

Curantis Healthcare Limited

Curantis Healthcare Ltd

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

Curantis Healthcare Ltd is a domiciliary care agency that is registered to provide personal care to people living in their own homes. At the time of the inspection, eight people were receiving a service from the agency. 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.

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

People told us they felt safe and staff were kind and caring. Staff understood how to protect people from harm or discrimination and had access to safeguarding adults' procedures. There were sufficient numbers of staff deployed to meet people's needs and ensure their safety. The registered manager carried out risk assessments to enable people to retain their independence and receive care with minimum risk to themselves or others. People were protected from the risks associated with the spread of infection. People received their medicines safely and were supported to eat and drink in accordance with their care plan. We noted there were some gaps in the recruitment records. The nominated individual took immediate action to address this issue during the inspection.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service supported this practice. People's needs were assessed prior to them using the service. Following the inspection, the registered manager reviewed and updated the pre-service assessment form. The provider had appropriate arrangements to ensure staff received training relevant to their role. New staff completed an induction training programme. Staff felt well supported by the management team. People were supported to access healthcare services.

People and their relatives told us staff were caring and always showed kindness, respect and compassion. People and where appropriate their relatives had been consulted about their care needs and had been involved in the care planning process. Staff worked in respectful ways to maintain people's privacy and dignity. Staff were motivated and demonstrated a clear commitment to providing dignified and compassionate support. People were supported and encouraged to continue hobbies and interests of their choice. People and their relatives had access to a clear complaints procedure.

The nominated individual and registered manager had a clear vision about the quality of care they wanted to provide. Staff were aware of their roles and responsibilities. The provider had established a number of quality assurance systems to monitor the quality and safety of the service. There was a focus on continuous improvement.

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 15/10/2018 and this is the first inspection.

Why we inspected

This was a planned inspection based on the date the agency first registered with CQC.

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 effective?

Good 

The service was effective.

Details are in our effective findings below.

Is the service caring?

Good 

The service was caring.

Details are in our caring findings below.

Is the service responsive?

Good 

The service was responsive.

Details are in our responsive findings below.

Is the service well-led?

Good 

The service was well-led.

Details are in our well-led findings below.

Curantis Healthcare Ltd

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 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

We gave a short period notice of the inspection. This was because it is a small service and we needed to be sure the provider or registered manager would be in the office to support the inspection.

Inspection activity started on 16 September 2019 and ended on 17 September 2019. We visited the office location on both days.

What we did before the inspection

We reviewed information we had received about the service since the last inspection, such as notifications. These inform us of events that happen in the service which the provider is required to tell us about by law. We sought feedback from the local authority. We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all of this information to plan our inspection.

During the inspection

During the inspection, we visited the office and spoke with the registered manager, the nominated individual, the care co-ordinator and a director of the company. The nominated individual is responsible for supervising the management of the service on behalf of the provider. We also spoke with four people using the service, three relatives and four members of staff over the telephone.

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

After the inspection

We continued to seek clarification from the provider to validate evidence found. The registered manager sent us an action plan addressing the issues identified during the inspection, as well as copies of the updated pre-service assessment form and the job application form.

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

- The provider had taken suitable steps to ensure staff knew how to keep people safe and protect them from discrimination. This included access to appropriate policies and procedures. People told us they felt safe and were happy with the care and support they received. One person told us, "I feel totally safe in their care. Everyone has been extremely kind to me."
- The registered manager and staff understood safeguarding matters and were aware of when to report incidents and safeguarding concerns to other agencies. All staff had received training in safeguarding vulnerable adults.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- The registered manager assessed, monitored and managed risks to people's health and safety. People's care records included assessments of specific risks, such as any risks associated with their environment, mobility, the formation of pressure ulcers and evacuation in the event of a fire. Following the inspection, the registered manager sent us an action plan which set out their plans to carry out further risk assessments in respect of medicines management, nutrition and any behaviour which challenged the service.
- The provider had a business continuity plan which described how people would continue to receive a service in the event of adverse circumstances, such as bad weather.
- The registered manager had developed systems to learn lessons and improve the service when things went wrong. We saw there were appropriate forms to record any accidents and incident. Any learning was discussed with the staff team.

Staffing and recruitment

- People told us they received care from the same team of staff. This meant there was a good level of consistency and staff were familiar with people's needs and preferences.
- People and relatives said staff were punctual. One person told us, "They are usually spot on with their time keeping." Two people reported a missed visit. The registered manager had investigated the circumstances on these incidents. As a result, an electronic call monitoring system had been implemented.
- The care co-ordinator managed the staff rotas to ensure the planned visits were flexible and in line with people's preferences. Staff confirmed they had sufficient travelling time between each visit.
- The provider followed an appropriate recruitment process. However, we found some gaps in the regulatory checks carried out before staff started to work for the agency. The nominated individual took immediate action to strengthen the recruitment process, which included the implementation of a new application form and checklist.

