

Nestor Primecare Services Limited Allied Healthcare Wirral

Inspection Report

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Summary of findings

Overall summary

Allied Healthcare Wirral is a domiciliary care agency that provides support to adults in their own homes across Wirral. The agency also provides the 24 hour staff team based at Harvest Court, which is an extra care housing complex in Moreton. At the time of the inspection, 209 people were being supported by the service. The agency's office is located within Claughton village.

People using the service were safe because staff had received training on how to recognise signs of abuse and possible harm and knew what to do if they had any concerns. Staff were proactive in reviewing incidents or accidents to reduce the chance of reoccurrence. Staff managed risks to people's safety whilst encouraging them to maintain their independence and take part in activities they enjoyed.

The care provided was effective. People's needs were assessed when they started to use the service. Care records were personalised and identified people's personal preferences about how they liked their care and support to be delivered. People were supported to access health care and where people had existing health conditions they were supported to manage these. People received care from staff who had received the training they needed to deliver care and that were well supported through supervision and appraisal.

The staff working for Allied Healthcare Wirral were caring. We observed positive and respectful interactions between staff and the people they supported. Staff had a good understanding of both people's care and support needs; and their individual preferences. People were listened to and encouraged to express their views about their care and support.

The care provided was responsive to people's individual needs. However, this could be improved further. Most people felt involved in decision making about their care and support needs. Reviews were not all being undertaken within appropriate timescales. Most people told us their care workers came on time. However, some people highlighted that communication from the office could be improved, particularly around telling them when a different carer would be coming or if a carer was going to be late.

Allied Healthcare Wirral did not have a registered manager in post. Leadership had improved over recent months and good support was in place for staff. Systems were in place to assess and monitor the quality of care people received. Audits had identified areas for development and an action plan was in place to monitor work that was taking place to improve the service. However, this had not been fully completed in the expected timescale.

Summary of findings

The five questions we ask about services and what we found

We always ask the following five questions of services.

Are services safe?

People told us they felt safe. Staff had a good understanding of how to safeguard the people they supported from abuse. This was because there were clear policies and procedures in place, and staff had received safeguarding training and could demonstrate how they would identify and respond to abuse. This reduced the risk to people.

Staff had received training in the Mental Capacity Act 2005 and demonstrated an understanding of how to support people with decision making.

We found that staff recruitment was safe with all required checks undertaken. Staffing levels ensured care could be delivered safely, and there was a low level of missed calls.

Are services effective?

We found the service was effective. At the time of the inspection, care records were being transferred to new paperwork. People's assessed needs were clearly reflected in the care records we viewed. Care records were clear and provided comprehensive guidance on how people's care needs should be met. Information identified people's personal preferences about how they liked their care and support to be delivered.

Clear arrangements were in place to ensure people accessed health care and received good support to maintain their health or manage existing health conditions.

People received effective care from staff who had the knowledge and skills to carry out their roles and responsibilities. Staff accessed an induction programme when they started work, which included the opportunity to shadow experienced members of staff. Staff told us they felt well supported and accessed a range of training opportunities.

Are services caring?

People told us the staff were caring. We observed caring and supportive interactions between staff and the people they supported. Staff treated people with dignity and respect.

We observed that staff had a good understanding of both people's care and support needs and their individual preferences.

Summary of findings

People were listened to and encouraged to express their views about their care and support. Surveys were in place to gather the views and experiences of people who used the service.

Are services responsive to people's needs?

The service was responsive to people's needs but further improvements could be made.

Most people told us they were involved in decision making about their care and support. Staff were able to describe how they supported people to have choice and control over how they lived their lives.

Reviews of people's care and support needs were not all undertaken within the expected time frames.

Most people told us their care workers came on time. However, some people highlighted the office did not always inform them when a different carer was going to be coming, or if their carer was going to be late.

Complaints were identified and investigated appropriately. However, complaints were not always managed within the organisation's expected timescales.

Are services well-led?

Allied Healthcare Wirral did not have a Registered Manager in post, at the time of the inspection. The current manager told us they would be applying to the Care Quality Commission to register.

