

Aspire Affiliates Limited

Euroclydon

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:

Euroclydon is a service providing care and support to people in their own home. The service is registered to provide personal care. Not everyone who used the service received personal care. The Care Quality Commission (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. At the time of our inspection there were 22 people with a variety of care needs, including older people and people living with dementia using the service.

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

Staff understood how to keep people in their care safe from harm. Where risks to individuals had been identified, measures had been put in place to reduce or eliminate those risks. Safe systems were in place to ensure people got their medicines at the right times. Staff had been recruited safely and there were enough staff to provide people with timely care and support.

Staff received appropriate training and provided people with support to meet their nutrition, hydration and health care needs. People's care needs were assessed before a service was offered, to make sure staff would be able to meet their needs.

People's communication needs were identified, recorded and highlighted in care plans and staff communicated with people effectively to ascertain and respect their wishes. People told us they received support from staff who were kind and caring and that personal care was person-centred and individualised.

People were involved in making decisions about their care and were treated with dignity and respect. People were encouraged to be independent and their equality and diversity needs were respected.

People's care needs were clearly identified in their care plans. Care plans were developed to make sure staff knew what they needed to do to meet those needs. A complaints procedure was in place and people said they would speak to the registered manager if they had any concerns.

People were supported by a team of staff who were happy in their jobs. The registered manager completed a range of regular checks on the quality and safety of the service. People told us they would recommend the

service to others.

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 Good (published 10 March 2017).

Why we inspected:

This was a planned inspection based on the previous rating.

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 ●

Euroclydon

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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Inspection team

Our inspection was completed by one inspector.

Service and service type

Euroclydon provides domiciliary care services to people who live in their own homes in the Forest of Dean and the surrounding area.

Notice of inspection

The 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. 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.

What we did before the site visit

We reviewed the information we had received about the service since the last inspection. This included previous inspection reports and details about incidents the provider must notify us about, such as abuse, serious injuries and deaths. We used information the provider sent us in their Provider Information Return as part of our Provider Information Collection. Providers are required to send us key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections.

During the site visit

We visited the office location of Euroclydon on 4 and 5 September 2019. We spoke with the registered manager and the office manager. We reviewed a range of records. This included six people's care records, three staff recruitment files and staff training and supervision records. We also reviewed records relating to the management and monitoring of the service. We visited a person using the service in their own home alongside the registered manager on the 5 September to receive feedback from them about the service.

Following the site visit

On the 6 September 2019 we spoke with four staff, three people and two relatives by telephone to receive feedback about Euroclydon.



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 were kept safe from abuse and improper treatment. People and relatives spoken with had no concerns about their or their family members safety or well-being.
- Staff had completed safeguarding training and understood how to keep people safe. Staff told us they would report any concerns to the registered manager. A member of staff told us, "Any concerns are reported to our head office and I always write things down."
- The registered manager understood their responsibilities in keeping people safe and had worked with other agencies to ensure any safeguarding concerns were dealt with effectively.

Assessing risk, safety monitoring and management

- There were systems in place to identify any potential risks to people. People told us the assessment process completed by the registered manager was very thorough. Risks involving the moving and handling of people and measures to limit those risks were well documented in the care records we reviewed.
- There were risk assessments in place for people at risk of falls which showed what mobility aids they used, together with any specific safety equipment such as walking frames and other mobility aids to reduce the risk of falling. During our visit to a person in their home we saw that risks relating their ongoing health and support needs had been assessed and measures were in place to reduce the risk of harm to the person. For example, the registered manager had attended a series of multi-disciplinary meetings and put arrangements in place to ensure the person's safety and support needs were regularly monitored and essential information relating to the person's well-being was shared with all parties involved in the person's care.

Staffing and recruitment

- Staff were recruited safely, and appropriate checks were carried out to protect people from the employment of unsuitable staff. The registered manager was involved in all interviews for recruiting new staff to ensure there was consistency in the recruitment process.
- The service was adequately staffed and a person-centred approach to care delivery was used. We found people received support from people familiar to them. For example, A relative told us "Care staff are good."

We're getting ongoing and consistent support." A person using the service said, "I have a say in who supports me and those staff are allocated to me."

- The registered manager kept staffing levels under review to ensure there were enough staff to meet people's needs and keep them safe. They told us they were looking at ways to improve staffing levels at the weekend and minimise the use of agency staff and had discussed this with the service provider.
- There were on call arrangements in place for outside office hours should people using the service or staff need advice or support.

