

Snowball Care UK Ltd

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Inspection report

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Ratings

Overall rating for this service

Requires Improvement ●

Is the service safe?

Requires Improvement ●

Is the service effective?

Requires Improvement ●

Is the service well-led?

Requires Improvement ●

Summary of findings

Overall summary

About the service

Snowball Care is a domiciliary care service providing personal care to 77 older people and some younger people with physical health needs at the time of the inspection.

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

The provider had appropriate systems in place to identify and mitigate risks to people's health and safety. There were clear systems in place to identify, report and investigate allegations of abuse. There were enough suitably qualified and appropriately vetted staff to work with people. The provider supported people with their medicines safely. There were appropriate infection control measures in place and care staff had enough Personal Protective Equipment (PPE) to do their jobs. There were clear systems in place to deal with accidents and incidents.

The provider worked in line with current legislation, for example the Mental Capacity Act 2005 and staff were given the support they needed to do their roles. People were supported to meet their health and nutrition needs.

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 their relatives gave good feedback about the service. The registered manager and other members of staff understood their responsibilities. The quality of care was appropriately monitored through effective quality assurance systems and people were asked for their views about the running of 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 requires improvement (published 21 November 2019).

Why we inspected

We carried out an announced comprehensive inspection of this service on 16 and 17 September 2019. 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 meet the regulations in relation to safe care and treatment, the governance of the service, person-centred care, the need to consent the employment of fit and proper persons and staffing.

We undertook this focused inspection to check the provider had followed their action plan and to confirm they now met legal requirements. This report only covers our findings in relation to the Safe, Effective and Well-led key questions which were previously rated requires improvement

The ratings from the previous comprehensive inspection for those key questions not looked at on this occasion were used in calculating the overall rating at this inspection. Although the provider has taken appropriate action in relation to the breaches of regulation previously found, we were unable to change the rating as we have not seen consistently improved practice over a sufficient period of time.

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

Follow up

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?

The service was not always safe.

Details are in our safe findings below.

Requires Improvement ●

Is the service effective?

The service was not always effective.

Details are in our effective findings below.

Requires Improvement ●

Is the service well-led?

The service was not always well- led.

Details are in our well- led findings below.

Requires Improvement ●

Snowball Care 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 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 personal care to people living in their own houses and flats and specialist housing.

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 we needed to be sure that the provider or registered manager would be in the office to support the inspection.

What we did before the inspection

We reviewed information we had received about the service since the last inspection as well as the last inspection report. We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all of this information to plan our inspection.

During the inspection

We spoke with four members of staff who were the registered manager, the office manager, the supervisor and the monitoring and coordinating officer. We also spoke with eight people on the telephone and two of

their relatives.

We reviewed a range of records. This included seven people's care records and seven staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including surveys, monitoring and complaints records were also reviewed.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at training data, policies and procedures and quality assurance records. We spoke with seven care workers and also liaised with one professional from the local authority who commission care from this service.

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 requires improvement. At this inspection this key question has remained the same. This meant some aspects of the service were not always safe and there was limited assurance about safety. There was an increased risk that people could be harmed. We were unable to change the rating because although appropriate action had been taken to address previous issues, this has not yet been sustained over a sufficient period of time.

Assessing risk, safety monitoring and management

At our last inspection the provider had failed to fully assess and mitigate risks to people's health and safety. This was a breach of regulation 12 (Safe Care and Treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. At this inspection we found the provider was now meeting this regulation.

- The provider was assessing and appropriately managing risks to people's health and safety. Each person using the service had received a comprehensive review of risks relating to their health and safety and these were fully recorded within detailed risk assessment documents. For example, people at risk of pressure sores had assessments in place which stated why they were at risk, whether there were any current issues with their skin and if they needed to be turned in bed or required the application of a prescribed cream.
- Where people used equipment, we found details of the equipment were within their record. This included details of the support they needed with their moving and handling needs as well as a record of when their equipment had last been checked to ensure it was safe to use. The safety of people's home environments was also checked. The records we reviewed did not indicate any concerns, but the registered manager told us she would discuss any issues with people individually to find an appropriate resolution where needed.
- Care workers demonstrated a good level of understanding about the risks relating to the people they cared for. They gave us examples of the types of risks to people as well as actions they would take to minimise these.

