

Dr Louise May Limited

Kare Plus Wirral

Inspection report

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Date of inspection visit:
06 November 2019
07 November 2019

Date of publication:
25 November 2019

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

About the service

Kare Plus Wirral is a domiciliary care agency based in Merseyside which provides personal care to adults in their own homes. At the time of the inspection the service supported 60 people.

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 receive personal care we also consider any wider social care provided.

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

People confirmed they received their medications on time. Staff knew how to report safeguarding concerns and staff were recruited safely. Everyone we spoke with told us they felt safe receiving care from Kare Plus Wirral. There were comprehensive risk assessments in place which were tailored to reflect each person's assessed need. Staff were on time for their calls, and there was travel time built into rotas.

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. People were supported to eat, and drink where needed, and staff were trained, supervised and appraised in line with the policy of the organisation.

People's diverse needs were catered for and staff treated people with kindness and dignity, and people confirmed they were involved in choices and decisions regarding their care and support. People told us staff were friendly and they enjoyed seeing them and interacting with them.

Care plans were person centred and reflected the needs of each person. Routines were discussed with people, and they had been involved in completing their care plans. Relatives confirmed communication from staff was good, and staff supported people to make healthcare appointments where needed. People had access to the provider's complaints policy. Staff were trained in end of life care.

There were audits and quality checks in place, complete with action plans, which had been improved since the last inspection. The registered manager had reported all concerns to CQC in line with guidance. Staff we spoke with said the culture of the organisation was friendly and relaxed. The provider sought feedback and used this to further develop and improve the service.

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 21 April 2017)

This was a planned inspection based on the previous rating. 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 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.

Kare Plus Wirral

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

The inspection was carried out by one inspector.

Service and service type

This service is a domiciliary care agency. It provides a service to older adults and younger disabled adults. The Care Quality Commission (CQC) only inspects the service being received by people provided with 'personal care'; help with tasks relating to personal hygiene and eating. Where they provide wider social care we also took this into account.

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 members of staff from the office often go out and provide personal care, so we needed to ensure someone would be in. Inspection activity started on 6 November 2019 and ended on 7 November 2019.

What we did before the inspection

Our planning took into account information the provider sent us since the last inspection. We also considered information about incidents the provider must notify us about, such as abuse; and we looked at issues raised in complaints and how the service responded to them. We had not requested a PIR. This is information we require providers to send us at least once annually to give some key information about the service, what the service does well and improvements they plan to make. We contacted and received feedback from the local authority. We used all this information to plan our inspection.

During the inspection, we spoke with seven people using the service or their family members about their experience of care on the telephone. We also spoke with the registered manager, the deputy manager, the registered provider, and four members of staff. We looked at three people's care records and a selection of other records including quality monitoring records, recruitment and training records for three staff.

Is the service safe?

Our findings

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

At the last inspection this key question was rated as good. At this inspection this rating had remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- Everyone we spoke with said they felt safe and secure receiving care from Kare Plus Wirral. One person said, "They [staff] never let me down." Someone else said, "They always get to me on time."
- There was a safeguarding adult's policy in place. Staff were aware of this policy and their roles within it.
- Staff were trained in safeguarding adults, staff explained the correct course of action they would take if they suspected abuse or harm had occurred.

Assessing risk, safety monitoring and management

- There were risk assessments in place which focused on how to minimise the risk of harm occurring while still promoting the persons independence. For example, we saw how one person had been encouraged to remain independent with regards to taking their medications, as this was important to them.
- Risk assessments were reviewed every month or when there was a change in a person's needs.
- In addition to risk assessments on people's health and well being, there had also been environmental risk assessments completed of people's property where staff carried out personal care.

Staffing and recruitment

- People we spoke with told us they saw the same staff and they came on time. One person said, "Sometimes things happen, but the office always call and let me know."
- Rotas were completed using an online rostering system. We at looked this system and spot checked some of the staff's rotas. Call times were adequately spaced with suitable travel time in between each call.
- Staff recruitment and selection processes remained safe.

Using medicines safely

- Where people were supported by staff with taking their medications, there had been a competency assessment completed with the staff.
- There was Medication Administration Records (MAR)s in place which staff had signed. These were audited by the registered manager to ensure people were receiving their medications safely.
- Where additional training was required, for example supporting someone to take their medications via the PEG (PEG stands for percutaneous endoscopic gastrostomy and is a surgical procedure which allows people to have food and fluids direct to their stomach) there were detailed descriptions of what staff must do to support the person. Additional training had been completed by a specialist in this.

Preventing and controlling infection

- Staff told us they had access to Personal Protective Equipment (PPE) such as gloves and aprons. People

told us staff always wore a tunic when they provided personal care.

- Staff were trained in infection control processes.

Learning lessons when things go wrong

- The registered manager regularly undertook an audit of incidents and accidents to check for any patterns or trends. We saw that some changes had been made to service provision, such as the implementation of a more robust Electronic Call Monitoring programme to ensure staff turned up on time to their calls.

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.

At the last inspection this key question was rated as good. At this inspection this key question has remained 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

- Before Kare Plus Wirral commenced support, people had been assessed by a member of the senior support team. This involved them meeting with the person or their relatives to gather information about the person and the support required.
- This information was used to complete each person's care plan and risk assessments.
- People's choices and preferences were clearly recorded in their care plans, including what time they wanted their call to take place, and any specific requirements regarding their daily routines.

Staff support: induction, training, skills and experience

- Staff were enrolled on induction once they started working for Kare Plus Wirral and they attended the registered office to completed all of their training.
- A training matrix recorded completion of training courses, and this was overseen by one of the managers to ensure staff were booked on refreshers before current training expired.
- People commented that staff were skilled, one person said, "They help me wash and they fill in the books, no reason to think they were unskilled."