Using medicines safely

- People's medicines were managed safely.
- Where people were supported to take their medicine, staff completed medicine administration records (MAR's). The MAR's showed which medicines people were prescribed and when they were given.
- The MAR's were checked monthly by the registered manager and other staff at the office. This helped to ensure any errors were identified and action taken to reduce the risk of them being repeated. The MAR's we reviewed during our inspection had been completed correctly.
- People and their relatives told us they had no concerns with the support they received with their medicines.
- Care workers received training on the safe management of medicines and records showed their competency was regularly checked.

Preventing and controlling infection

- People who used the service were protected from the risk and spread of infection.
- The service had an infection prevention policy and staff had received relevant training. Staff had access to appropriate personal protective equipment (PPE), such as plastic gloves and aprons to be used when delivering personal care.

Learning lessons when things go wrong

- Records showed the registered manager regularly monitored and analysed any health or safety incidents involving people or staff. This was used to check for any trends or patterns that may help to inform or improve people's care when needed.
- Where required the registered manager had notified CQC of any significant event such as serious injuries or safeguarding concerns.

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

- The registered manager assessed people's care and support needs before a service was offered. The assessment considered people's needs and choices and the support they required from staff, as well as any equipment which might be needed. One person's relatives told us, "The assessment process was good. I met with the manager and went through everything before the carers came."
- People's needs were reviewed with ongoing involvement of their close relatives (where appropriate) by the registered manager and a range of health and social care professionals, every three to six months. This ensured the care packages in place continued to meet people's needs.

Staff support: induction, training, skills and experience

- Staff told us they felt supported in their role. The registered manager told us they were reviewing the support provided to staff and were introducing regular one to one support meetings additional to the regular spot checks to give staff the opportunity to discuss and concerns or support they might need.
- Staff told us they received training to ensure they had the skills to meet people's needs. Training included areas such as first aid, health and safety and moving and handling. Staff said, "We have access to training online" and "We have the training we need to do the job."
- New staff received an induction which included shadowing (working alongside) experienced staff.
- Spot checks were undertaken by the registered manager on a regular basis to monitor staff performance and identify their development needs. This is where a senior member of staff calls at the person's home just before or during a visit by a member of care staff, so they can observe them going about their duties and check they are working to the required standard.

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

- People were supported to eat and drink and maintain a balanced diet as outlined in their care plan.
- Staff had received food hygiene training in order to support people in their homes with the preparation of food and drink.
- Daily records we reviewed confirmed staff monitored people's food and drink intake when needed, in order

to support them to maintain a healthy diet and prevent any risks in relation to weight loss or weight gain.

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

- The registered manager kept people's care and support needs under constant review, to ensure they received consistent, timely, coordinated, person-centred care and support.
- The registered manager explained the process they followed if the service was not able to continue to meet people's needs, for example, if their care needs increased. They told us they would liaise with the person's social worker to ensure care information was handed over and the impact upon the person was minimised. The registered manager told us that, in some cases, they had extended the amount of time they gave the social worker to find alternative provision, if this was proving difficult and was impacting upon the person.

Supporting people to live healthier lives, access healthcare services and support

- People's records showed they were receiving healthcare support from a range of professionals.
- The registered manager told us they worked particularly well with the district nurse in the area, to ensure people's ongoing care needs were met effectively.

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

- The registered manager said none of the people supported by the service had a Court of Protection Order in place at the time of our inspection.
- People told us staff consulted them and asked for their consent before providing care and support.
- Staff had received training on the MCA. They understood the importance of promoting people's rights.
- Where people lacked the capacity to make day to day decisions there were clear assessments in place. Staff told us they supported people with daily decisions such as what to wear and what to eat based on what they knew about them.

Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

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 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's and relative's views about the staff were positive. Comments included, "Staff are great"; "People always make time to speak to you" and "Staff are very nice."
- Care records were written in a respectful way.
- Through talking to people, staff and reviewing people's care records, we were satisfied care and support was delivered in a non-discriminatory way and the rights of people with a protected characteristic were respected. Protected characteristics are a set of nine characteristics that are protected by law to prevent discrimination. For example, discrimination based on age, disability, race, religion or belief and sexuality.
- Staff were knowledgeable about people's care and support needs. Staff were motivated and recognised their contact with people may be a person's only social contact on a given day. One person said, "Staff treat me with respect and are very friendly. The carers listen to me and retain information. I feel staff are genuinely interested in me."