Staffing and recruitment

At our last inspection the provider had failed to ensure appropriate recruitment checks were conducted before staff began working with people. This was a breach of regulation 19 (Fit and proper persons employed) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. At this inspection we found the provider was now meeting this regulation.

- The provider was conducting appropriate pre-employment checks into candidate's suitability for employment. This included a full employment history, their right to work in the UK, two references and a criminal record check. For staff who were already employed and working with people, we saw records to demonstrate spot checks of their performance had been conducted, they had received supervision sessions

and people had been asked for their feedback. The registered manager confirmed she was therefore satisfied with the suitability of all staff working for the service.

- The provider ensured there were enough staff scheduled to work with people. A comprehensive assessment was conducted of people's level of need and the number of staff required to support them was consequently determined. Where people required two care workers, we found this was provided. Where there were concerns about the length of visits we found discussions were conducted with the commissioning authority to resolve the concerns.

Using medicines safely

At our last inspection the provider had failed to take appropriate action to ensure people's medicines were administered safely. This was because the provider did not have a clear written record about the frequency or time at which people were supposed to be taking their medicines. This was a breach of regulation 12 (Safe Care and Treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. At this inspection we found the provider was now meeting this regulation.

- The provider was now managing people's medicines safely. At this inspection we found full details were recorded about the medicines people were supposed to be taking as well as the frequency and timing of administration. When people were administered their medicines, care workers filled in Medicines Administration Record Charts (MARs) which indicated which medicine had been given and when we reviewed a sample of MAR charts and found they were fully completed and clear.
- At our previous inspection we found people were administered PRN or 'as required' medicines, without there being clear protocols in place which contained guidelines for care workers in how to safely administer these. At this inspection we found the provider was not supporting anyone with PRN medicines, but they were aware of the need to have clear protocols in place if they did.
- The provider had a clear medicines policy and procedure in place. When we spoke with care workers they were aware of this document and correctly gave details about how they were required to safely administer medicines to people.

Learning lessons when things go wrong

At our last inspection the provider had failed to ensure they learned lessons when things went wrong. This was because the provider was not always recording accidents and incidents that had taken place and therefore could not demonstrate that lessons were always being learned. This was a breach of regulation 12 (Safe Care and Treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. At this inspection we found the provider was now meeting this regulation.

- The provider had systems and processes in place to learn lessons when things went wrong. At this inspection we found the provider was always recording accidents or incidents that occurred and was fully recording the details of these. We found two incidents had occurred since the last inspection. We saw a clear record was made of what had happened as well as the immediate action that had taken place. For the two incidents that had occurred, there were no specific ongoing actions required, but the registered manager confirmed she had reviewed these and considered whether any ongoing action was needed or lessons had been learned.
- The registered manager told us and care workers confirmed that they were made aware of any incidents and they had considered these in the ongoing performance of their duties. One care worker told us "The manager tells us about things that have happened and what we need to be careful of."

Systems and processes to safeguard people from the risk of abuse

- At our previous inspection, the registered manager was not aware of her responsibility to ensure allegations of abuse were reported to the CQC. At this inspection, the registered manager was aware of her duty and confirmed that she would ensure any concerns were promptly reported. There had been no safeguarding incidents since our last inspection.
- People confirmed they felt safe using the service. Their comments included "They understand my needs and I feel safe with them" and "I have very high needs and need to be able to trust my carers. I have a good working team and [the registered manager] helps me to manage that."
- Care workers had received training in safeguarding adults from abuse and explained the signs of abuse to look out for as well as how they were supposed to act if they suspected someone was being abused or was at risk of abuse. The provider had a clear safeguarding policy and procedure in place and care workers were aware of this.

Preventing and controlling infection

- The provider took appropriate action to prevent the risk of infection. Clear consideration had been given to the ongoing risk of COVID-19 and the provider had taken precautionary measures in relation to this. The registered manager was aware of recent infection control guidance, particularly in relation to Personal Protective Equipment (PPE) and ensured staff had the PPE they needed.
- When we spoke with care workers, they demonstrated a good level of understanding about the risks of infection, particularly COVID-19 and gave us examples of how they managed these risks. One care worker told us "I don't know about other carers, but I've got gloves, face masks- I've got everything I need. They called me and gave me everything." Another care worker explained they had taken the decision to take time off as a precautionary measure in line with current guidance. They told us "I've been off work for a while, but the manager has been really understanding and supportive about it. They said to take all the time I needed."

