

Northern Case Management Limited

Northern Case Management Bury Office

Inspection report

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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

Northern Case Management is a domiciliary care agency which provides personal care to people in their own homes. The service specialises in providing case management and support to adults and children with an acquired brain and spinal cord injury.

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. At the time of the inspection the service was supporting 81 people; of these 16 received a regulatory activity

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

Safe systems were in place to help keep people safe. Staff received relevant training and development to equip them in delivering the support people wanted and needed. Staff were provided with personal protective equipment to help minimise the risk of cross infection. Where people received support with their prescribed medicines, this was managed safely.

Staff were aware of their responsibilities to report any concerns and were confident these would be acted upon. Robust staff recruitment procedures were in place. Staff retention was an on-going issue with contingency plans in place to help minimise the impact on people's support. Where areas of risk had been identified these were monitored and reviewed so that people's current and changing needs were effectively met.

Governance systems were in place to monitor and review the quality of the service. Staff understood their role and responsibilities and felt supported by the management team. Additional plans were being made to enhance the service.

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

Rating at last inspection

The last rating for this service was good (published 5 June 2019).

Why we inspected

This inspection was prompted by a review of the information we held about this service. We received concerns in relation to staffing levels and skills to support people's individual needs. As a result, we undertook a focused inspection to review the key questions of safe and well-led only.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating. The overall rating for the service good based on the findings of this inspection.

We found no evidence during this inspection that people were at risk of harm from this concern. Please see the safe and well-led sections of this report.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Northern Case Management on our website at www.cqc.org.uk.

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?

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

The inspection was carried out by one inspector 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 adults and children living in their own homes.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

Notice of inspection

We gave the service short 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 13 December 2022 and ended on 20 December 2022. We visited the location's office on the 13 December 2022.

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 the relatives of 4 people. We spoke with 11 members of staff including the business director, registered manager, case managers, administrator and support staff. We also sought feedback from healthcare professionals involved in people's care.

As part of the inspection we looked at staff recruitment records, training and development and reviewed support plans and risk assessments. We also looked at safeguarding procedures and systems to monitor and reviewed the quality of service provided.

Is the service safe?

Our findings

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

At our last inspection we rated this key question good. The rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse; Learning lessons when things go wrong

- Systems were in place for the reporting and recording of any concerns.
- All staff were required to complete annual training in safeguarding adults and children. Records seen confirmed this was provided.
- Staff had access to the 'Safeguarding Concerns Pathway'. This provided easy to follow guidance on what to do in the event of a concern arising, with a link to the webform for reporting all issues. Records were monitored by the management team and where necessary assigned to a case manager to investigate. Any action required was followed up with the team.
- Family members we spoke with felt their relatives were supported in a safe way. We were told, "Yes, I do feel [person] is safe, the staff are brilliant. All in all I would say it is all good" and "Yes, it is safe care, [person] is so relaxed. I personally wouldn't leave if they were not, but I have been able to return to full time work."

Assessing risk, safety monitoring and management

- Areas of risk were assessed and monitored to help ensure people and staff were kept safe.
- A review of records showed a range of assessments specific to people's support needs as well as the home environment. This included a personal emergency evacuation plan in the event of an emergency arising.
- Staff received specialist training from relevant health professionals with regards to people's complex care needs, such as the use of feeding tubes, epilepsy and respiratory needs. Assessments were completed to check staff were competent in carrying out complex care support.
- A comprehensive package of e-learning and face to face training was provided to help ensure staff practice was safe. Managers were aware updates in classroom training were needed in moving and handling, medication and basic life support.
- Family members we spoke with felt staff knew how to use equipment safely. We were told, "Staff are always having training and doing courses, moving and handling is one, and training for the hoist. No accidents have happened" and "The staff use the equipment with [person], there is a hoist and a standing frame, they know what they are doing."

Staffing and recruitment

- Robust recruitment procedures were in place.
- A review of staff files showed that all relevant information and checks were in place prior to new staff commencing their employment. This included a disclosure and barring service check (DBS) for both adults and children. A DBS check provides information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.
- One family members we spoke with said, "Staff have been here a long time, it is consistent and that is

important" and "If it's agency then the other person is a regular worker."

- Staff told us their rota was stable, with some staff supporting the same person for a number of years. We were told, "I have a constant rota" and "I have been with this one client for 14 years." Staff also felt further recruitment of staff was needed as rota changes were needed at times.
- Managers acknowledged there were constant pressures with regards to the recruitment and retention. Contingency plans were in place and the service worked closely with agency staff so continuity of care could be provided.

Using medicines safely

- Systems were in place for the management and administration of people's prescribed medicines.
- Individual support plans and risk assessments were completed outlining the level of support required, for example, if items were prompted or administered as well as the arrangements for the ordering and safe storage of items.
- Records showed and staff confirmed medication training was provided. Additional training and assessments of competency were also carried out where support was provided for those people with complex care needs.
- Monthly audits were completed to check people received their medication as prescribed.
- Family members said support was provided with prescribed medicines where necessary. We were told, "Medication is on time and as needed. Pain relief is PRN (when required), staff have to decide, because [person] can't say" and "It's all in blister packs given at 9am and 10pm the team give prompts to take the medication."

Preventing and controlling infection

- Policies and procedures were in place to help minimise the risk of cross infection.
- A detailed risk assessment had been completed for people and staff in relation to COVID-19. Whilst not compulsory, the service continued to offer testing to help minimise the spread of infection.
- A programme of training was provided in relation to Infection Control. This was confirmed by staff. Staff also told us personal protective equipment (PPE) was also readily available.
- Family members confirmed staff wore PPE when providing care. We were told, "They always wear it when they are doing personal care" and "Yes they do."

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 our last inspection we rated this key question good. The rating for 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; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- People spoke positively about their experience and the working relationship they had with case managers. Family members told us, "They are very professional, there is nothing that I can't phone and ask about, they support me", "I can discuss anything with the care team and help develop the plans, there was the senior care and the physio and all our opinions were listened to" and "The care manager is brilliant, I'm always kept informed."
- Surveys had been developed to encourage feedback for people, their families and staff about their experiences and their views of the service.
- Staff told us they felt supported and liked working for the service. We were told, "I've got work-life balance, ease of access to the manager, admin staff, and seniors", "I have always had a prompt and reassuring response to any issues, both professionally and personally, I have had throughout my employment" and "The office are easy to contact. They offer training and support where needed."
- The service user guide includes details of what people can expect from the service. We were told this and other documentation would be provided in a format people could understand.

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

- The registered manager was aware of her role and responsibilities. Additional support was provided by the business director, case managers and administration team.
- A range of audits and checks were completed by the management team. These were kept under review; action plans were used to help drive improvement. Information was shared with staff to help inform areas of learning and development.
- The service had identified areas of on-going improvement to enhance the service provided. This included a career development pathway for all staff and the use of assisted technology.
- People's relatives and staff felt managers were accessible and responsive should they need to speak with them.
- Staff felt the service delivered a high-quality service and invested in the team. We were told, "Great skill mix", "Established relationships with other professionals", "Client focused" "Drive in staff training and development" and "The expertise is excellent."

Working in partnership with others

- The service works with a range of services to support people in maintaining their emotional and physical well-being. These include; neuro psychology, epilepsy nurse, respiratory physio, occupational therapist, speech and language therapists.
- One healthcare professional told us, "We have found both the organisation, the individual case managers and admin to be excellent. They provide clear instructions and are supportive of our recommendations. Their clients tell us that they are very satisfied with the support given by their case managers."