We found leadership within the service had improved over recent months. Work had been undertaken to develop the culture within the service, particularly in relation to the reporting of whistleblowing and safeguarding. Additional people were being recruited to care co-ordinator roles to strengthen the support available to care workers.

Systems were in place to assess and monitor the quality of care people received. Spot checks were used to ensure staff were delivering care effectively. Internal audits had identified a number of areas of development and an associated action plan was in place. However, progress against this action plan was mixed, with good progress in some areas and limited progress in others.

Work was underway to address gaps in staff being allocated to deliver calls.

Summary of findings

What people who use the service and those that matter to them say

We visited Harvest Court, which is an extra care housing scheme that is staffed 24 hours a day by Allied Healthcare Wirral care workers. We visited three people in their own homes, two of which lived in Harvest Court. During our visits, we observed how staff interacted with the people we were visiting. In addition, we spoke on the telephone, with ten people who were supported by the agency.

We also sent out a questionnaire to 50 people who used the service, all the staff employed by the service, and to community professionals. We received 12 responses from people using the service, two from staff members and one from a community professional.

We found people using Allied Healthcare Wirral felt safe. All the people we spoke with said they were happy with the carers that came into their homes. One person said “I have no concerns the staff are excellent and explain everything to me.”

A relative told us “My father has some brilliant carers who are very helpful, will pick up some shopping on their way to us if it is necessary.” The family members we spoke

with were all extremely satisfied with the service and with the staff. One family member said, “You can tell that he is happy, very happy in fact. He goes out every day and the carers know him really well.”

People and their family members told us the staff were kind and treated them with respect. One person said “I am quite happy here [Harvest Court]. I don’t think I could get anywhere better to live than this. I am treated with respect. They really are very good.”

Most people told us they were involved in decision making about their care and support. One person said “I was involved in my care plan and I have the same carers all the time and they are lovely girls.” One relative said, “We were asked about the care needs of my father and were fully involved in the development of his care plan, which has been reviewed recently.” However, one person told us they were not involved in their care plan and not asked about their specific needs, which meant that some care workers were not aware of their condition.

Allied Healthcare Wirral

Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the regulations associated with the Health and Social Care Act 2008 and to pilot a new inspection process under Wave 1.

The inspection team consisted of a Care Quality Commission 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.

The last inspection took place in September 2013. We found that people were satisfied with the care and support they received from staff and had been involved in their care. Arrangements were in place to safeguard people from abuse and recruitment checks were in place. Complaints were being managed appropriately.

We undertook the inspection on 13 and 14 May 2014. Prior to the inspection we reviewed all the information we held

about the service. Following the inspection we also received a Provider Information Return (PIR), this was a self assessment document completed by the manager of the service about the quality of care being provided.

We also contacted the local authority. However, the local authority told us they did not undertake contract monitoring visits of Allied healthcare Wirral as they did not directly use the service, although a number of people do use the agency that are on direct payments from the council.

We visited Harvest Court, which is an extra care housing scheme that is staffed 24 hours a day by Allied Healthcare Wirral care workers. We visited three people in their own homes, two of which lived in Harvest Court. During our visits, we observed how staff interacted with the people we were visiting. We also spoke on the telephone, with ten people who were supported by the agency.

We also spoke with the manager of the service, the area manager, the team leader at Harvest Court, their NVQ assessor, training manager, two senior carers, and two carers. We viewed a range of records including: people's care records; staff records; and the service's policies and procedures.

Are services safe?

Our findings

We found people using Allied Healthcare Wirral felt safe. All the people we spoke with said they were happy with the carers that came into their homes. One person said “I have no concerns the staff are excellent and explain everything to me.” One person living at Harvest Court said “I am really very happy here and I don’t think I could get anywhere better to live than here now I need some extra help.” Of the 12 responses to the questionnaire we sent out to people, all responses confirmed that people felt safe using the agency.

