

Forget me not homecare services Ltd

Forget me not homecare services ltd

Inspection report

6 Wansbeck Workspace
Rotary Parkway
Ashington
NE63 8QZ

Tel: 01670719944
Website: www.forgetmenothomecareservicesltd.co.uk

Date of inspection visit:
20 November 2023
23 November 2023
24 November 2023

Date of publication:
08 December 2023

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

Forget me not homecare services ltd is a domiciliary care service providing personal care for people living 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 our inspection there were 19 people using the service, 17 of whom received a regulated activity.

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

People and their loved ones told us they were happy with the care and support provided, which they felt was safe, appropriate and respectful. Risks were assessed and mitigated and staff knew how to respond if they had any concerns. Safe recruitment practices were followed. People were supported by a dedicated team of staff who knew each person well. Systems were in place to ensure the safe management of medicines.

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.

Everyone we spoke with felt the service was well managed, that staff were knowledgeable, and managers approachable. There was a clear focus on monitoring the service and learning from incidents to make sure people received good quality care and support. Staff understood their roles and responsibilities, and the provider understood their responsibilities in line with regulation and the duty of candour.

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

Rating at last inspection

The last rating for this service was good (report published 18 July 2019).

Why we inspected

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

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

This was an 'inspection using remote technology'. This means we did not visit the office location and instead used technology such as electronic file sharing to gather information, and video and phone calls to engage with people using the service as part of this performance review and assessment.

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.

Forget me not homecare services ltd

Detailed findings

Background to this inspection

The inspection

We carried out this performance review and assessment under Section 46 of the Health and Social Care Act 2008 (the Act). We checked whether the provider was meeting the legal requirements of the regulations associated with the Act and looked at the quality of the service to provide a rating.

Unlike our standard approach to assessing performance, we did not physically visit the office of the location. This is a new approach we have introduced to reviewing and assessing performance of some care at home providers. Instead of visiting the office location we use technology such as electronic file sharing and video or phone calls to engage with people using the service and staff.

Inspection team

One inspector completed the inspection.

Service and service type

This service is a domiciliary care agency. It provides personal care to people living in their own homes.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post who was also the provider and nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

Notice of inspection

We gave 48 hours notice of the inspection. This was to make arrangements to carry out a virtual inspection and we needed to be sure the provider would be available to support the inspection.

Inspection activity started on 20 November 2023 and ended on 24 November 2023. We contacted people and relatives on 23 November 2023.

What we did before the inspection

We reviewed 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 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 3 people who used the service and 3 relatives about their experience of the care provided. We also received email feedback from 3 relatives. We spoke with the registered manager, who was also the provider and nominated individual, the director of quality, and 5 care staff. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

We received email feedback from 1 member of the care staff. We reviewed a range of records including 4 people's care and medicines records. We looked at recruitment records for 2 members of staff. A variety of records relating to the management of the service, including policies and procedures, were also reviewed. We also received email feedback from 3 social care professionals.

This performance review and assessment was carried out without a visit to the location's office. We used technology such as video calls, telephone calls and email to enable us to engage with people using the service, relatives and staff. We used electronic file sharing to enable us to review documentation.

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 rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- Staff followed systems and processes to make sure people were safeguarded from the risk of abuse.
- Concerns were appropriately reported, recorded and reviewed for learning.
- One person said, "I feel very safe, I couldn't fault the staff or the care."

Assessing risk, safety monitoring and management

- Risks were assessed and action was taken to mitigate identified risks.
- Care staff were confident in saying they would share any concerns and risk assessments would be updated by senior care staff.

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.

- The provider and staff were working within the principles of the MCA.
- One social care professional said, "When discussing MCA and LPA (Lasting Power of Attorney) the provider has been able to identify the key factors of capacity and the rights of when an LPA comes into effect."

Staffing and recruitment

- Staffing levels were managed well and staff worked together to cover for any unexpected absences. There had been no missed calls and people were informed if staff were running late.
- People told us they were supported by a small team of staff and comments included, "It's sometimes different staff, but I know them all" and "I know all the girls, they stay as long as they should and never rush me."
- Safe recruitment practices were followed.

Using medicines safely

- People were supported to receive their medicines as prescribed.
- Staff attended training in medicine administration and had a competency check completed regularly where they were observed administering medicines.
- Regular medicine audits were completed to identify any areas for improvement or development.

Preventing and controlling infection

- Systems were in place, and followed by staff to prevent and control infection.
- Staff were trained and spot checks of staff were completed regularly.

Learning lessons when things go wrong

- The registered manager and director of quality regularly reviewed incidents and accidents for learning.

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

- The culture was positive, open and inclusive. There was good team work and effective managerial support.
- Systems were in place, and followed by staff to provide person-centred care that achieved good outcomes for people.

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 and director of quality were aware of their responsibilities under duty of candour.
- There was an open and honest approach to managing any concerns within the service.

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

- The provider had a clear management structure that monitored the quality of care to drive improvements in service delivery.
- Regular audits were completed, and a quarterly review of quality monitoring was completed which clearly showed actions taken and outcomes achieved.
- Some actions were being taken to further develop the service however these were not always documented.

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

- The provider actively sought feedback from people and staff by way of surveys and regular contact.
- People, and their loved ones, said they knew who to speak with if they had any concerns about the service. Everyone we spoke with confirmed they had no concerns.
- Staff told us they felt listened to and could make any suggestions which were always considered and responded to.

Continuous learning and improving care

- The provider had created a learning culture at the service which improved the care people received.
- Staff said they had all the training they needed to support people safely and commented if they felt they

needed additional training they only had to mention it and it was provided.

Working in partnership with others

- The provider worked in partnership with others, including the local authority and health and social care professionals.
- People and loved ones were complimentary of the provider's approach in working with them to make sure they received good quality care which met their needs and preferences.