

Worlta Health Care Ltd

Worlta Health Care Ltd

Inspection report

Unit 8, First Floor
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21 July 2022

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Ratings

Overall rating for this service

Requires Improvement 

Is the service safe?

Requires Improvement 

Is the service effective?

Good 

Is the service caring?

Good 

Is the service responsive?

Good 

Is the service well-led?

Requires Improvement 

Summary of findings

Overall summary

About the service

Worlta Health Care Ltd is a domiciliary care agency providing personal care. The service provides support to people living in their own homes in the community. 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 three people using the service.

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

The provider was not operating safe recruitment practices. They had not obtained all the information they needed to assure themselves of the suitability of staff they employed. This meant the provider's governance systems were not entirely effective, because the provider had not identified the issue we found around recruitment which increased the risk of people receiving unsafe or inappropriate care. The provider did however carry out criminal records checks on staff when they applied to work at the service.

Notwithstanding the issue above, people were safe using the service. Staff had been trained to safeguard people from abuse and knew how to manage risks to people, to keep them safe. There were enough staff to support people and meet their needs. Staff were punctual and consistent with their timekeeping. Staff followed current practice when providing personal care and when preparing and handling food which reduced infection and hygiene risks in people's homes.

People were satisfied with the care and support they received from staff. People were involved in planning their care and support and could state their preferences for how this was provided. They received the care and support that had been planned and agreed with them because staff knew people well and understood how their needs and preferences should be met.

Where the service was responsible for this, staff helped people to eat and drink enough to meet their needs. Staff understood people's healthcare needs and how they should be supported with these. They reported any concerns they had about people's health and wellbeing promptly so that appropriate support could be sought for them.

Staff received training to help them meet people's needs. Staff were supported and encouraged to continually learn, develop and improve in their role. They enjoyed their work and supporting people. The registered manager carried out spot checks on staff to make sure they were carrying out their duties appropriately and to a high standard.

Staff were caring and treated people well and respected their right to privacy, dignity and independence. People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

The registered manager regularly monitored the safety and quality of care and support provided to people. They checked with people at regular intervals that the care and support provided was meeting their needs and sought their views about how the service could improve.

There were arrangements in place to investigate accidents, incidents and complaints and people to be involved and informed of the outcome. The registered manager worked proactively with healthcare professionals involved in people's care and acted on their recommendations to deliver care and support that met people's needs.

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

Rating at last inspection

This service was registered with us on 20 May 2021 and this is the first inspection.

Why we inspected

This inspection was prompted by a review of the information we held about this service.

We have found evidence that the provider needs to make improvements. Please see the safe and well-led sections of this full report. You can see what action we have asked the provider to take at the end of this full report.

After the inspection the provider contacted us and told us they had they had requested the information required to assure themselves of the suitability of staff employed.

Enforcement

We have identified a breach in relation to fit and proper persons employed. Please see the action we have told the provider to take at the end of this report.

Follow up

We will request an action plan from the provider to understand what they will do to improve the standards of quality and safety. We will work alongside the provider and local authority to monitor progress. 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?

The service was not always safe.

Details are in our safe findings below.

Requires Improvement ●

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 not always well-led.

Details are in our well-Led findings below.

Requires Improvement ●

Worlta Health Care 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 Health and Social Care Act 2008.

Inspection team

The inspection team consisted of 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.

Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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. At the time of our inspection there was a registered manager in post.

Notice of inspection

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 registered manager would be in the office to support the inspection. Inspection activity started on 21 July 2022 and ended on 26 July 2022. We visited the location's office on 21 July 2022.

What we did before the inspection

We reviewed information we had received about the service since they were first registered. 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 one person and two relatives about their experiences of the service. We spoke with the registered manager and three care support workers. We reviewed a range of records including three people's care records, records relating to staffing, recruitment, training and supervision and other records relating to the management of the service.

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 of this newly registered service. This key question has been rated requires improvement. This meant some aspects of the service were not always safe and there was limited assurance about safety in these areas. There was an increased risk that people could be harmed.