Using medicines safely

- The provider's systems and procedures were designed to ensure people had the level of support they needed to manage and take their medicines safely. However, we noted staff were administering one person's tablets from a container used by relatives. The registered manager was not aware of the staff actions and gave assurances the practice would cease with immediate effect.
- Staff had access to a full set of medicines policies and procedures. They had received appropriate training and the registered manager carried out checks on the staff members' level of competence.
- Staff maintained records following the administration of medicines. The registered manager checked the records when they were returned to the office.

Preventing and controlling infection

- The provider had systems to help prevent and control the spread of infection and staff had received training in this area. Staff had access to an infection prevention and control policy and procedure. Staff were provided with personal protective equipment, including disposable gloves and aprons. People confirmed staff used the equipment when providing personal care.

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.

- The registered manager and staff had completed appropriate training and applied the principles of the MCA. Staff understood the need to ask people for consent before carrying out care and people using the service confirmed this approach. One person told us, "They always act on my instructions and never do anything without asking me."
- People had signed the terms and conditions of the service to indicate their agreement to the care provided. There were no restrictions placed on people's liberty.

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

- The registered manager and staff made sure people received appropriate support to meet their healthcare needs. People's physical and mental healthcare conditions were documented within their care plan. This helped staff to recognise any signs of deteriorating health.
- People and relatives told us they were well supported. One person explained they required emergency hospital treatment and the registered manager sat with them all night to provide reassurance and support. The person said, "[The registered manager] was very concerned and wouldn't leave me. She is an absolute gem and goes above and beyond."
- The registered manager and staff worked closely with other social care and healthcare professionals as well as other organisations to ensure people received a coordinated service. Appropriate information was shared when people moved between services. In this way, people's needs were known, and care was provided consistently.

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

- The provider had systems to ensure people received care which met their individual needs. The registered manager completed an assessment prior to a person receiving a service. This helped to ensure people's needs and preferences could be appropriately met. The assessment followed the care plan format and was used as a basis to form the plan for the delivery of care.
- Following the inspection, the registered manager sent us a copy of a new pre-service assessment form, which covered all aspects of people's needs and preferences.

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

- People were supported to eat and drink in line with their care plan. People told us staff asked them what they preferred to eat and prepared and cooked their food to a good standard.
- Staff monitored people if they were at risk of poor nutrition and involved healthcare professionals where required.

Staff support: induction, training, skills and experience

- Staff were provided with appropriate support and training. People and their relatives felt staff were competent and well trained. One relative said, "I have been very impressed with all the staff. They all have very high standards of care."
- New staff were supported through an induction programme, which included the care certificate. This is a nationally recognised qualification for health and social care workers. The provider's mandatory training was provided for all staff members. This helped to ensure the workforce was kept up to date with current legislation and good practice guidance. The registered manager and care co-ordinator monitored staff training to ensure staff completed the training in a timely manner.
- Staff were provided with one to one supervision with the registered manager. This facilitated discussions around work performance, training needs and areas of good practice. Staff demonstrated a good awareness of their working roles and responsibilities and confirmed their training was on-going and relevant.

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's rights were actively promoted, and person-centred care was delivered. All people and relatives expressed a high level of satisfaction with the care provided and made complimentary comments about the staff team. One person said, "They are brilliant. I've never known people be so kind and caring", and another person commented, "Every single carer is extremely kind."
- The provider promoted and encouraged inclusion. Staff had received training on equality and diversity issues and had access to a set of policies and procedures.
- The provider had received a number of compliments which highlighted the caring approach of staff. For instance, one person had written, "I can honestly say nothing has been too much trouble. I don't think I would have been able to cope without your support at such a stressful time."
- Staff understood their role in providing people with compassionate care and support. They were knowledgeable and respectful about people's individual needs, backgrounds and personalities.

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

- People and their relatives contributed to and were involved in making decisions about their care and support needs. All people confirmed they had discussed their care needs with staff and agreed with the contents of their care plan. One person said, "[The registered manager] sat with us for two to three hours and went through everything in detail."
- People said the staff understood their individual likes and dislikes and accommodated these when delivering their care. One person told us, "I have really jelled with the carers. We all have a good understanding and get on well."
- People were provided with appropriate information about the service. The information included details about what people could expect from the service and how they could access other organisations and networks.

