

Mrs. Deborah Clark

Total Care

Inspection report

12 Blakes Road
Wembdon
Bridgwater
Somerset
TA6 7RS

Tel: 01278424514

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Requires Improvement ●

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

This inspection was announced and took place on 16 and 17 March 2016. We gave the provider short notice of the inspection as we needed to make sure we were able to access records and gain permission from people who used the agency to visit or telephone them.

Total Care is registered for the regulated activity of personal care. It is a domiciliary care agency which provides care and support to people living in their own homes. At the time of the inspection there were 88 people receiving a service from the agency. This included people receiving packages of care at the end of their life.

The last inspection of the service was carried out in September 2014. No concerns were identified with the care being provided to people at that inspection.

The service is run by Mrs Deborah Clark as a sole provider. As a sole provider she is not required to employ a registered manager. Instead she has opted to manage the service herself. 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.

Some improvements were needed to make sure the recruitment process fully protected people. Staff files seen did not always give information about new staff's conduct in their previous employment which could possibly place people at risk of receiving care from staff who were not suitable to work with vulnerable people.

People felt the service was well run and efficient. Care staff were reliable and arrived at the correct time and stayed for the specified period. The provider told us they had high standards and expected high standards from the staff who worked for the agency. One person said "They have very high standards and are extremely caring. That comes from the top."

People praised the staff who supported them and office staff who were always available to answer their queries and respond to changes. People had built good relationships with staff and felt safe and comfortable with the care staff who provided their personal care. Comments about staff included; "The carers that visit me are all fantastic" and "They always ask if there is anything else you want. They go that extra mile and that means so much"

Staff respected people privacy and provided care in a manner which respected their dignity. One person told us "They are so kind and respectful, they just deal with whatever I need. There is never a fuss." Staff offered people choices about all aspects of their care. They had received training to assist them to support people who did not have the mental capacity to make a decision for themselves.

People received care and support in line with their needs and wishes because adequate numbers of staff

were employed. There were contingency plans in place if staff were unable to carry out their visits. Staff were well trained and had the skills and experience required to support people effectively. They monitored people's health and sought advice and support from healthcare professionals where appropriate. One person said "They know when you're not yourself. They've helped me get the doctor in the past."

People were fully involved in planning and reviewing their care. We were told the service was flexible to meet people's changing needs and wishes. Care plans gave information about people's likes and dislikes as well as their physical needs. This made sure staff knew how people liked to be supported and the things that were important to them. One person said "They follow my routine completely. They all know how I want things done."

People knew how to make a complaint and everyone asked said they would be comfortable to raise any issues with a senior member of staff or the provider. When concerns had been raised these had been effectively dealt with.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Requires Improvement ●

The service was not totally safe

Improvements were needed to ensure the agency followed their own recruitment practices and obtained references for new staff from previous employers.

There were sufficient numbers of staff to make sure people received a reliable safe service.

Where people required support with medicines, this was provided by staff who were competent in this area.

Is the service effective?

Good ●

The service was effective.

People received care from a staff team who had the skills and knowledge to meet their needs.

People were always asked for their consent before care was given.

Staff liaised with other professionals to make sure people's healthcare needs were met.

Is the service caring?

Good ●

The service was caring.

People received their care from staff who were kind and caring.

People's dignity and privacy were respected at all times.

People were fully involved in planning and reviewing their care to make sure the service met their needs and expectations.

Is the service responsive?

Good ●

The service was responsive.

People received care and support which was personal to them

and took account of their preferences.

The service was flexible and was able to adjust care to meet people's changing needs or wishes.

People felt comfortable to make a complaint and felt any concerns raised would be dealt with.

Is the service well-led?

Good ●

The service was well led.

People benefitted from a staff team who were well supported and happy in their role.

The provider and staff team were committed to ensuring people received a high quality service.

There were systems in place to monitor the quality of the service provided and plan on-going improvements.

Total Care

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.

This inspection took place on 16 and 17 March and was announced. It was carried out by an adult social care inspector.

Before the inspection, the provider completed a Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. We looked at the information in the PIR and also looked at other information we held about the service before the inspection visit. At our last inspection of the service in September 2014 we did not identify any concerns with the care provided to people.

Six people using the service and two relatives completed surveys before the inspection. During the inspection we spoke with four people using the service and two relatives. We spoke on the phone to a further three people and three relatives. We were able to meet with eight members of the care staff team and two office based staff. We also met with the provider of the service.

We looked at a number of records relating to individual care and the running of the agency. These included four staff recruitment records, three care plans and records of complaints and compliments.

Is the service safe?

