

Care Outcomes UK Limited

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Inspection report

The Quadrus Centre
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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

Care Outcomes UK Ltd is a domiciliary care provider registered to provide personal care to people in their own homes. At the time of the inspection 16 people were using the service, with 10 people being supported with personal care.

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.

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

Staff were safely recruited and received an induction followed by training from the provider. Training was monitored and staff were supported with regular meetings and supervisions. Staffing capacity was enough to meet people's needs.

People and their relatives were very positive about the care provided. People told us they felt safe, and staff had the skills to support them. Relatives provided positive examples of how staff had helped improve people's lives since receiving support from the service.

The registered manager had an effective quality assurance system in place. Regular audits and checks were done. These were used to identify relevant action and lessons learnt. People, relatives, staff and professionals were offered opportunities to provide feedback.

The service was following safe infection prevention and control procedures to keep people safe

Medicines were managed safely. Risks to people were assessed and action taken to reduce the chances of them occurring. The registered manager acted on feedback immediately. People were safeguarded from abuse.

The registered manager exhibited very strong leadership skills and excelled within the organisation to achieve consistently high standards. The service had continued to develop and improve.

People received a tailor-made service from an exceptionally well-led team of staff. The registered manager and staff were extremely passionate and committed to providing high-quality, person-centred care.

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.

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 (published 7 November 2017).

Why we inspected

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

We found no evidence during this inspection that people were at risk of harm from this concern. Please see the safe and well led sections of this full report.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Care Outcomes UK Ltd on our website at www.cqc.org.uk.

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.

Care Outcomes UK Ltd

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

1 inspector carried out this inspection.

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 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.

Notice of inspection

This inspection was unannounced.

What we did before the inspection

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 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 to the registered manager, 2 branch staff, 4 care staff and 2 relatives. We reviewed a range of records. This included 4 people's complete care records and medication records for 4 people. We looked at 4 staff files in relation to recruitment and staff supervision as well as staff feedback forms. A variety of records relating to the management of the service, including policies and procedures were also reviewed.

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. 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

- People were protected from the risk of abuse. Policies and procedures were in place for staff to follow.
- Staff had received training on identifying and reporting abuse and knew what action to take if they identified abuse. One staff member said, "I have no concerns whatsoever for the safety of the people who use the service; I feel very confident in raising concerns or issues."
- People told us they felt safe when receiving their care. One relative told us, "The staff are very careful with [person], I trust staff to keep them safe."

Assessing risk, safety monitoring and management

- People were kept safe as risks to them and within their environment were assessed regularly and mitigated. One staff member told us, "All clients have risk assessments, regular reviews and an outstanding bond with staff which enables clients to share any problems or worries and ensures that everyone is safe at all times."
- Risks associated with the safety of the environment and equipment were identified and managed appropriately. Regular health and safety checks were undertaken by staff responsible for the maintenance and safety of the premises. Equipment in use such as hoists were regularly checked and maintained. This ensured that people were supported to use equipment that was safe.

Staffing and recruitment

- Staff were recruited safely and there was enough staff to safely support people.
- New staff had appropriate pre-employment checks in place which included requesting references and a Disclosure and Barring Service (DBS) check before they were employed. DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.
- Staffing levels were regularly reviewed against people's support needs.

Using medicines safely

- Medicines were managed safely. The manager carried out regular checks on people's medicines to make sure they were being administered in line with national best practice, the provider's policy and prescribing instructions.
- Staff had received training in administering medicines and had their competencies assessed regularly, we were assured staff were competent in all aspects of medicine management.

Preventing and controlling infection

- IPC policies and procedures had been updated to reflect changes in relation to government guidance linked to the COVID-19 pandemic. In addition, they showed detailed information to guide staff in the actions to take to ensure they followed safe practices to prevent the spread of infections.
- There were sufficient supplies of PPE and staff had received training in how to use this.

Learning lessons when things go wrong

- Lessons were learned from incidents and learning was shared with the staff team to prevent similar incidents occurring.
- Accidents and incidents were fully investigated and outcomes from these were used to improve the care provided.

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. The rating for this key question 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

- There was a positive staff culture which helped to achieve good outcomes for people. One staff member said, "I have worked for Care Outcomes for years and I honestly could not suggest any improvements. I love working for this company, it is an outstanding company and management are the most supportive people."
- The manager communicated with people, relatives, and staff. Relatives told us the management team were approachable. One relative commented, "I've always been kept up to date with [person's] progress, they tell us everything we need to know."
- Staff were empowered to improve the care they provided. The provider introduced the 'Rainbow Award' where staff and clients can nominate one staff member a month who has made a positive impact on a clients care package.

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 service had a duty of candour policy, and the provider understood their responsibility to be open and honest if something went wrong.
- Results from investigations, feedback sessions and audits were used to improve the quality of the service.

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

- The manager was fully aware of their legal responsibilities and was open and transparent. They submitted notifications to the commission for significant events that had occurred at the service, for example accidents and incidents.
- The manager undertook a range of audits to assess care quality and safety such as supervisions, care plans, environmental risk assessments, rostering and welfare checks on a monthly basis.
- Staff feedback was overwhelmingly positive regarding confidence in the management team. They told us, "I feel very supported in my role. Management is second to none and the support from the whole office team is exceptional." And "I feel fully supported in my role. The office staff have helped me through many personal and professional circumstances."

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

- The provider held team meetings with staff where their views were heard, these included meetings for care

staff, senior staff and management. One staff member said, "The office staff go out of their way to ensure everyone is happy in their roles and hold regular staff meetings to ensure staff satisfaction."

- A clients satisfaction survey had been completed in 2022. Feedback was positive and we saw the provider had taken on feedback and suggestions made as part of the survey.

Working in partnership with others and continuous learning and improving care

- Staff worked in partnership with people, relatives and other healthcare professionals.

- Care records showed involvement from other agencies and staff had used the advice/guidance provided to help with people's care planning.

- The service had a quality assurance system which was used to identify positive practice as well as areas for improvement.

- Innovation was shared across the organisation. Staff meetings were set up to share best practice and positive stories of how people had achieved their goals.

- The provider introduced the 'Purple Bag Scheme', this has facilitated a smoother handover between the service and ambulance/ hospital staff where hospital transfers are required. When a client becomes unwell and requires hospital care, a dedicated bag which includes medical and health information relating to the client as well as personal belongings and toiletries are given to ambulance staff. This has made a positive impact and has reduced the number of phone calls and follow-ups made by hospital as well as ensuring the client is as comfortable as possible.