

Oscar Care Services UK Limited

Epsom House

Inspection report

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Ratings	
Overall rating for this service	Good •
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

Say when the inspection took place and whether the inspection was announced or unannounced. Where relevant, describe any breaches of legal requirements at your last inspection, and if so whether improvements have been made to meet the relevant requirement(s).

Provide a brief overview of the service (e.g. Type of care provided, size, facilities, number of people using it, whether there is or should be a registered manager etc).

N.B. If there is or should be a registered manager include this statement to describe what a registered manager is:

'A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.'

Give a summary of your findings for the service, highlighting what the service does well and drawing attention to areas where improvements could be made. Where a breach of regulation has been identified, summarise, in plain English, how the provider was not meeting the requirements of the law and state 'You can see what action we told the provider to take at the back of the full version of the report.' Please note that the summary section will be used to populate the CQC website. Providers will be asked to share this section with the people who use their service and the staff that work at there.

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. The service had policies and procedures on safeguarding people from possible abuse. Staff knew what to do if they suspected any abuse had occurred.

Recruitment practice was safe and thorough. The registered manager ensured that staff were appropriately qualified to meet the support needs of people who used the services. This helped to ensure that people's needs were met.

There was an appropriate policy and staff procedure to help administer medicines to people safely.

Is the service effective?

Good



The service was effective. People were supported by well trained staff who were knowledgeable and had the skills and knowledge to care for people effectively. All staff had completed induction training before working on their own. They received regular effective supervision.

The person who received care and support from this agency at the time of this inspection was capable of making their own decisions about their care.

They received the support they required to eat and drink and to maintain their a healthy lifestyle.

Is the service caring?

Good



The service was caring. People valued the care they received and liked the staff who supported them.

Feedback we received from various sources showed that the staff were caring.

The staff knew how to treat people with respect and to protect their privacy and dignity.

The staff were kind and helpful and knew the person they were supporting.

Is the service responsive?

The service was responsive. People contributed to the assessment and planning of their care. We saw that care was tailored to meet people's individual needs and requirements and aimed at increasing people's independence. Care records were detailed and clear.

The care plans we inspected were based on thorough assessments that were reviewed and updated so that people's changing needs could be met.

People were aware of the complaints procedure and were confident that any concerns would be dealt with appropriately via the complaints process.

Is the service well-led?

Good



The service was well-led. Staff were appropriately supported by the registered manager.

There was open communication within the staff team and staff felt comfortable discussing any concerns.

The registered manager had implemented a variety of quality assurance methods so that they could regularly check the quality of the service being provided. They made sure people were happy with the service they received.



Epsom House

Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

The inspection was announced and took place on 13 February 2017. The provider was given 24 hours' notice because the location provided personal care in the community and we needed to be sure that staff and managers would be present in the office.

It was carried out by one inspector. Before this inspection we looked at notifications that the provider is legally required to send us about certain events such as serious injuries and safeguarding alerts.

We spoke with two care staff and the registered manager. We inspected four people's care files including the person who used the service at the time of this inspection and three staff files. We also looked at other records related to the running of the service.

After the inspection we spoke on the telephone with one healthcare professional, four relatives and the person who used the service.



Is the service safe?

Our findings

The relative of the person receiving care and support at the time of this inspection told us their family member was well treated by staff and they felt their family member was safe with the service they received. Other relatives of people who had received care from this agency confirmed this view and they were complimentary about the service received. One of these relatives said, "They were very good indeed, we were very happy." A health professional told us they were happy with the service and the care provided by the agency was safe.

Staff explained how they would recognise and report abuse. Records we saw confirmed that they had received training in safeguarding adults. Staff understood how to "whistle-blow" and were confident that the management would take action if they had any concerns. The registered manager understood the process for dealing with safeguarding concerns appropriately as well as working with the local authority safeguarding team around investigations and any safeguarding plans implemented.

