped to undertake their roles effectively when they started work.
- People's relatives told us their loved ones received care from small, consistent staff teams, who knew their needs well.

Learning lessons when things go wrong

- Staff told us they would be confident to report any incidents or accidents directly to the registered

manager.

- The registered manager told us they were committed to continuous improvement and said they could learn from such incidents or accidents.

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.

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, whether any restrictions on people's liberty had been authorised and whether any conditions on such authorisations were being met.

- We found the provider had systems and policies in place for obtaining people's consent, or acting in their best interests. Staff had a good knowledge of this process.
- The management team understood their responsibilities regarding the MCA and ensured they acted in accordance with it.
- One person's relative described appropriate steps were taken in relation to MCA to ensure their loved one's legal rights were upheld.

Staff support: induction, training, skills and experience

- Staff told us they had received a good standard of training, and said it equipped them to carry out their care roles effectively.
- Staff said they received a good level of support from the management team, and said they could rely on them for support whenever they required it.
- The provider's training records showed a wide range of training was offered across relevant areas.

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

- Assessments of people's needs were undertaken before they began to receive care. These assessments were used to develop care plans.
- Records showed the management team monitored care to ensure it was in line with current guidance.

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

- There were details in each person's care file showing that their needs in relation to nutrition and hydration had been assessed.
- People's care records showed where staff were required to provide them with food and drink, it reflected their personal preferences.

Staff working with other agencies to provide consistent, effective, timely care

- Staff told us they knew when to contact outside assistance, and gave examples of when they had done so.
- Where external professionals were involved in people's care, their guidance and advice was incorporated into people's care plans.

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.

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

- People had been involved in planning their care, and their relatives confirmed this. One relative said: "Yes, I have a care plan and job sheets."
- People's views and preferences about care were recorded at their initial assessments, and their feedback was regularly sought by members of the management team to ensure care met their ongoing needs.

Ensuring people are well treated and supported; equality and diversity

- People using the service, and their relatives, told us staff treated them well. One person's relative described the staff as treating their loved one "like a queen,"
- Care assessments we checked showed information about people's cultural needs.

Respecting and promoting people's privacy, dignity and independence

- Staff told us they understood the importance of treating people with dignity and respecting them. They told us they considered this a very important part of their job.
- Care records contained information about how people's privacy and dignity should be upheld.
- People's relatives told us staff treated their loved ones with respect, with one saying staff were: "On time, kind-natured, considerate and polite."

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 requires good. This meant people's needs were met through good organisation and delivery.

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 management team told us they used pictorial and easy read formats in its communication with people where appropriate.
- People's relatives told us information from the provider was supplied in formats they could understand.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control

- Each care plan we looked at held detailed information about people's preferences and how they wished their care to be delivered.
- Staff told us they knew the people they provided care for well. They said they always had time to read people's care plans before delivering care, and said they thought this was very important.
- One person's relative said: "I can't speak highly enough of the whole organisation" and praised how much staff understood their loved one's needs.

Improving care quality in response to complaints or concerns

- The provider had appropriate arrangements in place for receiving and addressing complaints.
- People using the service told us they would feel confident to complain if they needed to.

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.

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

- The management team had developed governance arrangements which ensured they had good oversight of the quality of the service they provided.
- People and their relatives said management was effective; they felt the service was well run and organised.
- Care notes showed care was delivered to a good standard and met regulatory requirements.
- Staff told us they understood their roles, and knew what was expected of them.

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

- People and their relatives told us care was tailored to their individual needs, and said they achieved good outcomes. One person's relative gave us an example of how staff care had enabled their loved one to achieve a standard of health that their GP did not think achievable.
- Staff told us they found the culture supportive. They praised the support they received from managers within the service and described them as always accessible and understanding.

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

- Records showed the registered manager regularly gained feedback from people using the service, their relatives and staff, to ensure they were fully involved in how the service developed.
- We saw good evidence of the provider working alongside external professionals to ensure people's care was consistent and met their needs.