Respecting and promoting people's privacy, dignity and independence

- People's privacy, dignity and independence was respected. Staff called people by their preferred name and spoke to people with respect. One person said, "The carers are very respectful. They have an inbuilt instinct to care for people."
- Staff encouraged people to develop their independence and self-esteem to enable them make choices and express their preferences. The staff offered people opportunities to increase their independence and to have freedom and control over their lives.
- Staff understood their responsibilities for keeping people's personal information confidential. People's information was stored and held in line with the provider's confidentiality policy and with recent changes in

government regulations.

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 received personalised care and support specific to their needs and preferences. People told us they were happy with their care and staff responded to any requests made for assistance. One person told us, "The carers will do anything to help and often put themselves out."
- The registered manager developed person-centred care plans, which provided the staff team with guidance about people's needs and how best to meet their needs. This helped to support effective delivery of care. Each person was seen as an individual, with their own social and cultural diversity, values and beliefs. The care plans were detailed and showed people's preferences and interests had been taken into consideration. The registered manager reviewed the plans at regular intervals and any changes in needs had been recorded.
- Staff understood people's needs and it was clear people were supported to make choices and to take control of their daily lives. Staff completed records, which documented the care people had received, in a detailed and respectful way.
- The provider used technology to help with the operation of the service. The staff had access to an application on their mobile telephones, which allowed them to log the times of their visits. Computer-based systems were used to store and analyse information as well as plan staff rotas.

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

- People received support to continue hobbies and interests that enhanced their quality of life. The registered manager explained she had provided people with resources to enable them to pursue their preferred leisure activities.
- The registered manager and staff were aware of the risks of social isolation and emphasis was placed on meaningful conversation and the promotion of people's emotional well-being.

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 and staff understood the Accessible Information Standard. People's communication needs were identified and recorded in their care plans. Information was available in a variety of formats and in a way people could understand.

Improving care quality in response to complaints or concerns

- People told us they had no complaints or concerns. They said they would speak to the registered manager or a member of staff if they had any concerns or wished to raise a complaint. One person told us, "I've been happy with everything, but I know I could talk to the [registered manager] if I had any worries."
- The provider had arrangements in place for recording, investigating and resolving complaints. The registered manager confirmed she had received no complaints about the service.
- People had access to the complaint's procedure. We saw the procedure was clear in explaining how a complaint could be made and reassured people these would be dealt with in a timely manner.

End of life care and support

- At the time of our inspection, there was no one in receipt of end of life care. However, the registered manager explored, and recorded people's end of life wishes as appropriate.

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; 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 nominated individual, registered manager and staff promoted the provision of person-centred care to achieve the best outcomes for people. Staff confirmed they felt everyone was well supported and they all told us how much they enjoyed their work. One member of staff told us, "I think it is a wonderful service. Everyone is very person-centred, and the management are so supportive."
- Throughout the inspection, people and their relatives spoke highly of the registered manager and the staff team. They told us they would not hesitate to recommend the service and described the agency as 'well managed'. One person told us, "They are all professional and go out of their way to help."
- The registered manager knew the people who used the service well and was knowledgeable about their needs and preferences.
- We saw there were organisational policies and procedures which set out what was expected of staff when supporting people. Staff had access to these and they were familiar with the key policies.
- The registered manager was aware of their responsibility to be open in communications with people and others involved in their care.
- There was an open and transparent culture at the service. Staff felt able to raise issues or concerns and felt supported by the management team.

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

- The registered manager and staff had a clear understanding of their roles and contributions to service delivery. We found staff morale was good and they felt valued and respected. The nominated individual and registered manager told us they were proud of the dedication and commitment of the staff team.
- The provider had established systems to monitor the quality of the service. The registered manager carried out audits and monitored the standards and safety of the service. This included spot checks where staff were observed providing direct care. Any learning was disseminated to the staff team. The nominated individual planned to develop an overall database to enable them to track and analyse data.
- Following the inspection, the registered manager sent us an overall action plan which set out the planned improvements for the service.
- The registered manager understood their regulatory responsibilities to inform CQC about significant events at the service.

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

- People were involved and engaged in the service and consideration had been given to their equality characteristics. People, their relatives and staff were invited to give feedback and had been given the opportunity to complete a satisfaction questionnaire. We looked at the collated results and noted people and staff indicated a high level of satisfaction with the service. We also saw people had made positive comments about the service. One person had written, "Brilliant carers. They help me so much. Nothing is too much trouble. They are knowledgeable and empathetic."
- The provider and staff worked in partnership with external agencies where they could learn and share knowledge and information that promoted the continued development of the service.
- The registered manager helped people to access other services and organisations such as Age UK and Welfare Rights, as appropriate.