Allied Healthcare Wirral had a safeguarding policy in place, which had last been reviewed in February 2013. This policy was designed to be used in conjunction with the local authority’s safeguarding procedure. All staff working at the service had received safeguarding training. We spoke with the manager, two care coordinators and two care workers about safeguarding. All were able to describe situations that could constitute abuse. The care workers said if they identified abuse, they would raise this with their care coordinator. The care coordinators and the manager told us they would report any allegations of abuse to the local authority, and notify the Care Quality Commission. This meant that arrangements were in place, and being used, to keep people safe from abuse and avoidable harm.

The service had policies in place in relation to the Mental Capacity Act 2005 (MCA). The MCA provides legal safeguards for people who may be unable to make decisions about their care. All the staff we spoke with, including the manager demonstrated an understanding of the MCA. Training records showed that staff had received training in the MCA. The manager explained how they would identify decisions where capacity needed to be considered and how they would use the best interests process to support people with such decisions.

We found risks were identified, assessed and managed in a way that protected people effectively. We looked at three people’s care records and found these contained risk assessments for areas such as nutrition, falls and pressure care.

We spoke with a care worker who had recently started at the agency about the recruitment process. They explained the process in detail, they had applied for the post, and gone through a structured interview that demonstrated they had the skills required by the agency and then been offered the post subject to satisfactory recruitment checks and references. Once these had all been received and seen to be satisfactory they had started their induction, which included shadowing experienced members of staff.

We also looked at the recruitment records of a care worker. Appropriate recruitment checks were undertaken before the care worker started to work for the service and these were clearly recorded. Checks included: two references, identification checks, and a Disclosure and Barring Service (DBS) check. The Disclosure and Barring Service carry out a criminal record and barring check on individuals who intend to work with children and vulnerable adults, to help employers make safer recruiting decisions and also to prevent unsuitable people from working with children and vulnerable adults.

The manager provided us with information that showed a low rate of missed calls (0.05%) in the 28 days leading up to the inspection. We looked at staffing levels across the service and found these were sufficient for delivering the care and support people required. This meant that people received the care and support they required to keep them safe.

Are services effective?

(for example, treatment is effective)

Our findings

Most people we spoke with were satisfied with the care and support they received and felt it met their needs. A relative told us “My father has some brilliant carers who are very helpful, will pick up some shopping on their way to us if it is necessary.”

Historically, the service had used different care record documentation for people who were using the service due to a previous merger of companies. This was highlighted through a provider level audit in February 2014 and a decision made to replace all documentation with new ‘My Life My Choices’, risk assessment and care planning documents developed by the provider. At the time of the inspection, the replacement process had begun and approximately a third of people’s care records had been replaced with the new paperwork.

We reviewed three people’s care records (that were on the new paperwork) and found their assessed needs were clearly reflected in their care records. Care records were clear and provided comprehensive guidance on how their care needs should be met. In addition, the information within people’s care records was personalised and identified people’s personal preferences about how they liked their care and support to be delivered.

We saw evidence of people attending routine appointments with a range of health care professionals. Whilst visiting Harvest Court, we spoke with a chiropodist who said to us “The staff are wonderful here and very helpful. They are very caring people.” They went on to describe Harvest Court as an excellent service and they thought from their observations and from speaking to people living at Harvest Court that everybody received good quality care and support.

New members of staff undertook an induction programme, which was aligned with Skills for Care guidelines. Skills for Care provide best practice guidelines for the training and development of staff working within social care. The manager told us all staff members had received an induction. We looked at one person’s induction in detail and found this included competency based questions. We spoke with one member of staff who had worked for Allied Healthcare Wirral for less than a year. They were very positive about the support they had received when they started work.

The staff we spoke with told us they felt well supported. One person said “I love my job, I always recommend working here to others.” Another person who worked at Harvest Court said, “The atmosphere here is great and the residents are lovely.” The provider level audit undertaken in February 2014 recorded that 80% of spot checks, supervisions and appraisals had been undertaken.