Our findings

Improvements were needed to make sure people using the service were better protected by the agencies recruitment practices. The provider carried out Disclosure and Barring Service (DBS) checks before new staff commenced work. The DBS checks people's criminal record history and their suitability to work with vulnerable people. However in the recruitment files we looked at references had not always been obtained to enable the provider to know about staff's conduct in their previous employment. Three of the four files we looked at contained only one written reference and one file had no references. New staff were informed in writing that any appointment was subject to satisfactory checks and references and so the lack of references showed the agency was not always following their own policy to minimise risks to people. The provider informed us that new staff always worked alongside more experienced staff when they began work which mitigated this risk.

People told us they felt safe with the staff who supported them. One person told us "I feel safe and well cared for. It couldn't be better." Another person said "I have never felt scared or threatened with any of the carers. I could talk to them if I had any worries." A relative told us "I know [person's name] is totally safe with them."

Staff always made sure people's homes were secure when they left at the end of a visit. One person said "When they go last thing at night and I'm in bed I know everything is all locked up and safe."

To minimise the risks of abuse to people and make sure any concerns were fully investigated all staff received training in how to recognise and report abuse. Staff also received written information to assist them to report their concerns. This information was easy to read and contained contact details for appropriate agencies. Staff spoken with had a clear understanding of what may constitute abuse and how to report it. All were confident that any concerns reported would be fully investigated and action would be taken to make sure people were safe. One member of staff told us "I wouldn't hesitate to report anything and I know it would be dealt with in the right way." Where concerns had been raised with the provider they had worked with the appropriate authorities to make sure people were protected from the risks of further abuse.

All six people who completed a survey before the inspection said they agreed or strongly agreed with the statement 'I feel safe from abuse and or harm from my care and support workers.'

There were sufficient staff employed to ensure people received care according to their assessed needs. People told us staff were reliable and arrived at the correct time and stayed for the specified period. People said if staff were delayed they received a phone call to inform them. One person said "If for any reason they are going to be late, like being stuck in traffic, they always ring. You are never left wondering and they have never missed a call." People who required the assistance of two members of staff said they always received this. Staff told us they were never asked to carry out a visit on their own if the person had been assessed as requiring two staff.

Rotas were well organised and there was flexibility to ensure everyone received the care they needed, even in emergencies or when care staff were off work at short notice. Senior staff at the agency were available to provide cover at short notice. Staff told us they always knew who they would be supporting and knew the times and length of each visit. Everyone we spoke with said the agency had never missed a visit to them.

Care plans contained risks assessments which outlined measures which enabled care to be provided safely in people's homes. Risk assessments included the risks associated with people's homes and risks to the person using the service. The risk assessments included accessing the home, people's possible illness and behaviour and infection control. Risk assessments relating to assisting people with mobility recorded the number of staff required and the equipment needed to minimise risk. To protect people from the risks associated with unsafe moving and handling procedures all staff received regular training in safe moving and handling.

People who required support to administer medicines received support from staff who had received training in this area. The majority of people required only prompting and monitoring. Where staff administered medicines to people they recorded this on a medication administration record. Records seen were well completed meaning it was easy for other carers or visitors to see if the person had taken their medicines. Where there had been a change in someone's medicines this was clearly recorded so all staff were aware of the change.

Is the service effective?

Our findings

People received effective care and support from staff who had the skills and knowledge to meet their needs. People thought the staff were well trained and competent in their jobs. One relative said "All the carers are extremely professional and really know what they are doing. They certainly teach their staff how to care." A person using the service told us "I couldn't wish for a better team. I feel really well cared for."

Staff told us they always received the training they needed to meet people's needs. The provider maintained a staff training matrix which detailed training completed by staff and when refresher training was due. This helped to make sure staff knowledge and practice remained up to date. All staff had completed, or were working towards, the newly introduced nationally recognised care certificate as a way of up-dating their training. To gain the certificate staff must complete assessments of knowledge and be observed in practice.

Staff received training and supervision which ensured they were competent to carry out their roles. The provider told us in their Provider Information Return (PIR) that all staff had a personal development plan which set out their individual learning needs. . In addition to this they said all staff were due to complete training in caring for people living with dementia. Each member of staff had their practice regularly observed by a senior member of staff which enabled standards to be monitored and any training needs to be identified. Staff told us the training provided was of a good quality and gave them the skills and knowledge they required to effectively support people.

Staff had the skills required to effectively deal with emergency situations. On the second day of the inspection we met a group of staff who had just completed a first aid training session. Staff told us the training had given them confidence and all felt they would be able to respond to any emergency situation relating to someone they were providing care to. One relative had written to the agency to express their thanks for how a member of the care staff team had dealt with a specific incident. They wrote "[Staff name] was kind and competent in dealing with an unpleasant and delicate situation. [Staff name] really was absolutely outstanding."

