

Smart Care Limited

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Inspection report

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Tel: 01932855353

Date of inspection visit:
27 September 2019

Date of publication:
05 November 2019

Ratings

Overall rating for this service

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Smart Care Limited is a domiciliary care service providing personal care to people living in their own homes. The service is for adults of all ages who are living with a physical or a learning disability or with dementia. At the time of this inspection, there were 63 people receiving a personal care service.

Why we inspected

We had previously carried out an unannounced comprehensive inspection of this service 20 December 2018. At this time, one breach of legal requirements was found which was Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014: Good Governance. The provider completed an action plan after the last inspection to show what they would do and by when to improve. We undertook this focused inspection to check they had followed their action plan and to confirm they now met the legal requirements.

This report only covers our findings in relation to the Well- Led Key Questions which contain those requirements. The ratings from the previous comprehensive inspection for the other Key Questions were not looked at on this occasion. The overall rating for the service is now Good in every Key Question with no breaches of Regulation.

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

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

At the previous inspection, people were experiencing the delivery of good and safe care. This had continued, and we had no new concerns. Since the inspection, the provider had addressed the issues we reported on about missed care calls, quality of care records, monitoring of care staff and reporting accidents and incidents.

People's care records had been reviewed and provided a comprehensive and person-centred approach that supported good care delivery. Staff had been supported to ensure they always recorded information in a person-centred way. The service received positive feedback from people and their relatives. One family member wrote, "Communication between the agency and ourselves is excellent. The staff are very approachable."

Care delivery was now scheduled and monitored using an electronic system. This had been embedded into the service since the last inspection. The service was confident about ensuring all care was delivered as expected and there was a backup process for dealing with any emergencies.

People were cared for by staff who were supervised and monitored in a regular and robust way. The provider could demonstrate that care staff were delivering good quality care. Any shortfalls were identified and

addressed. Staff were motivated and incentivised to give their best and do what was expected of them.

There was a positive and committed leadership team at the service. Although the registered manager was not present, another manager was able to support staff and demonstrated that all the improvements had been made. Staff spoke highly of the good communication the team and supportive environment they worked within.

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

Rating at last inspection and update

The last rating for this service was Good (published 15 April 2019). However, there was a breach of regulation found, regarding the good governance of the service. At this inspection we found improvements had been made. The provider was no longer in breach of the care regulations and the service was well led.

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 well-led?

Good ●

The service was well-led. Details are in our well-Led findings below.

Smart Care Limited

Detailed findings

Background to this inspection

The inspection

We carried out this focused 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 Well-led Key Question 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 the service 24 hours' notice of the focused inspection. This was because we wanted to be sure there would be staff in the office to speak with us. The inspection took place on 27 September 2019. The registered manager of this service was away, but another manager from Smart Care was able to support the inspection.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. This included their action plan and any notifications and safeguarding information we had received. Statutory notifications are information that the service is legally required to tell us about. 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 this information to plan our focused inspection.

During the inspection

This was a focused inspection to check whether specific improvements had taken place about how the service was managed and led. At the inspection, we spoke with the registered manager from another Smart Care service, and with four other staff, including two care staff, about improvements and the management of the service.

We looked at the electronic system used by the service that supported care schedules and enabled a range of care records to be produced effectively. We reviewed the most relevant records which evidenced changes made since the last inspection, including staff supervision and quality checks, meetings, audits and accident and incident reporting. We did not speak to service users as the improvements required had related to governance and organisational matters. We reviewed three care plans describing people's care and read feedback from people and their families about their good experiences with the service and staff.

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 the last inspection this key question was rated as Requires Improvement. At this inspection this key question had improved to Good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

At our last inspection, the provider had failed to evidence how they ensured the quality of their care delivery was maintained, including monitoring of missed care calls and routine checks of their staff in people's homes. The recording by staff on accidents and incidents and giving enough information about risks in people's care plans also needed improvement. This was a breach of Regulation 17: (Good Governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

At this inspection we found much improvement had been made and the provider was no longer in breach of the regulation.

- People's care plans contained the detail staff needed to be able to provide good quality care and address any known risks due to their health conditions. Where people were at risk due to diabetes or an infection, there were now clear instructions and signs for care staff to look out for. Care plans had been reviewed and were comprehensive, including information on people's mental health and cognition where this was relevant.
- The organisation and monitoring of people's care had been improved by the implementation of the electronic care planning system. This enabled real time monitoring of care delivery via a mobile phone application used by staff. There was visibility of any care calls in progress, completed or still needed in each day. Immediately after the last inspection, an interim text messaging system for care staff was put in place whilst the electronic approach was embedded. This was still in place as a backup. The care co-ordinator was proud to say, "We have had no missed calls at all this year."
- The governance for care delivery was further enhanced by a robust 'on call' system that covered any care outside of the office hours. This provided guidance for the 'on call' staff and ensured they were clear about the expectations in the event of a missed call, delay, or any emergency with a person at home. The rota was always covered by senior staff members which meant care staff had support in the community.
- Staff were clear of their responsibilities to report and record any accidents or incidents that occurred in people's homes. The registered manager had introduced a new form, and had written to staff and provided training on the reporting procedures. Incident forms had been consistently used and completed in full over the last seven months, with appropriate actions taken to protect and support people.
- There was a good overview of all incidents by month and the registered manager reviewed these for any

trends or wider actions as part of their quarterly audits. The provider ensured that families and the right agencies were informed and involved following any incident or hospital admission.

