

Ocala Healthcare Limited Ocala Healthcare

Inspection report

Ametech House, Wood Farm Business Centre Crowfield Road Ipswich IP6 9TH Date of inspection visit: 08 December 2021

Good

Date of publication: 17 December 2021

Tel: 01473378100

Ratings

Overall	lrating	for this	service
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Is the service safe?	Good 🔍
Is the service effective?	Good 🔎
Is the service caring?	Good 🔍
Is the service responsive?	Good 🔍
Is the service well-led?	Good •

Summary of findings

Overall summary

About the service

Ocala is a domiciliary care service providing personal care to people in their own homes. Not everyone who used the service received personal care. CQC only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do, we also consider any wider social care provided. At the time of this inspection there was one person using the service in receipt of personal care.

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

This was a bespoke care service supporting people with large care packages across a 24-hour period, with designated staff trained. Specialist training was provided to meet people's assessed needs.

Systems were in place to ensure the person remained safe. Risks to the person had been adequately planned for and guidance for staff in place to reduce these risks. Staff had the knowledge, skills and training to provide the person with appropriate support.

The registered manager and staff understood their responsibilities to recognise abuse and keep people safe. Safeguarding incidents were appropriately investigated, and records maintained.

There were sufficient staff who had the necessary skills and knowledge to meet people's needs and provide care and support in ways that people preferred.

There were systems in place in the management of COVID-19, training for staff, access to PPE and regular testing of staff.

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 promoted a strong culture of putting people at the centre of what they do, and staff treated people as individuals. The person and their relative told us they were treated with kindness and respect by staff.

The registered manager was committed to providing a good quality service and developing the service in line with best practice. They understood the importance of quality monitoring and how to use this to drive improvements. There were clear systems in place to audit the quality of care delivered to people. Staff and people using the service were invited to give feedback on their experiences.

Feedback from social care professionals told us the registered manager was professional, open and transparent and worked flexibly to meet people's needs.

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 06/06/2018 and this is the first inspection.

Why we inspected

This was a planned first rating, comprehensive inspection.

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 effective?	Good •
The service was effective.	
Details are in our effective findings below.	
Is the service caring?	Good 🗨
The service was caring.	
Details are in our caring findings below.	
Is the service responsive?	Good •
The service was responsive.	
Details are in our responsive findings below.	
Is the service well-led?	Good •
The service was well-led.	
Details are in our well-Led findings below.	



Ocala Healthcare

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 This 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 homes.

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 48 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the provider or registered manager would be in the office to support the inspection.

What we did before the inspection

We sought feedback from the local authority and professionals who work with the service. The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report. We used all of this information to plan our inspection.

During the inspection-

We received feedback from the person receiving a service, their relative and two social care professionals. We also spoke with the registered manager and two staff.

We reviewed a range of records. This included care records for the person using the service. We looked at two staff files in relation to recruitment, training and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at training data and quality assurance records.

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 since registration of this 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 registered manager had a range of measures in place to help safeguard people from the risk of abuse. Feedback from social care professionals told us safeguarding concerns were thoroughly investigated in an open and transparent manner.

• Staff had received training in safeguarding procedures and knew how to report any concerns relating to people's safety and welfare.

Assessing risk, safety monitoring and management

- Risks to people's health, welfare and safety had been assessed and monitored.
- The registered manager carried out comprehensive individual and environmental risk assessments which identified any risks with comprehensive management plans to protect people and staff from the risk of harm.
- Staff told us they were provided with the information they needed to keep people safe. For example, how to move people safely with detailed guidance on how to use equipment.

Staffing and recruitment

- There were sufficient staff to meet the person's needs.
- Required safety checks had been carried out to ensure that staff employed were skilled and suitable to carry out the work they were employed to perform.
- The person was supported by a team of regular staff who stayed for the allotted time.
- There were on call arrangements in place for outside office hours should people using the service or staff need advice or support.

Using medicines safely

- At the time of our inspection there was no one receiving support with medicines administration.
- Staff received training in the safe administration of medicines.
- There was a policy in place and systems for monitoring should anyone be in receipt of support with administration of their medicines.

Preventing and controlling infection

- There was an infection prevention and control policy in place. Additional guidance in relation to infection prevention and control during the pandemic was introduced to provide staff with current information about COVID-19.
- Staff had received training in infection prevention and control including how to safely apply, remove and

dispose of personal protective equipment (PPE).

• Staff told us they were supplied with enough PPE to undertake their work safely. The person using the service confirmed that staff always wore PPE.

Learning lessons when things go wrong

- Incidents and accidents were recorded and reviewed by the registered manager.
- The registered manager recognised the importance of being open and using incidents to identify improvements. This was also confirmed from feedback we received from the local authority.

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 since registration of this 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

- Care planning for the person receiving a service was comprehensive and personalised. Their needs and choices were clearly identified, and guidance provided for staff on how to promote their independence, with a focus on respecting their choices, likes and dislikes.
- The registered manager supported staff to provide care in line with best practice guidance and legislation. They described how they maintained contact with local and national forums to ensure that they kept abreast of the latest developments in social care.