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

- People and their families were able to contribute to their care planning.
- Reviews of people's care plans recorded people's comments and opinions. When people asked for changes to their care and support, we saw this was actioned.

Respecting and promoting people's privacy, dignity and independence

- People told us staff respected their privacy and dignity, for example by keeping them covered when supporting with bathing and showering. One staff member said, "I ensure people are covered with a towel when delivering personal care and I treat people like I would treat my own family. I respect people as I am in their own home."
- Staff understood the importance of respecting people's privacy and supporting them to be as independent as possible.

Our findings

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

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same. 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 accurate and contained detailed information about how they liked to be supported. These were updated regularly by staff and ensured everyone knew how people liked to be supported. One member of staff told us, "Information about people is in the care plans which are in folders in people's homes."
- Care plans we reviewed included people's personal preferences and information in relation to people's personal history. We saw that people's preference of the gender of staff supporting them was considered and met.
- Care plans were subject to regular review when people's needs changed or at least every six months.

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 registered manager was aware of the AIS and was in the process of converting information into a more accessible format. For example, they told us they were planning to embed the AIS into the assessment process and would be updating people's care plans during their upcoming care package reviews.
- Information on how to communicate with people and the additional support they needed to make choices and decisions, was recorded within their care and support plans.

Improving care quality in response to complaints or concerns

- People had access to complaints procedures. They told us they knew how to raise any concerns and the office were swift to respond and deal with these.
- The service had not received any formal complaints in the last 18 months. The registered manager told us how they would respond to a complaint and how they would ensure lessons would be learnt from any complaints received.

End of life care and support

- The service was not currently supporting anyone with end of life care. The registered manager was able to explain how end of life care had been provided in the past. This included how the service had met people's preferences relating to protected characteristics, culture and spiritual needs.
- We reviewed a range of compliments the service had received from relatives of people who had received end of life care. Comments included, "My sisters and I wish to express our grateful thanks to those who helped us nurse mum at home. We will always be grateful for their help and understanding and their kindness when with mum" and "As a family we would like to thank everyone who came in to care for mum to enable her to stay at home until she passed away."

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 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

- The registered manager demonstrated an open and transparent approach and was passionate about promoting a person centred, inclusive and empowering culture.
- Everyone we spoke with said they would recommend the service, they knew the registered manager and spoke very positively about them. Comments included, "The manager is very approachable. They always respond to my requests" and "From day one I've felt really at ease with the service. I was apprehensive about having care at home, but the manager reassured and involved me from the first meeting onwards."

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 provider had met the regulatory obligations for their registration and in relation to their duty of candour responsibility.
- The provider had sent us written notifications about any important events when they happened at the service, to help us check the safety of people's care when needed.

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

- Staff were clear about their roles. They received information during induction and throughout training about what was expected from them. New staff were introduced to people who used the service while working alongside the registered manager.
- Various quality checks were made to ensure people were receiving the service they wanted and their needs were being met.
- The registered manager worked with commissioners of care, health and social care professionals and other stakeholders to ensure the quality of care was consistently good.

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

- Staff told us they did not always have regular 'one to one meetings' with the registered manager however, staff views had been sought through the use of surveys. We reviewed these during the inspection and could see how the manager used this feedback to make changes and support staff. For example, the registered manager showed us where a staff member had commented that they found weekend working difficult. The registered manager had reviewed this and had reduced the staff members weekend shifts and increased shifts during the week to make up their hours.
- People's views were sought through direct contact from the registered manager and regular surveys. We reviewed these during the inspection and could see how the manager used this feedback to monitor and make changes to the service. For example, we could see how the registered manager had worked to reduce the number of staff working with a person where they had stated they had found working with multiple different staff frustrating.

Working in partnership with others

- The service worked closely with relevant health and social care professionals. This supported them to deliver effective care to people. Minutes of meetings where health and social care professionals had been involved in monitoring the safety of a person using the service showed good partnership working.
- Relevant health professionals had been involved in the review of people's 'support packages' where needed. For example, a social worker had been involved in increasing the support package for one person who was using the service. This joint-working helped ensure the best outcome for the person.