Staffing and recruitment

- The provider was not operating safe recruitment practices. One staff member had not completed their application form fully and detailed information about their previous employment was missing. This meant the provider could not be fully assured the staff member was appropriately experienced and suitable for the role.
- References obtained for two staff members were not reliable as these did not reflect their previous employment history. This meant the provider could not be fully assured of the character and former work experiences of these staff.

The provider had not carried out appropriate checks on staff to make sure only those suitable were employed to support people. This increased the risk of people receiving unsafe or inappropriate care from potentially unsuitable staff. This was a breach of regulation 19 (Fit and proper persons) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

The provider responded immediately after the inspection. The provider confirmed they had requested the missing information from staff about their employment history and asked for more suitable references from staff's former employers, to assure themselves of their suitability.

- The provider had carried out Disclosure and Barring Service (DBS) checks on staff. DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.
- There were enough staff to meet the needs of people using the service. People told us staff were punctual and attended their scheduled care calls on time, consistently.

Systems and processes to safeguard people from the risk of abuse

- People were safe using the service. One person said about the registered manager, who provided care and support to people on a regular basis, "[Registered manager] is very respectful and kind. I feel safe with him." A relative told us about staff, "They are kind and they keep [family member] safe. [Family member] is always happy to see them."
- Staff had been trained to safeguard people from abuse. They were aware of safeguarding procedures and how and when to report concerns to the appropriate person or authority.
- The registered manager understood their responsibility to liaise with the relevant agencies if a safeguarding concern about a person was reported to them.

Assessing risk, safety monitoring and management

- The provider managed risks to people's safety and wellbeing. One person said, "When [registered manager] comes and helps me go upstairs he's there behind me watching and makes sure I get up safely to the bathroom. He's monitoring that I'm safe." A relative told us, "[Family member] needs to use a hoist and the staff have been great in using the equipment and they use it correctly. They do all the right things."
- People's records contained information about identified risks to their safety and wellbeing and what staff should do to manage these risks to keep people safe.
- Staff understood risks to people they were supporting and gave us examples of how they helped people to stay safe when they were providing care.
- Staff had been trained to deal with emergency situations and events if these should arise in people's homes.

Using medicines safely

- None of the people using the service at the time of this inspection needed support from staff to take their prescribed medicines.
- Should this support be required in the future, the provider had systems in place to manage and administer people's prescribed medicines in a timely and appropriate way.

Preventing and controlling infection

- The service managed risks associated with infection control and hygiene.
- Staff had received relevant training and followed current guidance to keep people safe from risks associated with poor infection control and hygiene. They used personal protective equipment (PPE) effectively and safely.
- Staff supported people to keep their homes clean and hygienic to prevent the spread of infection. A relative told us, "They are professional and look after the house and keep it clean."
- The provider's infection prevention and control policy was up to date. The provider had plans in place to make sure that infection outbreaks could be effectively prevented or managed.
- Staff had been trained in food hygiene to help them reduce hygiene risks to people when preparing and serving food.

Learning lessons when things go wrong

- Learning from accidents and incidents was used to reduce safety risks to people.
- There were systems in place for staff to report and record accidents and incidents. The registered manager investigated accidents and incidents and took action when this was needed to reduce the risks of these reoccurring.
- Learning from accidents and incidents was shared with staff to help them improve the quality and safety of the support provided.

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.

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

- The provider had arrangements in place to make sure people's care and support needs could be met by the service. Prior to people using the service the registered manager undertook assessments of people's needs to make sure these could be delivered in line with current practice and guidance.
- People and others involved in their care had been involved in assessments and were asked for detailed information about their needs and how and when they would like care and support to be provided.
- People's choices about how and when support was provided had been recorded in their care records. This helped to make sure staff provided support in line with people's wishes and needs.