Staff monitored people's health and ensured any concerns were passed on. They assisted people to make appointments with healthcare professionals where needed. On the first day of the inspection we heard how one member of staff had phoned a doctor when they had concerns about the person they had visited. One person said "They know when you're not yourself. They've helped me get the doctor in the past." Staff files showed that where staff worked with people who had particular healthcare needs they had received specific training to meet these needs. One relative told us "They have really made an effort to make sure the staff can care for them and all their healthcare issues."

Care plans showed that staff assisted people to minimise the risks of pressure damage. One person said a member of staff had supported them to get a specialist bed to reduce risks of pressure sores. Another person said "When they wash me they help me with creams to keep my skin good." Where pressure marks were seen on a person these were clearly recorded on body maps and healthcare professionals were informed.

The staff cooked meals for some people and encouraged people to eat. One person said "Most of them aren't bad cooks." Another person said "They make sure I have meals and always leave me with plenty to drink."

Most people who used the service were able to make decisions about what care or treatment they received. People were always asked for their consent before staff assisted them with any tasks. One person said "Everything is your choice. The girls always check you are ready to be helped."

The provider told us in their PIR that they completed comprehensive care plans with people which included their consent to care. Care plans we saw contained signed consent forms showing people had been consulted and consented to the care being provided.

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 make particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible. Staff had received training about the mental capacity act to make sure they knew how to support people who lacked capacity to make choices or give consent.

Is the service caring?

Our findings

Without exception the people and relatives we spoke with praised the staff for their kindness and caring attitude. Comments included; "The carers that visit me are all fantastic," "They always ask if there is anything else you want. They go that extra mile and that means so much" and "The girls who come from Total Care are all extremely caring and would do anything for you."

The service had received a large number of compliments and thank you letters from people who had used the service and their relatives. Compliments received by the agency echoed the comments received by us. One person wrote thanking the staff for their 'Compassion, kindness and dignity.' Another thanked them for their 'Kindness and patience.'

Many people also praised the staff who worked in the office saying how accommodating they were. One person told us "I feel I can ring any time and they are always helpful." Another person said "Although I've never met any of them I feel I know them and they know me."

Staff were aware of issues of confidentiality and did not speak about people in front of other people. When they discussed people's care needs with us they did so in a respectful and compassionate way.

The majority of people said they were supported by the same small group of staff who they had been able to build trusting relationships with. One person said "I am very comfortable with my main carers and can talk to them about anything." A relative said "Our regulars have become like friends." A small number of people said they received support from a large number of care staff but no one thought this was a problem. One person said "I see dozens of different ones but they are all different and all nice. I quite like the variety." When we visited people receiving a service we noted they were comfortable and relaxed with the staff who supported them.

People were always treated with respect and dignity when staff assisted them with personal care. One person who required assistance with all personal care told us the thing they valued most was that staff never made them feel embarrassed or self-conscious. They told us "They are so kind and respectful; they just deal with whatever I need. There is never a fuss." Another person said "They are all very respectful. Totally reassuring and never make you feel embarrassed."

Everyone who completed a survey before the inspection said they were always treated with respect and dignity, that staff were kind and caring and they were happy with their care and support.

The agency supported a number of people who were receiving care at the end of their lives. Staff received training to enable them to provide this level of care and support. Staff spoke passionately about the care they provided to people at this time and demonstrated a commitment to provide the best care they could to people and their families. One thank you card thanked the staff who had supported their relative and been present at the end of their life. They wrote "Thank you for the unstinting care during their last few weeks you helped to make a difficult time easier."

People were involved in all decisions about their care and support and had input into their care plan. Everyone we asked said the care plan had been written with them and they felt they continued to be in charge of the care they received. One person told us the agency went through the care plan with them regularly and made changes when they wanted things to be changed.

Is the service responsive?

Our findings

Each person had their needs assessed before they began to use the service. This was to make sure the agency was appropriate to meet the person's needs and expectations. The provider told us they would not offer to provide a service unless they were sure they could meet the person's needs. This included having sufficient numbers of staff to undertake regular calls at the time the person required the care. People told us a senior member of staff had visited them when they began to use the service to make sure they were fully involved in planning their care package.

From the initial assessment a care plan was drawn up to give staff information about the person and what they wanted assistance with at each visit. People told us staff always read the care plan before they provided care. One person said "They always read the folder when they arrive." Staff said the care plans gave them the information they needed to provide a very personalised service which met people's needs. One member of staff told us "The care plans give you the information you need and they always show if anything has changed."

People received care that was responsive to their needs and personalised to their wishes and preferences. Care plans gave information about people's likes and dislikes as well as their physical needs. This made sure staff knew how people liked to be supported and the things that were important to them. One person said "They follow my routine completely. They all know how I want things done." A relative told us "They have got to know them really well and just fit into our routines and little ways."