Before people were offered a service, an initial assessment was undertaken by the registered manager. This assessment involved looking at any risks faced by the person or by the staff supporting them. We saw that person centred risk assessments had been undertaken in relation to mobility and falls, self-harm, security at home and possible behaviours that may challenge staff. Plans were put in place to minimise any risks identified for people and to ensure they were safe from harm.

We saw that the registered manager had worked closely with other services, for example with a day centre, where staff accompanied the person to. This enabled the person to attend the day care provision and helped to mitigate risks they might face in using that service.

A relative told us they thought there was adequate staff cover to meet the needs of their family member. We saw from the staff rotas staffing arrangements were adequate to meet people's needs. Staff told us that they had enough time to carry out the tasks required and they would inform the registered manager if they felt they needed more time to complete complex tasks or any additional tasks. There was out of hour's management cover provided by the registered manager.

Recruitment checks were carried out before staff started working with people using the service. Each staff member had employment references, identity checks and a criminal records check. This helped to ensure staff were safe to work with people who used the service.

The person using the service did not require to be given or to be prompted to take their medicines as this was done by their relative. We saw that there was a policy and procedure in place that gave staff guidance about the administration of medicines. A medicines risk assessment was also completed to help make sure people received their prescribed medicines safely and at the right time. Where staff had supported people with medicines, they had made a record of how they assisted people with their medicines and details were kept of the medicines people took in their care plan.



Is the service effective?

Our findings

All of the relatives we spoke with told us that they thought the staff who provided the care and support for their family members were trained and competent to carry out the work. One relative told us, "They help [family member] in the way we want them to and they know how to do things properly. They seem to be well trained and properly supported by the manager."

We saw that staff completed a detailed induction programme when they first started working for the provider. During this period staff completed training in key areas such as safeguarding and moving and handling. Staff then spent a period of time during their induction out in the community shadowing more experienced staff prior to them working unsupervised. Further training was provided to staff and refreshed on an ongoing basis. We saw that training records were kept by the provider to monitor that the training provided to staff was up to date.

Staff received support to carry out their roles effectively. Staff said that the registered manager was supportive and that they could contact him if they needed to discuss anything related to their work. Regular one to one supervision sessions were held with staff and staff were invited to attend regular meetings at the provider's office. The provider also carried out spot checks on staff whilst they were supporting people in their homes. During the checks they obtained the views of people who used the service about the staff working with them. Any issues would be raised with the staff member in their supervision.

We saw staff had received training in the Mental Capacity Act (MCA). The registered manager and staff told us that they obtained consent from people when providing care and support. One staff member said, "We always talk with the person to see what they want and how they want things to be done for them." The relative of the person using the service told us that they were happy with the way staff worked with their family member. Good assessment processes meant that any concerns were identified about the person's ability to make decisions regarding the care that they were receiving. The registered manager told us that the person receiving a service was able to give consent and daily notes seen confirmed this.

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 provider and staff were aware of the need to work within the MCA framework where people were not able to give consent to aspects of their care.

Where assistance was required with eating, drinking and shopping for food, we saw from the records that staff encouraged people to eat a balanced diet. The person being supported at the time of this inspection was given assistance with meal preparation and eating and drinking by their relative and this was detailed clearly on their care plan. We saw from training records that staff received training for assisting people with healthy eating.

The agency worked in concare plans we inspected in staff to follow in reporting	cluded details of involved	d health professionals ar	nd there were procedure	met. The s for



Is the service caring?

Our findings

The person using the service and relatives told us that the staff were kind, helpful and caring. It was evident from what we were told that people valued the support they received. Relatives said, "Staff are polite and courteous, kind and caring. They do everything they are supposed to do." Another relative of someone who recently received a service from this agency said, "Excellent service, we were so pleased that our [family member] received help from this agency. They did not miss a beat; they did everything and more for our [family member]."

A healthcare professional told us the service provided reliable staff who had a caring and friendly attitude. They said the service was professional and could be trusted to deliver good, reliable care.