- There was a robust and organised approach to monitoring staff practice and the quality of service. Each staff member received two supervision meetings, a monthly unannounced visit in a person's home and one observation as part of their appraisal each year. Any concerns seen at the home visits, for example staff not wearing uniform, or not having gloves and aprons for care giving, were followed up and training was provided.
- At the last inspection, we made a recommendation about the recording of staff supervisions, and competency checks. At this inspection, we saw that supervision records and observations were thoroughly completed. One of the care staff told us, "I have my two supervisions. It is very organised. I have the notes beforehand, so I can prepare. We always talk about my clients and how I can improve anything with them." A new form had been introduced and different topics were covered, including safeguarding, nutrition and hydration, person centred care and medicines.

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

At the last inspection, it was reported that staff did not always write in a person-centred way in the daily notes and in care plans. This was included in the breach of regulation. At this inspection, improvements had been made and people's wishes, and feelings were also recorded.

- The registered manager had acted to promote a positive and person-centred approach following the last inspection. They had communicated with staff explaining the reasons why the daily recording was so important and about ensuring their language was always helpful and respectful. It was also raised at a senior care staff meeting to get their input and ideas. We saw examples of daily records which were factual and clear and included how the person was feeling that day. We had no concerns about any language used.
- People's care plans reflected their views and wishes. People were asked about their condition, any improvements and what help they needed. People who had anxiety or a mental health condition were now being asked how care staff could support them. As a result, one person was being taken out twice a week as part of their care plan as this had an impact on their mood and overall well-being. One of the staff told us, "We now have a greater understanding of how to support people with anxiety and depression."
- Staff supervision records were person centred, evidencing that the people receiving the service were the focus. The views of staff about any additional help a person might need were noted. One staff member said, "Respect for people is the goal of our services, everyone is an individual. The care staff are taking this into people's homes."
- People were involved in the quality monitoring of the staff and service. The home visit checks with staff had been enhanced to get the person's views on how staff treated them and to check on more things, such as the quality of the daily notes. A customer survey had been undertaken in August 2019. Out of 27 people who replied, all agreed that Smart Care was "Providing you with a high quality of care," with 63% agreeing it was outstanding and 37% that it was good. One person wrote, "I have nothing but praise for Smart Care, the care workers, the office and [name of registered manager]."
- Staff were positive about the organisation and the way changes had been made. One care staff said, "I love my job, we are helping to better people's lives. We are a good team and I am supported. There is good communication about people, and we give our views and ideas. Having the details of each person's care on the phone works really well."

Continuous learning and improving care

- The registered manager had used the learning from the previous inspection to develop the service and address any shortfalls. There was an evident commitment and passion, at all levels, to deliver the best possible service for people. One staff member told us, "We spread best practice through meetings with each other, supervision and on a daily basis too, over text, to make sure everyone knows what to do." Staff had also been provided a range of factsheets and information on health needs such as diabetes, depression, pressure sores, and dementia.
- The service was continuing to improve by making use of the electronic system to develop communication amongst the team and create more efficiency in their records. There was planning to move all the relevant records onto the mobile application so that care staff could access them. For example, it was planned they would complete the daily notes and incident forms this way. The manager who supported this inspection told us, "We are doing it slowly to ensure we take all staff with us. We are part of the process with them, we are all learning. We want to build confidence."
- Staff were encouraged and incentivised to improve and deliver good care. The provider ran a reward and bonus scheme which was dependent on staff completing certain tasks correctly and consistently with their customers and in the service. One staff member told us, "It means we work a bit harder and check that we have done everything. It means the quality is better for people too."
- The provider now had a medicines champion, who had a key role in ensuring the service followed best practice in administering medicines in the community. They trained and supported new staff, checked existing staff competency and audited medicine practice and records. If there were any issues with people's medicines, they had the knowledge to be able to liaise with the pharmacist or GP and put in place new guidance if needed. If errors were made, there was a process for follow up with staff concerned. Any learning was captured and shared in the team.

Working in partnership with others

- The provider demonstrated a consistent approach across its own services. A registered manager from another service supported this inspection and was able to find and provide all the information we required. There was good organisation within the office demonstrating the service was well led.
- The service worked with other care agencies to support larger packages of care and enable people to remain in their own homes for as long as possible. There were good relationships with commissioners such as the local authority. The provider ensured they attended reviews and meetings where their knowledge of the person's care would be of benefit.
- Staff liaised with the local pharmacy and GP about people's medicines. The registered manager or medicines champion attended health service meetings to get training and updates. More recently, they had joined Diabetes UK forum to ensure they kept up to date on significant information.
- People's relatives praised the communication and organisation of the care agency. One had written to say, "The whole organisation is professional and has a real 'can do' attitude, working in partnership with relatives."