Staff support: induction, training, skills and experience

- Staff received relevant training to help them meet people's needs. Training was refreshed at regular intervals so that staff stayed up to date with current practice. A staff member said, "We have done all of our training and we're up to date with that. We can redo our training if we don't feel confident until we do feel confident."
- Staff had regular supervision with the registered manager to support them in their role and to identify any further training or learning they might need.
- The registered manager and staff team worked closely together and had regular conversations to share information and talk through any issues or concerns they had about people. A staff member told us, "We have monthly supervision and we are up to date with our training. [Registered manager] is very supportive."
- Staff were encouraged to achieve relevant qualifications in health and social care to support their professional development. A staff member told us, "[Registered manager] has been really supportive and helping me to prepare and do the level 3 [NVQ Level 3 Diploma in Health and Social Care]."

Supporting people to eat and drink enough to maintain a balanced diet; supporting people to live healthier lives, access healthcare services and support; staff working with other agencies to provide consistent, effective, timely care

- Where the provider was responsible for this, people were supported to eat and drink enough to meet their needs.
- People's records included their preferences for meals and drinks. This helped people receive food and drink of their choice. People's specialist dietary needs had been noted for staff to take account of when supporting people with their meals.
- People were supported to manage their health and medical conditions. People's records contained information for staff about how they should do this.
- Staff were observant to changes in people's needs and reported any concerns about people without

delay. A relative told us, "The carers picked up [family member] was developing a pressure sore and we were able to get support for [family member] straight away. If they notice anything, they let me know straight away."

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 MCA 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.

- Systems were in place to assess people's capacity to make and consent to decisions about specific aspects of their care and support. Where people lacked capacity to make specific decisions, there were processes to involve people's representatives and healthcare professionals to ensure decisions would be made in people's best interests.
- Staff had received training in the MCA and associated codes of practice. The registered manager understood their responsibilities under this Act.

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 were looked after well by staff. One person said, "[Registered manager's] very respectful when he's doing my care and very kind. He respects my cultural background... I tell him what to do and he does listen to me." A relative told us, "[Family member] really likes them and they always do a good job and that makes [family member] happy." Another relative said, "The carers adore my [family member] and treat them with utmost respect and they are so good to us."
- People received support from the same staff so that the care they received was consistent. Staff told us they enjoyed supporting people and said the service was a good place to work. One staff member said, "I am really happy to work for this company." Another staff member told us, "I think the company provides good care from the heart. I think we take our time and we don't rush people. We understand their needs and spend all the allocated time with people."
- People's wishes in relation to how their social, cultural and spiritual needs should be met were recorded so that staff had access to information about how people should be supported with their needs. A staff member told us how one person enjoyed watching films and television shows that reflected their cultural heritage and ethnic background, so they made sure these were on for the person to enjoy when they were supporting them with their needs.
- Staff received equality and diversity training as part of their role. This helped staff understand what discriminatory behaviours and practices might look like to help them make sure people were always treated fairly.

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

- People, and those important to them, took part in making decisions and planning their care and risk assessments.
- The provider obtained people's feedback at regular intervals to make sure the care and support they received was continuing to meet their needs.

Respecting and promoting people's privacy, dignity and independence

- People told us staff respected people's privacy and dignity and sought people's consent before providing any care.
- People were supported to be as independent as they could be. A relative said, "I watch the carer give [family member] a spoon to take a drink with which is fantastic in promoting their independence." A staff member told us when they supported a person to eat, "I make sure [person] can hold their spoon and put their food in their mouth. I don't do this for them. I make sure they can do this themselves."

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; support to follow interests and to take part in activities that are socially and culturally relevant to people; supporting them to develop and maintain relationships to avoid social isolation

- People had choice and control over how their care and support was provided. People's records reflected their preferences and choices for how and when they received support, taking account of their specific needs. A staff member told us about a person they supported, "I really want to help [person] make their own decisions about what happens."
- Staff understood people's needs and how these should be met. One person said, "[Registered manager] knows me really well now and he knows what I like and what I need." A relative told us, "They have a good understanding of [family member's] needs. I feel quite comfortable with what they are providing, and I can leave them with [family member]."
- Staff recorded the care and support they provided to people. The registered manager reviewed these records to make sure people were receiving the care and support planned and agreed with them.
- People's records contained information about their life history and interests to help staff get to know people and meet their needs. One person said, "[Registered manager] is very chatty and we do have conversations and he likes to talk and we have a good chat about what is happening in the world. He asks about my history and what I did...he enjoys listening to my stories. He's quite chatty and I enjoy his company and I think he enjoys mine." A relative told us, "One carer every time she comes in she says hello and puts on [family member's] favourite show and they have a chat about it."
- People's records contained information for staff about the important relationships in people's lives and how people should be supported to maintain these.