Staff support: induction, training, skills and experience

- Staff undertook an induction programme when first joining the service which included face to face training and shadowing experienced colleagues.
- Staff had completed refresher training and observational checks were conducted by the management team to ensure staff were competent and to identify any further training or support requirements.
- A training matrix was in place to enable the registered manager to monitor which staff had completed training and flag when refreshers were due.
- Quality assurance surveys showed the person receiving care and their relative had expressed confidence in the skills and knowledge of staff.
- Staff were well supported by the management team. One member of staff told us, "They [registered manager] are very supportive. Always available when you need them. No question is a silly one. They provide you with lots of reassurance and feedback on your work."

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- The service worked closely with other agencies such as health services and the local authority. For example, where support with daily living was required, in relation to mobility support needs.
- Staff told us they would report any concerns in relation to the person's health to the management team for referral.
- Feedback from social care professionals was positive. One told us, "They [registered manager] are proactive and have the needs of the person at the centre of all they do."

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 Act 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.

• The person receiving a service was supported to have maximum choice and control of their lives. Staff described how they supported them in the least restrictive way possible.

• The care plan provided guidance as to the person's views as to how they wished their care to be provided.

• Feedback from the person and their relative confirmed care and attention had been given to ensure their views and decisions were respected and independence promoted.

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 since registration of this 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; Supporting people to express their views and be involved in making decisions about their care

- The person receiving care and support had been involved in the planning and review of their care. They told us their privacy was respected and dignity promoted when supported with personal care.
- Care records made clear what tasks the person needed support with and what they could do for themselves.
- The registered manager took into account the need to respect equality and diversity in their care assessments and planning of support. Where people's cultural background affected how they preferred care to be given, this was reflected in their care plan.
- Staff were up to date with their equality and diversity training. There were systems in place to update staff on any changes to people's needs or preferences.

Respecting and promoting people's privacy, dignity and independence

- Staff gave examples of how they supported the person to maintain their independence in daily living skills, respecting rights and choices.
- A relative told us, "The staff not only support [person's relative] with their physical needs but also their emotional and mental health needs too. We have nothing but good things to say about how professional and helpful everyone is. [Person's relative] and we feel part of the Ocala family as we work together to make sure [person's relative] has the 24 hour care they need."

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 since registration of this 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

• The person using the service was provided with care which was personalised and enabled them to live their life in line with their personal preferences. It was clear from our discussions with staff they knew the person very well.

- The person and their relative were complimentary about the care provided in what they described as, "Bespoke and personalised." The relative told us, "They have taken great care to provide a flexible, personalised service with attention to detail."
- The provider ensured the person's care records were kept up to date and personalised to their individual needs. Records included information about the persons interests, likes and dislikes. Records also made clear the way in which the person communicated their thoughts and feelings

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

• The registered manager was aware of AIS, and the provider's assessment process was designed to identify people's individual communication needs. At the time of this inspection the standard did not apply to the person supported.

Improving care quality in response to complaints or concerns

- The registered manager had a system to log, follow up and close complaints.
- The registered manager was open and transparent about complaints and demonstrate a willingness to learn from them.
- Feedback from social work professionals told us the provider was open and any concerns had been thoroughly investigated with action points and recommendations followed.

End of life care and support

• There was no one currently receiving end of life 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 since registration of 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, person-centred care.

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

- Satisfaction surveys enabled people to comment on the care they received. The person using the service and their relative told us, "They are flexible and accommodating, they respond to changes when needed well. We are more than pleased with the service they provide."
- Staff were motivated, empowered and supported to deliver high quality care. Staff told us, "This is the best place I have worked, and I have worked in care for a long time. They [provider] really care about the people we look after and their staff. They really listen. They do kind things like send you gifts in the post and we have recognition with employer of the month." And, "Everything they do is thorough and with the best interests of people at the heart of all they do. The manager is always available, and you never feel like any question you have is a stupid one. They want to do things well and provide us with lots of support."

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 understood duty of candour and demonstrated awareness of their legal responsibilities. They knew when notifications were required to be sent to the Care Quality Commission [CQC] and how to make referrals in the event of a safeguarding concern.

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

- Feedback from the person receiving care and their relative was very positive, describing the caring nature of the service, flexibility, openness and transparency of the management team.
- There were clear and effective governance and accountability arrangements in place.
- The registered manager understood the importance of quality monitoring and how to use this information to drive improvement.
- The registered manager had considered the impact of the pandemic on the service and had updated their policies to ensure compliance with government guidance.

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

- The provider had a system for monitoring and managing service quality. This included audits, surveys and staff performance checks.
- Information from analysis of incidents and accidents, feedback from people and their relatives and health

and complaints were used to continually improve the service being provided.

Working in partnership with others

• The service worked effectively in partnership with others to improve outcomes for people. The registered manager and staff had good working relationships with other professionals, people and their families.

• One social work professional told us, "I have found the management team at Ocala to be flexible, responsive and extremely professional during all of our conversations. I admire their ability to say no when they feel they cannot safely meet the expectations of a package of support and this gives me confidence they will not overreach or endanger customers by engaging in support beyond the training levels of their staff. They supported one of our customers for a period of time and we received extremely positive verbal feedback from the person's network, including close family."