The manager told us all staff had accessed courses that were considered by the service to be essential such as safeguarding, medication safety and moving and handling. Overall we found training levels were high. In addition, many staff members had accessed additional training beyond that considered to be essential. During the inspection, a National Vocational Qualification (NVQ) assessor was at the office delivering assessment sessions with people working on their NVQs. They told us they found Allied Healthcare Wirral to be very positive to work with, and that they encouraged staff to undertake their NVQs to develop their skills in care.

Are services caring?

Our findings

Staff had developed caring and positive relationships with the people they supported. During the visits we made to people in their own homes, we observed good interactions between staff and the people they supported. This was confirmed by all the people we spoke with. One person said, “They are lovely caring girls.” And another person said “The staff are brilliant and very caring.” Another family member said, “They are marvellous the staff, just wonderful.”

People and their family members told us the staff were kind and treated them with respect. One person said “I am quite happy here [Harvest Court]. I don’t think I could get anywhere better to live than this. I am treated with respect. They really are very good.” This was confirmed by the questionnaire responses we received from people who used the service.

All the staff we spoke with during our home visits demonstrated a good understanding of the needs and preferences of the people they were supporting. For example, one care worker described how they had supported one person to access the community and to build their independence by working towards goals. We looked at this person’s care records and found this information and their personal preferences were all contained within their care records.

One person, we spoke with told us about the emergency system in place at Harvest Court. They described how they

had fell and called for help using their pendant. They said the staff came immediately and had called for an ambulance. They said the staff were very calm, kind and reassuring throughout, which had made them feel better. They went on to say that although the staff were booked to give them a morning and evening call, they often would just look in and check on them to see if they needed anything.

People were encouraged to express their views about their care and those views were listened to and respected. The manager told us staff checked the views of people and their family members about the quality of care and support provided during their reviews. One person at Harvest Court told us they had a social committee and that every 6-8 weeks they had a party with entertainment.

The service routinely used two surveys; one was sent eight weeks after a person started using the service and another was sent one year after. We looked at the analysis compiled of the surveys. For the anniversary survey, 116 surveys had been sent out, and of these, 37 surveys were received back between June 2012 and September 2013.

The anniversary survey found that the service was performing well in areas including: people’s overall satisfaction with their care workers; care workers treating people with dignity and respect; and the service being personalised to people’s needs. Areas where the service needed to improve was on informing people of changes to their care workers or if their care worker would be late; and the branch dealing with problems effectively.

Are services responsive to people's needs?

(for example, to feedback?)

Our findings

Most people told us they were involved in decision making about their care and support. One person said "I was involved in my care plan and I have the same carers all the time and they are lovely girls." One relative said, "We were asked about the care needs of my father and were fully involved in the development of his care plan, which has been reviewed recently." However, one person told us they were not involved in their care plan and not asked about their specific needs, which meant that some care workers were not aware of their condition.

The manager told us about how decisions were made in line with Mental Capacity Act and gave us an example of one person who had been supported with their finances. For this person, the service had accessed an advocate to support them with decision making in relation to this. Staff also had a good understanding of how to support people with decisions about their day to day care.

Reviews of people's care should be carried out once per year in line with Allied Healthcare Wirral policy, or immediately if a person's needs changed. We found that a high number of reviews had not been routinely undertaken within this timeframe. At the time of the inspection, the service was in the process of changing over its care planning documentation, which was replacing the review process as each person was being fully reassessed. Most people who had received a review told us they had been involved with this. However, one person said "I know the care plan has been reviewed but I do not know the outcome."

Staff we spoke to demonstrated a commitment to people having choice and control about how they spent their time. We found staff offered support and encouragement to people to access the community and take part in activities they enjoyed. For example, one care worker at Harvest Court described how the staff team arranged different events for people living at Harvest Court. They had just held a film night, which they said people and staff had really enjoyed. They also described how staff had spent time with one person who had dementia to prompt them to walk, and over time they had started to come down to the restaurant and were enjoying socialising with other people.

Most people we spoke with or who responded to our questionnaire told us staff arrived on time. One person said, "If the carers are going to be late the office let me know." Another person said "the carers are spot on time and we get a call from the office if they are late or ill." However, another person said, "I would like the carers to come on the days and times stated on the dairy of the dates and times, and not when they like. I am finding it inconvenient, when they come at different times."