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- People's communication needs had been identified, recorded and highlighted so that staff had access to relevant information about how they should be supported with these.
- Staff understood people's individual communication styles and had developed a rapport with them. One staff member said about one person they supported, "I talk to [person] as normal and go by their expressions and their eyes to see if they are comfortable with what I'm doing. I try and stay alert to anything that might indicate that they weren't happy or comfortable." Another staff member told us, "I try and

develop a good relationship with the person so I have learnt all the physical cues the person uses to communicate and check they're ok."

Improving care quality in response to complaints or concerns

- The service had systems in place to deal with concerns and complaints, investigate them, learn lessons from the results and to share learning with the whole staff team.
- The registered manager told us no formal complaints had been made about the service since they had started operating.

End of life care and support

- People were not routinely asked about their wishes for the support they wanted to receive at the end of their life. The registered manager told us they would make sure this information was collected and recorded on people's records where this was appropriate. This would help to ensure that staff would know what to do to make sure people's wishes and choices were respected at the appropriate time.
- None of the people using the service required end of life care and support at the time of this inspection.

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 requires improvement. This meant some aspects of service management and leadership were inconsistent.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; continuous learning and improving care; 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's governance systems were not entirely effective. They had not identified the issue we found with their current recruitment practices at this inspection which increased the risk of people receiving unsafe or inappropriate care from staff.
- The provider responded immediately after the inspection and confirmed they would be increasing their monitoring and oversight of the recruitment process to make sure all the appropriate checks had been made.
- Notwithstanding this issue, the provider undertook regular monitoring checks of the safety and quality of care and support provided to people. They dealt with any issues from these checks promptly and used this information to support staff to learn and improve their working practices.
- Staff delivered good quality support consistently. One person said, "It is excellent. I would certainly recommend them. It is very good." A relative told us, "Very professional and an excellent service. They will go that extra mile and are friendly and give me updates and communicate with me regularly especially if they had any concerns." Another relative said, "They are professional, courteous and put the client in the forefront."
- The registered manager and staff team understood their roles and responsibilities to people using the service. The registered manager notified CQC of events or incidents involving people which helped us check they took appropriate action to ensure people's safety and welfare in these instances.
- The provider had systems in place to apologise to people, and those important to them, when things went wrong. The registered manager understood their duty to give honest information and suitable support, and to apply duty of candour where appropriate.

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

- The registered manager was accessible and approachable and took a genuine interest in what people, relatives and staff had to say. A relative said, "Whenever we need something, or some changes need to be reported I always go to [registered manager] and he listens." A staff member told us, "[Registered manager] is very supportive. He is really approachable and like one of us. If we have any concerns, we can pick up the phone and he's always there to find solutions."
- The provider had clear expectations about the quality of care and support people should receive. These

were communicated to people and others involved in their care when they first started using the service. The registered manager used spot checks to make sure staff were providing care and support to the standard expected.

- People were provided opportunities to have their say about the service and how it could improve. Staff were encouraged to give ideas and about how care and support could continually be improved for people.

Working in partnership with others

- The provider worked proactively with healthcare professionals involved in people's care. They made sure recommendations and advice from healthcare professionals was used to design the care and support provided to people. This helped to ensure that care and support was up to date with current best practice in relation to people's specific needs.

This section is primarily information for the provider

Action we have told the provider to take

The table below shows where regulations were not being met and we have asked the provider to send us a report that says what action they are going to take. We will check that this action is taken by the provider.

Regulated activity	Regulation
Personal care	Regulation 19 HSCA RA Regulations 2014 Fit and proper persons employed The provider had not ensured recruitment procedures were operated effectively to ensure that persons employed meet the conditions in - (a) paragraph (1) Regulation 19(2)