Supporting people to eat and drink enough to maintain a balanced diet

- Where people required support with eating and drinking this was clearly documented in their care plans. One person told us, "They don't rush off, they always make sure I have eaten and have a nice cup of tea."
- One person required specialist support with eating and drinking and required this to be done via their PEG. Only staff who had undergone specific training were able to do this.

Staff working with other agencies to provide consistent, effective, timely care

- Where needed, staff liaised with GP's, district nurses and pharmacists to ensure people had what they needed. For example, one person described how the registered manager had made arrangements on behalf of someone and with their permission with the pharmacy to get someone's medications 'blister packed' to enable them to remain independent with the medications.
- People told us staff would stay longer with them if they were unwell and call the GP or their relatives.

Supporting people to live healthier lives, access healthcare services and support

- Within people's care plans there was contact numbers for the GP, dentists, and other medical professionals who were involved in their support.
- One person we spoke with told us how often the senior managers would move their call time around to

accommodate any appointments they had. They said, "The office staff are very good, they will always move things around if I have to be somewhere."

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.

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA.

When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty.

We checked whether the service was working within the principles of the MCA and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- There was no one subject to a DoLS via the Court of Protection.
- Peoples capacity had been assessed at the time their care package commenced, and this was subject to review every month.
- Some decisions had been made in people's best interest with the input of their relative if they had the legal authority to do so.

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.

At the last inspection this key question was rated as good. At this inspection this rating remained the same. 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

- People told us they were treated with kindness, respect and courtesy. Relatives told us their family members were supported by genuinely nice staff. Comments included, "Lovely bunch of staff." Also "They always make sure I am well taken care of." One relative said, "I am delighted with the interaction, as a family we feel very lucky."
- One person told us how the staff, who knew they liked the curtains and blinds closed in the evening, always went around their home and made sure this was done in every room. The said, "They know my little ways and how I like things."
- Care plans were written in a way which ensured people's diverse needs were catered for, such as what times they liked to eat their evening meal and what tasks they required verbal prompts with but could manage the majority of themselves.

Supporting people to express their views and be involved in making decisions about their care

- Staff always asked people's permission before providing personal care and touching anything in their homes. One person said, "They always leave my house exactly as they find it."
- One family member discussed with us how certain things were important to their relative, such as being out and about and having things in a particular order.

Respecting and promoting people's privacy, dignity and independence

- People told us staff always included them in conversations and never spoke about confidential matters in front of them. One person said, "It is like having friends around, we chat about various different things."
- People's care plans and personal information were stored securely in the registered office.
- Staff were only able to access security protected information about people on their phones, which were encrypted with passwords.
- People were only supported to complete tasks they were unable to do for themselves. Some care plans focused on reablement support. This is when people are supported people to re-gain their skills after a hospital admission with the expectation of not requiring a care package long term.

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs.

At the last inspection this key question was rated as good. At this inspection this key question has remained good. This meant people's needs were met through good organisation and delivery.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control

- People were in receipt of a personalised service. Staff described how each person's care package was outcome based depending on what level of support they needed.
- People's preferences for care, based on their choices was clearly documented in their care plans. People and their relatives were given choice over how their care was carried out. For example, we saw how one person had specified that they only wished to be supported by female members of staff, whilst others had no preference.
- There was detailed information about people's backgrounds and personalities which the staff added to as they got to know the person.
- The staff helped people make use of assistive technologies, such as alarms to remind them to take medication, this was to enable them to complete the task independently.
- Staff knew the people they supported well, including their dietary needs and preferences, activities they preferred, how best to approach people and how to support people if they became agitated or upset.

Improving care quality in response to complaints or concerns

- There had been no recorded complaints at the service.
- People were provided with information when their care package started regarding complaints and how to make a formal complaint.
- Everyone we spoke with said they had never felt the need to make a complaint but understood the process they needed to follow should the need arise.

End of life care and support

- Staff had undertaken end of life training.
- There was currently no one requiring end of life support.

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.

- There was some information available in different formats to help support people's understanding. For example, people could request their care plan was made available in easy read or large print.
- There was information recorded with regards to people's communication needs, and how staff were to support them. For example, one person wore hearing aids, and their care plan stated staff were to make sure

the person had their hearing aids in before staff communicated with them.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- People were supported to access the community and attend appointments and visit with their families.
- People also told us that staff called their families when needed to share important information with them with their permission.

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 has now 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.

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

- People we spoke with and the staff were complimentary about the registered manager and the service in general.
- Staff discussed a friendly and relaxed culture and said they felt valued and supported. Everyone we spoke with said they would recommend Kare Plus Wirral.

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 their role and what was expected of them.
- Any learning areas identified from questionnaires sent to staff and people who used the service were well documented and shared with people and staff.

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

- The registered manager and the provider had comprehensive audits and checks in place.
- Spot checks on staff practice and the support provided were undertaken regularly to ensure it was of a good standard.
- Actions were clearly documented and assigned to the appropriate person. For example, medication audits had highlighted a need to improve practices in line with current guidance. This has been actioned, and more robust information and checks were introduced.

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

- Team meetings took place regularly and staff were invited to contribute ideas and requests for additional training.
- People were invited to engage in face to face meetings at the registered office. We saw minutes of these, and of further meeting being arranged.

Continuous learning and improving care

- The registered provider had made improvements to their quality assurance process since their last inspection and had introduced a more structured approach with action plans which could be followed up.
- Some substantiated outcomes from safeguarding reports had been implemented into service provision to

ensure the same issues did not reoccur.

Working in partnership with others

- We received positive feedback about the service from another professional, one comment was "I always find the manager to be extremely professional and knowledgeable."
- The service worked closely with the care arrangers to take care packages at short notice to enable people to recover at home.