

Vopa Consulting Ltd Melody Care Farnborough Ltd

Inspection report

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Ratings

Overall rating for this service	Inspected but not rated
Is the service safe?	Good
Is the service well-led?	Good

Summary of findings

Overall summary

About the service

Melody Care Farnborough Ltd is a home care service providing personal care to people in their own homes. At the time of the inspection, 46 people received care services from Melody Care Farnborough Ltd. Not everyone who used the service received personal care. We only inspect 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.

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

People told us they felt safe with their care workers. One person said, "We haven't had any trouble with them at all." The provider had processes in place to manage risks, including risks arising from the COVID-19 pandemic. We were assured the provider used personal protective equipment (PPE) in line with government guidance to protect staff and people who used the service. There were suitable processes to protect people from the risk of abuse or poor care.

People told us the service was well managed and responsive. One person said, "They are very good. I don't have a bad word to say about them." We found the service had a well established corporate image based on values which supported person-centred care and good outcomes for people. There were effective systems in place to manage the service, and to monitor and improve the quality of care people received. The provider engaged positively with staff, people who used the service and their families to identify areas for 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 2 August 2019 and this is the first inspection.

Why we inspected

We carried out this focused inspection due to the time elapsed since the provider registered with us and partly because of information we received about the service. We found no evidence during this inspection that people were at risk of harm. During the COVID-19 pandemic we only carried out comprehensive inspections, which look at all five of our key areas, in exceptional circumstances where we had information about widespread risks.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our reinspection 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 •
Is the service well-led? The service was well-led.	Good



Melody Care Farnborough 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

Two inspectors carried out this inspection.

Service and service type

This service is a domiciliary care agency. It provides personal care to people living in their own homes.

The service had a manager registered with the Care Quality Commission (CQC). 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 the service 24 hours' notice of the inspection. This was so we could comply with infection prevention and control measures in the provider's office, and to give the provider time to seek people's consent to be contacted during the inspection.

Inspection activity started on 2 February 2021 and ended on 5 February 2021. We visited the office on 2 February.

What we did before the inspection

We reviewed all the information we had received about the service since they registered with us.

During the inspection

We spoke with five people who used the service and five relatives about their experience of the care provided. We spoke with five members of staff and the registered manager.

We reviewed a range of records. These included three people's care records, and three staff files in relation to recruitment. We looked at a variety of records relating to the management of the service, including policies and procedures.

After the inspection

We considered all the evidence collected during the inspection in order to inform our judgements.



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 systems and processes in place to protect people from the risk of abuse. Staff we spoke with were aware of how to respond to safeguarding concerns. People we spoke with told us they felt safe. One person told us, "I can rely on them, they haven't let me down."
- The registered manager understood how to escalate concerns about people's safety and liaised with the local authority and other agencies appropriately.

Assessing risk, safety monitoring and management

- The provider had processes in place to assess individual risks to people's safety. A wide range of risk assessments were completed according to the needs of people and these were updated regularly. Staff knew people well and had the required information to support people safely.
- The provider used a monitoring system which enabled senior staff to remotely check all tasks had been completed in care calls to ensure safe care was being provided.

Staffing and recruitment

- The provider had processes in place to recruit people safely and these had continued during the pandemic. They carried out the necessary checks to make sure staff were suitable to work in the care sector. Recruitment files were checked to ensure they contained the necessary records.
- The provider had made sure there were sufficient numbers of staff to support people safely during the pandemic. People told us they had not experienced any missed calls and staff arrived on time. People told us they were informed on the rare occasion their appointment time needed to change.

Using medicines safely

- The provider had suitable processes in place to make sure people received their medicines safely. People told us they were happy with the support staff gave them to take their medication.
- The provider gave staff training in how to administer medication and their competency was assessed regularly. The registered manager and senior staff monitored medication records to ensure medication was given safely. Action was taken promptly if any concerns were raised.

Preventing and controlling infection

• The provider made sure staff supported people in line with good practice in cleanliness and hygiene. People told us that staff had high standards of cleanliness and wore personal protective equipment (PPE) when supporting them. Staff told us they received appropriate training in infection prevention and control and had enough PPE to provide care safely.

- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was accessing testing for staff and checking for symptoms of COVID-19.
- We were assured that the provider was promoting safety through the layout and hygiene practices in the office.
- We were assured that the provider's infection prevention and control policy was up to date.

Learning lessons when things go wrong

- There were processes and procedures in place to learn from accidents and incidents. The registered manager reviewed all incident and accident reports and investigated any concerns promptly. One relative told us the registered manager had "investigated things and come back quickly".
- Quarterly audits included a review of accidents and incidents. Learning from these was shared within the staff team and with other local branches of Melody Care.



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 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, personcentred care.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- There was a positive, person-centred approach to care, which was based on the provider's values of kindness, respect and reliance. The registered manager worked to communicate these values throughout the organisation through training, engagement with staff, and their personal example. People and their families told us the service allowed them to live with a greater degree of independence in their own homes. One person said, "They are happy to do what I want to do, as long as it is within the guidelines."
- Staff were motivated, and told us they felt empowered and supported to deliver high quality care. The provider had supported staff to keep themselves and people using the service safe during the COVID-19 pandemic. This included measures to support staff members' mental wellbeing.

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 registered manager was aware of and understood the duty of candour. Records showed the necessary letters were sent to people or their families in line with the legal requirements.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- The registered manager had established a clear, effective management system in the service, with appropriate support from the wider organisation. There were clear job descriptions covering the roles of care and office staff, and a computer based rota system which made sure staff were aware of the calls assigned to them each day. People who used the service told us they were happy that their care workers knew what they had to do.
- The registered manager maintained a monthly task spreadsheet which helped them make sure they took into account compliance with relevant regulations and identified risks. In the course of the month, each week concentrated on one area of the service: care workers, office staff, people who used the service, and registered manager tasks.
- The provider had a system for monitoring and managing service quality. This included quarterly audits which covered areas such as reviewing care workers' visit notes, medicines records, care plans and rotas. They also covered staff training, complaints, incidents and accidents, and safeguarding. Actions identified in these audits were followed up and progress on actions was reviewed monthly.

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

characteristics

- The provider engaged regularly and effectively with people who used the service and their family contacts. People told us the service was easy to approach, and if they made suggestions or requests the provider responded to them and they saw improvements in their care plans. The provider had suspended personal visits by the registered manager or supervisors during the COVID-19 pandemic, but had continued to contact people by phone about their care and support. A client survey in September 2020 had shown that people felt safe, secure and protected. People felt staff dealt with incidents and accidents promptly, and they received a reliable service which was not rushed.
- The provider engaged regularly with staff through supervisions, appraisals and spot checks. Staff told us these were opportunities for two-way communication, and that they felt listened-to. As face to face team meetings were not possible during the pandemic, the registered manager had introduced a weekly email communication to staff with updates on people's changing needs and risks. A recent staff survey showed good scores with above average scores for teamwork, and supporting people with respect, care and kindness.

Continuous learning and improving care

• The registered manager had a continuous improvement and sustainability plan. This described achievements made in the previous year and ambitions for 2021. These included improving support to people in maintaining their physical and mental wellbeing, and to stay at home for longer without going into hospital. We discussed with the registered manager how this plan could be adapted to make it easier to track progress against identified actions.

Working in partnership with others

• The provider worked together with other agencies to make sure people experienced good quality, joined-up care. The registered manager had positive working relationships with social workers, GPs, and community nursing teams. They had worked with other agencies to obtain the necessary equipment so they could support a person to be able sleep in their bedroom, instead of in a reclining chair. This had a positive effect on the wellbeing of the person and their partner.