Staff told us they knew what help the person needed from reading their care plan and from talking with them. Staff said they took the time to speak with people to ask how they would like their care and support to be provided. The registered manager told us they carried out regular checks to ensure the service provided the support the person needed and wanted. They told us this included visiting the person to carry out an assessment together with the person and their relatives. The registered manager were told staff were required to go through people's care plans so that they knew exactly what needed to be done for the person concerned.

When we looked at the service's policies and procedures manual we saw there was a policy that referred to upholding people's privacy and dignity. This policy was linked with staff training. In addition the service had policies in place relating to equality and diversity and this helped to ensure people were not discriminated against. For example there were policies to do with different cultures, customs and festivals.

One staff member said that the training had really helped them to focus on treating people with dignity and promoting independence to ensure people felt valued. Staff we spoke with were clear that treating people with dignity and respect was a fundamental expectation of the service. They told us they gave people privacy whilst they undertook aspects of personal care as much as possible.

We saw from the care plans we inspected there was a good level of detail about how staff could help the person express and communicate their wishes. Staff also knew that they had to provide information to people in a way they understood when providing care and support to them so people could make informed decisions about their care.



Is the service responsive?

Our findings

The person using the service told us that staff provided them with the care and support they required. Their relative said they were happy with the service being provided and the registered manager was responsive to any requests made of them.

We saw people's needs were assessed before they could start using the service. Care plans were developed based on the assessments completed by the registered manager and those provided by commissioners if available. The plans were then agreed by the person using the service or their representative. A copy of the care plan was kept in the person's home for reference and another in the agency office.

Care plans we looked at provided staff with detailed information about people's preferences, needs and the tasks staff were expected to carry out to meet people's needs. Staff completed a daily record after each visit recording a summary of the care and support provided as well as any significant observations or issues.

The provider sought feedback from people or representatives through the use of regular questionnaires. These were sent out at regular intervals seeking their views about the service they received. We saw people were able to comment on all aspects of the service including the standard of care provided and the approach and timekeeping of staff.

Relatives told us that any complaints or concerns were addressed effectively. The relative of the person who was currently receiving a service said that they felt able to raise any issues with the registered manager. Another relative said, "I would definitely get in touch. They did contact us to ask how satisfied we were with the service and if any changes were required."

The provider had a complaints procedure that was given to people and their relatives when they started using the service. We saw there was a review date to ensure relevant changes were taken into account. The procedure included recording the action taken to address the complaint and the outcome desired by the complainant. The registered manager told us that complaints were used for learning and to improve the support for people using the service. Staff knew how to support people to raise issues or make a complaint.



Is the service well-led?

Our findings

Relatives were very positive about the registered manager and staff that supported their family members. One relative we spoke with said, "The manager is very good." They told us they felt listened too and able to approach the registered manager and other staff about any concerns they may have. They said there was an open and transparent culture at the service. The service provided was person centred and met the needs of the people they supported.

It was clear from our discussions with staff that morale and motivation was high. We saw that staff were well supported via one to one supervisions. Regular spot checks of staff practice were undertaken by the registered manager that looked at how staff were working practically with people as well as monitoring their performance.

We heard from the registered manager that the service had access to a training centre and that all new staff would be expected to work towards a vocational qualification. They went on to say that they believed in investing in their staff to ensure a good quality service was being delivered.

The registered manager told us that due to currently only supporting one person, they had not yet implemented their feedback questionnaires that were intended to check and audit the work undertaken at the service. They had templates that could be used for auditing and checking purposes but at the time of inspection they were just checking care records during care plan reviews. However, we did see that they were in the process of implementing care plans in an accessible format, using pictures and symbols. This was to be used to improve accessibility for people with a learning disability in the care planning process.

We saw policies and procedures in place that covered all aspects of the work undertaken at the service and this provided good support and guidance to staff regarding processes and good practice related to their work.