Some people told us that communication from the office could be improved, particularly in relation to changes to staff attending to provide care and also to advise that a staff member would arrive late. One person said, "The office communication is lacking. For example, changes to rotas and staff arrive late after the start of the week and therefore we do not know who is coming into our home to carry out the care." Another person said, "The office does not telephone me to advise me if different carers come." This meant the service was not always organised so that it met people's needs.

The manager showed us a copy of the complaints procedure, which was last reviewed in May 2013. They told us information on how to make a complaint was present in each person's home. We saw information on how to make a complaint within people's care records. The procedure highlighted that if people remained dissatisfied with the response to their complaint they could contact the Local Government Ombudsman.

We were shown the electronic system that was used to record complaints. All information relating to complaints including documents were logged on this system to provide an audit trail of how any issues had been investigated. We found that complaints were being identified and investigated appropriately. As the system, was electronic all complaints and other incidents were also monitored by the regional office. However, a provider level audit identified, that in February 2014, out of 38 complaints open, 18 had not been responded to / resolved within the company's expected timeframe.

The manager told us they tried to resolve any minor concerns quickly so they did not escalate to a formal complaint. All the people and family members we spoke with said they knew how to complain and would feel confident to do so if necessary.

Are services well-led?

Our findings

At the time of the inspection, a registered manager was not in place at the service. There was a registered manager listed on our register but they had left the service some months earlier and had not yet completed their forms to deregister with the Care Quality Commission. The manager in place at the time of the inspection, was planning on registering with the Care Quality Commission to work permanently as the manager of the service.

From speaking with staff at all levels of the organisation, we found that leadership within the service had improved over the months leading up to the inspection. Steps were being made to strengthen the leadership of care workers through the recruitment of additional care coordinators. The management team had been working to improve the culture within the organisation, particularly in relation to the reporting of safeguarding and whistleblowing.

Allied Healthcare Wirral had a whistleblowing policy, which was available to all staff. During the inspection, we discussed with the manager previous safeguarding concerns that had not been referred to the local authority at the time when they were first identified. These issues were later referred in late 2013 and action taken by the new management team to improve the culture within the staff team, so people felt able to whistleblow if they felt their concerns were not being listened to by their direct line manager.

The new manager had undertaken a piece of work with staff at Harvest Court to promote the whistleblowing policy and to ensure staff knew that if they had any problems they could also go directly to the manager themselves. We spoke with a care worker, who was aware of these issues who told us about what had happened, and how it had made the staff feel. They said, "I used to think we have told them so that was all we could do." They were positive about the arrangements in place and had a clear understanding of both safeguarding and how to whistleblow if needed.

We found line manager's included consideration of how staff met the organisation's values within people's appraisals. All the staff we spoke with during the inspection, demonstrated the values expected by the service.

The management team had systems in place to assess and monitor the quality of care at Allied Healthcare Wirral. A range of audits were in place to check the quality of care being provided, and the standard of record keeping. Spot checks of staff within people's homes were used to ensure staff were on time, dressed appropriately and that they delivered care appropriately.

The service had received a provider level audit in February 2014, which had identified areas of development. The manager showed us the associated action plan that had started to be implemented in March 2014, which was comprehensive. This included week by week tracking on how the actions were being progressed. This demonstrated that whilst good progress was being made within some areas, for others progress was limited. For example, the audit had identified that log books and medication administration record charts were not being routinely collected and audited in line with company policy. At the time of the inspection, this had only been undertaken for 20 people's care records, which was lower than the target figure of 54 people's care records.

We looked at how staffing was managed within the service. Staff 'templated' calls, which meant they allocated staff to attend the calls. This was an important activity as it also involved ensuring people had regular care workers who had the skills required to meet people's individual needs. The provider level audit identified this had been a gap for the service, with a high level of untemplated calls. At the time of the inspection, a staff team had been put together to address this and this work was underway. This meant that the service had identified improvements that were needed and were taking action to address these issues.