

Team Locum Limited

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Inspection report

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Team Locum Limited is a domiciliary care service which provides personal care to people in their own homes and flats. At the time of the inspection there were 15 people using the service.

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 care, hygiene and eating. Where they do, we also consider any wider social care provided.

People's experiences of using the service and what we found

People were protected from risk of abuse because staff had received training in safeguarding and knew what actions to take to keep people safe. Risks to people had been assessed and were regularly reviewed. People told us they felt safe with the staff who supported them and felt staff were trained. Medicines were managed safely.

People's risks had been identified and there were clear risk assessments in place to provide staff with current information to enable them to support people safely. Staff were also trained in people's support needs, for example, people's medical conditions.

People told us they felt safe and well cared for. All staff were trained in safeguarding and there was a safeguarding policy to provide guidance. Staff wore personal protective requirement (PPE) in line with current government guidance.

People's care plans, risk assessments and other personal records included details of their interests, personal history, and what support was required.

The provider undertook pre-employment checks on prospective staff to check their suitability to support the people who used the service.

People and their relatives spoke positively about the overall service and the caring approach staff adopted to their work. They were asked for their feedback on the service and knew how to contact the provider as needed. Staff felt valued and supported by the management team and were able to raise any concerns about people's care. The provider conducted regular audits to review the quality of care provided and how this could be improved.

Rating at last inspection

The service was rated good at their last inspection on 08 April 2019.

Why we inspected

We received concerns that the provider had not followed appropriate procedures in relation to recruitment of staff. As a result of this information we undertook a focused inspection to review the key questions of safe

and well led only. For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the rating.

We found no evidence during this inspection that people were at risk of harm from this concern. Please see the safe section of this full report.

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

Follow up

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?

Good ●

The service was safe
Details are in our safe findings below

Is the service well-led?

Good ●

The service was well led
Details are in our well led findings below

Team Locum Limited

Detailed findings

Background to this inspection

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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 regulation associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the act 2014.

Inspection team

The inspection was completed by one inspector.

Service and service type

This service is a domiciliary care agency. It provides personal care to people living in their own home. The service had a registered manager in post who is 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 provider 48 hours' notice of the inspection. This was because we needed to be sure that the provider or registered manager would be in the office to support the inspection. The inspection was supported by the provider as the manager was not available.

Inspection activity started on 19 April 2022 and ended on 03 May 2022. We visited the location on 20 April 2022.

What we did before the inspection.

We reviewed the information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. We used the information the provider sent to us before the inspection. The provider was not asked to complete a Provider Information Return (PIR) prior to this inspection. A PIR is information providers send to us to give some key information about the service, what the service does well and improvements they plan to make.

During the inspection

We spoke with six people who used the service and five relatives about their experiences of the care provided. We also spoke with five staff, including the operations manager. We reviewed a range of records including care records for five people using the service, medication records and risk assessments that identified risk associated with people's care. We looked at the recruitment process and procedures for five staff who had recently been recruited. We looked at records relating to the management of the service including audits and monitoring systems. We looked at records relating to training, spot checks and supervision for staff.

After the inspection

We continued to seek clarification from the provider to validate evidence found.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At our last inspection we rated this key question good. At this inspection the rated as this key question has remained the same.

Staffing and recruitment

- The provider completed pre-employment checks on prospective staff to ensure they were suitable to work with people. This included an enhanced Disclosure and Barring Service (DBS) check. Where the provider had needed staff to start urgently during the Covid-19 pandemic, we were assured they had put measures in place to mitigate any risks.
- People using the service and their relatives told us the service was reliable and they received support from consistent staff.

Assessing risk, safety monitoring and management

- People we spoke with felt safe with the staff that supported them. One person told us "They [staff] know me inside out and all my little bits and bobs that I have done." Another person said, "I have an excellent service; [I] could not ask for more. The staff are amazing, never let me down. They do a great job and are on the ball."
- Staff spoken with knew people well and understood the risks associated with their care and support needs. They told us the information in people's care records ensured they knew what the risks were when supporting them.
- Risk assessments provided guidance about risks to the individual and any environmental risks that staff needed to be aware of.
- Risk management plans were in place to ensure people were supported safely.

Systems and processes to safeguard people from the risk of abuse

- People were protected from the risks of harm, abuse or discrimination because staff knew what actions they should take if they identified concerns. Staff told us they would report any such concerns to the management team and were confident these would be acted on. One member of staff told us, "I am confident management would take action to protect people."
- The provider had clear safeguarding procedures in place to ensure people were protected from the risk of abuse. They ensured any abuse concerns were reported to relevant external agencies and appropriately investigated.

Using medicine safely

- People received the support they needed from staff to take their medicines safely and as prescribed. A relative told us, "They [staff] are spot on with [named person's] medication; I have no worries."
- All staff had completed training in the provider's medicines procedures, so they understood their associated responsibilities.
- People's care records clearly explained the level of support they needed from staff with their medicines.

Preventing and controlling infection

- The provider had taken steps to protect people, staff and others from the risk of infections.
- Staff had received training to help them understand good infection prevention and control practice.
- Staff had been provided with appropriate personal protective equipment (PPE) and people told us they wore disposable aprons, gloves and masks when needed.

Learning lessons when things go wrong

- There were clear processes in place to learn from when things went wrong. The provider told us "We are open and transparent and admit when we are wrong as that is the only way we can put things right."
- Accidents and incidents were recorded and analysed by the provider for any pattern or trends. Appropriate action was taken to mitigate future risk.

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 Good. At this inspection, this key question has remained the same.

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

- People and relatives spoken with were positive about the overall service provided. One relative told us, "I would recommend the agency; staff are professional."
- The ethos and values of the service were aimed at placing people first. These values were communicated to staff.
- Staff felt valued in their work and well supported by the provider and management team. They told us they had regular contact with the management team and office staff and could seek advice about people's care whenever needed.
- Staff felt able to raise any concerns about people's care with the provider and management team and were confident these would be addressed.
- People and their relatives spoke positively about the caring and person-centred approach staff adopted to their care. A relative told us, "My relative is well looked after so I do not need to worry. They love the care staff; they brighten her day."

Managers and staff are clear about their roles and understand quality performance, risks, and regulatory requirements; continuous learning and improving care

- The registered manager understood the responsibilities associated with their role and told us they received good support from the provider.
- We saw regular audits were carried out by the provider to check the quality of the service provided to people.
- The provider used the audits completed on the safety and quality of people's care to improve the service provided.
- Competency checks were carried out on staff by the provider to check they had the knowledge and skills to safely meet people's care needs, and identify any further training or support needed. Staff received regular supervision from management during which they received feedback on their work and any action they needed to take.
- Accidents and incidents involving people were reported, investigated and action taken to reduce the risk of reoccurrence. We saw examples of discussions with people following incidents including, for example, where staff had been late for a call and the action the provider had taken to resolve the concern.

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 was open and honest when things went wrong. For example, complaints were followed up

with appropriate actions and explanations and apologies were given to those affected when required.

- The provider had submitted notifications to the CQC as they are legally required to do.

Engaging and involving people using the service, the public and staff fully considering the equality characterises, working in partnership with others

- People told us they were asked regularly about their care and what could improve. The provider used this feedback to identify how the service could be improved and acted on this.
- People and their relatives felt able to contact office staff and the management team with any concerns or suggestions regarding the care provided.

Working in partnership with others

- The management team and staff worked with external health and social care professionals to ensure people's needs, including their individual health needs, were monitored and addressed.