People felt fully involved in all decisions about their care including making choices about the staff who supported them. One person told us "It was a bit hit and miss when I started to use them but I talked to [provider's name] and we sorted out a small group that suited me well." Senior staff had an excellent knowledge of the people the agency supported and were able to match care staff to people using the service. People spoke fondly of the staff who supported them. One person said "They couldn't have found anyone better to help us. The main ones are definitely our type of people."

People said staff enabled them to maintain their independence and they continued to make decisions about all aspects of their care. One person said "They treat me like a person, I can have a laugh with them and I still make my own decisions." Another person said "If it wasn't for them I would not be able to live at home. I have nothing but positive comments about how they have helped us to stay at home together."

The staff responded to changes in people's needs. People told us the service was flexible and they always felt comfortable to discuss any changes they wished to make to their care package. One person said "They know me so well often they have sorted things out before I have even asked." Another person said "They are flexible to our needs and adapt to any change in the situation."

The agency had a complaints policy and each person received a copy of this when they began to use the service. Everyone who completed a survey before the inspection said they knew how to make a complaint. People we spoke with said they would not hesitate to make a complaint if they were unhappy with any

aspect of their care. One person told us "I would definitely make a complaint if I needed to. When I have raised issues they have been really nicely dealt with so I feel I could do so again if needed." A relative said "I did complain and it was put right immediately. The situation was dealt with brilliantly and gave me real confidence in the organisation."

Is the service well-led?

Our findings

People felt the agency was well run and efficient. We were told staff were good timekeepers and people thought it was a very reliable service. The provider told us they had high standards and expected high standards from the staff who worked for the agency. One person said "They have very high standards and are extremely caring. That comes from the top." Another person said "[Provider's name] is always on the ball. She recruits good staff and seems to look after them so they give their best."

There was a management team who all had specific responsibilities for ensuring the smooth running of the service. This made sure people received the care they needed at the appropriate times. There were systems in place to cope with difficult situations such as bad weather and staff sickness. This meant people always received a service. One person said "I have had care from other agencies and there were times when they didn't arrive but that has never happened since I've used Total Care." Another person told us "I just can't imagine them missing my visit. The boss would arrive to do it if they needed to. I just don't think they would let you down."

Staff were well supported by the agency which lead to a confident and happy workforce. Staff were provided with the information they required and equipment such as torches and attack alarms to keep them as safe as possible. There were incentive schemes to encourage good practice which included a 'carer of the month' award. A number of people commented on how cheerful staff were. One person said "They are always happy when they arrive which makes you feel happy too." Another person said "Whoever arrives it's like a breath of fresh air blowing in. It makes my day."

In addition to the care staff there were senior carers who had responsibility for supervising and supporting the staff team. Senior staff had an excellent knowledge of the people who used the service and people spoke very highly of them. One person said "If I had any worries I would speak to [senior carer's name] they know me well." Another person said "One of the seniors came out to see me about something. They could not have been more accommodating and boy do they know their stuff."

There was an on-call rota which meant someone was always available to deal with concerns and offer advice to staff. Staff told us they could seek advice from more senior staff at any time. One member of staff said "If you need help there is always someone at the end of the phone."

There were systems in place to make sure high standards of care were delivered. All staff received supervision and there were regular spot checks on staff working in people's homes. Supervisions and spot checks were an opportunity for staff to spend time with a senior member of staff to discuss their work and highlight any training or development needs. They were also a chance for any poor practice or concerns to be addressed. One person said "The team leaders are brilliant and they check the staff and the standard of care. You never know when they are dropping in."

There were regular meetings for staff to share information and discuss working practices. Minutes of meetings showed staff were kept up to date with any changes in good practice guidelines or legislation. This

made sure staff were practicing in line with up to date directives. Staff said if they had any issues or concerns they could raise them at meetings. One member of staff said "You can always say things at meetings they are always happy to hear suggestions." Another member of staff said "They always tell you about any thank you's that have been received which makes you feel good."

The agency had a variety of up to date policies and procedures which ensured all staff were kept informed of the agencies expectations and legal requirements. Policies were well written and informative; where appropriate they gave contact details to enable staff to seek further advice.

There were quality assurance systems to monitor care and plan ongoing improvements. There were audits and checks in place to monitor safety and quality of care. Where shortfalls in the service had been identified action had been taken to improve practice. The agency looked at ways to continually up date and improve the service offered. Plans for the future included introducing a new computer system which would be linked to care staff's mobile phones so all visits to be tracked. There were also plans to employ another senior member of staff which would reduce the number of care staff each senior supervised. It would also increase the flexibility of the service as there would be another experienced carer to step in when care staff were absent at short notice.

The provider had notified the Care Quality Commission of all significant events which have occurred in line with their legal responsibilities.