

ICare Solutions Manchester Limited

iCare Solutions Manchester Limited

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

iCare Solutions Manchester is a domiciliary care service which provides personal care to people in their own houses and flats. At the time of this inspection the service was supporting approximately 40 people. Not everyone who used the service received personal care. The Care Quality Commission (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.

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

People received care and support from a dedicated, caring and committed team of staff. Staff always sought to ensure people were treated in a dignified and respectful way. Staff understood how to protect people from poor care and abuse and worked well with other agencies to do so. There were enough appropriately trained and skilled staff to meet people's needs and to keep them safe.

The service benefited from a diverse workforce who were representative of the community it served. The needs of people from different backgrounds were identified, acknowledged, and acted upon.

Systems for audit, quality assurance and questioning of practice had been embedded into everyday practice with clear lines of accountability now established. The provider fully understood the importance of maintaining systems and processes which support good governance.

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.

People and those important to them were involved in planning their care. Staff evaluated the quality of care provided involving the person, their families, and other professionals as appropriate.

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 Requires Improvement (published 24 January 2022).

Why we inspected

At the last inspection, breaches of legal requirements were found. The provider completed an action plan after the last inspection to show what they would do and by when to improve safe care and treatment and good governance.

We undertook this focused inspection to check they had followed their action plan and to confirm they now met legal requirements. This report only covers our findings in relation to the Key Questions of Safe and

Well-led which contain those requirements.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating. The overall rating for the service has changed from requires improvement to good. This is based on the findings at this inspection.

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.

iCare Solutions Manchester Limited

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 Health and Social Care Act 2008.

Inspection team

This inspection was carried out by an inspector and an Expert by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

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

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 CQC 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.

Notice of inspection

We gave the service 48 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the provider or registered manager would be in the office to support the inspection.

Inspection activity started on 05 May 2023 and ended on 12 June 2023. We visited the location's office on Wednesday 10 May 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. The provider was not asked to complete a Provider Information Return (PIR) prior to this inspection. A PIR is information providers send us to give some key information about the service, what the service does well and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with 7 people about their experience of using the service. We also spoke with the registered manager, administration staff, care workers and the nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

We reviewed care records and documentation related to safety, audit and quality assurance.

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 requires improvement. At this inspection the rating has changed to good. This meant people were safe and protected from avoidable harm.

At our last inspection the provider had failed to ensure consistent safe recruitment practices were followed. This placed people at a risk of harm and was a breach of Regulation 12(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of Regulation 12

Staffing and recruitment

- Pre-employment checks had been carried out to ensure the suitability of prospective new employees, this included with the Disclosure and Barring Service (DBS). DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.
- There were enough staff to safely meet people's needs. Staff told us they had enough time between calls and didn't feel overly rushed. Comments from staff included, "Yes there is enough time in the clients homes. If I feel their needs have changed and they now require longer to support them, I just raise this and its sorted out immediately." Comments from people who used the service included, "They [staff] have built good relationships with my [Person]. They understand [Person] and what [Person] needs to be done. They are happy, laugh and smile a lot with [Person]." and, "I've had some shocking carers in the past, but on the whole now they're OK, and I have get on well with them."
- An Electronic Call Monitoring (ECM) system was in place which provided real time monitoring of care calls and for regular performance reports to be run. Whilst some low-level issues were identified, we found the registered manager and provider now had better oversight of how staff interacted with the system and the potential impact on service delivery.

Assessing risk, safety monitoring and management; learning lessons when things go wrong

- An assessment of need was completed before a person started to use the service. This helped to ensure known risks were identified early and appropriate management plans could be put in place.
- New and emerging risks were identified and acted upon in a timely manner. This was evidenced through effective joined up working between the service and external agencies.
- Untoward events were investigated, and remedial action taken to reduce the likelihood of reoccurrence. Information related to lessons learned was shared internally with staff, and with other relevant agencies.

Systems and processes to safeguard people from the risk of abuse

- A robust framework was in place which sought to protect people from the risk of abuse.
- Staff knew how to recognise and respond to potential signs of abuse and were aware of local safeguarding

procedures.

Using medicines safely

- Staff were trained to support people with medicines administration where this was part of an assessed care need.
- People received their medicines as prescribed and protocols were in place to guide staff about how to safely administer them.
- Staff reviewed each person's medicines regularly to monitor the effects on their health and wellbeing and provided advice to people and carers about their medicines.

Preventing and controlling infection

- Personal protective equipment such as disposable gloves and aprons were readily available at the point of care. Staff had completed infection control training. This was supported by appropriate policies and procedures.

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 we rated this key question inadequate. At this inspection the rating has 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.

At the last inspection the provider failed to ensure systems and processes to support good governance were operated effectively. This was a breach of Regulation 17 (Good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of Regulation 17

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

- Systems for audit, quality assurance and questioning of practice had improved and embedded into everyday practice, with clear lines of accountability.
- Credible data was now gathered from internal audit and quality assurance which meant themes and trends could be identified. This shift to a proactive rather than reactive approach, helped managers and staff to identify potential risks sooner and act to take remedial action.
- We spoke at length with the registered manager and nominated individual about previous regulatory failings and the improvements that had now been made. We spoke about the importance of maintaining momentum and not compromising on quality and safety going forwards. The leadership team understood the importance of maintaining good governance and high-level assurances were given this would remain an ongoing high priority.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- The registered manager had worked hard to embed a positive culture in which people felt valued and their individual contributions recognised. Comments from staff included, "I have worked for iCare for [period] and have thoroughly enjoyed every minute. The care workers and office are all amazing and I can honestly say we all get on as a great team" and "There is always an open-door policy and managers are contactable if I ever need them" and "I'm happy in my job and helping out in the community."
- High value was placed on tackling inequalities, and the promotion of diversity and inclusion. The service benefited from a diverse workforce which was representative of the community it served. The needs of people from different backgrounds were identified, acknowledged, and acted upon. For example, we saw several examples of good practice centred around meeting people's cultural and religious needs.
- The majority of people we spoke with told us they had been involved in decisions about their individual

care package. Comments included, "I am fully involved – I think it's all about building good relationships" and "I needed to be reassessed as they [staff] were spending more time with me than allocated. I phoned the new coordinator, and they arranged it" and "I've not been asked as often as I think they should do."

- People told us they had completed surveys about how the service was managed. However, several people told us they had not received any feedback. Comments included, "We filled their form in around a month ago but no feedback as yet" and "Every year I fill it in and send it back, but I haven't seen any feedback this year yet."
- At the time of this inspection the registered manager was collating responses from the recent surveys completed with people and staff. We were assured that once these had been analysed, the findings and actions would be shared with 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 fully understood their legal responsibilities around duty of candour. A framework was in place which sought to ensure investigations into accidents, incidents and untoward events were completed in a timely manner and findings shared with relevant people.

Working in partnership with others

- The registered manager and wider staff team continually sought to develop and improve partnership working. The service was frequently called upon by the wider health and social care system to facilitate safe and timely packages of care.