We could not improve the rating for the safe key question from requires improvement because to do so requires consistent good practice over time. We will check this during our next planned comprehensive inspection.

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 requires improvement. At this inspection this key question has remained the same. This meant the effectiveness of people's care, treatment and support did not always achieve good outcomes or was inconsistent. We were unable to change the rating because although appropriate action had been taken to address previous issues, this has not yet been sustained over a sufficient period of time.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

At our last inspection the provider had failed to fully assess people's needs and choices as they were not conducting a comprehensive assessment of people's needs before they started using the service. This was a breach of regulation 12 (Safe Care and Treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. At this inspection we found the provider was now meeting this regulation.

- The provider was appropriately assessing and meeting people's needs and choices. We found the provider had fully reassessed the needs of every person using the service and had completed a new, comprehensive plan of care for each person since our previous inspection. These care plans covered the full range of people's needs which included their physical, mental and social needs.
- The provider was delivering care in line with standards and the law. This included compliance with the Mental Capacity Act 2005 and safeguarding guidelines. Care workers were receiving up to date training in mandatory subjects and there were up to date policies and procedures to guide them in their work.

Staff support: induction, training, skills and experience

At our last inspection the provider had not ensured they were monitoring the support they were providing to care workers, so we could not be assured they were receiving the support they needed. This was a breach of regulation 18 (Staffing) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. At this inspection we found the provider was now meeting this regulation.

- The provider was giving the staff the support they needed to perform their roles effectively. At this inspection we found all staff members had received recent training in all subjects considered mandatory by the provider and certificates were in place to demonstrate this. The provider was now recording the dates care workers had completed all training and were monitoring the next dates they were required to complete training.
- Care workers were receiving quarterly supervision sessions. Clear records were kept of the discussions taking place and the provider was keeping a spreadsheet of the dates of completion of these sessions as well as the next date of a supervision session.
- Care workers received a comprehensive induction when they joined the service in 12 different subjects.

Care workers told us they found the induction useful to their roles.

Supporting people to live healthier lives, access healthcare services and support ; Staff working with other agencies to provide consistent, effective, timely care

At our last inspection the provider had failed to ensure appropriate measures had been taken to ensure people received the support they needed with their healthcare needs. This was because people's care records did not contain enough information about their health conditions or how they impacted on their care needs. This was a breach of regulation 9 (Person- centred care) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. At this inspection we found the provider was now meeting this regulation.

- The provider effectively supported people with their healthcare needs. People had comprehensive care plans in place which detailed people's medical histories, their current conditions as well as how they impacted their daily living and care needs. This included information about behaviours that could challenge others. We saw there was clear information about triggers to these as well as advice for how care workers should respond.
- Care workers understood people's needs well. They confirmed they had read the new care plans and demonstrated a good level of understanding about people's conditions as well as how they effected their care needs. For example, one care worker provided us with detailed information about one person's condition, how they effected their physical health and the areas in which they consequently required further support.
- The provider worked with other agencies to provide consistent and timely care. Where professional input was required to meet people's needs, we saw records to demonstrate this had been sought and advice was incorporated into people's care plans. For example, we saw appropriate advice had been sought from a speech and language therapist in relation to one person and their needs had been clearly recorded on their care plan. The provider had been working closely with one local authority who commented positively on their working relationship.

Ensuring consent to care and treatment in line with law and guidance

At our last inspection the provider had failed to ensure they took appropriate action to obtain people's valid consent. This was because the provider was not aware that it was their responsibility to ensure mental capacity assessments were conducted in relation to significant decisions in relation to their care needs and there were two people using the service who the provider thought was either lacking in capacity or had fluctuating capacity. This was a breach of regulation 11 (Consent) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. At this inspection we found the provider was now meeting this regulation.

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 ensured people's care was delivered in line with their valid consent. We found the provider was aware of who had fluctuating capacity. Each person using the service either had capacity to make decisions in relation to their care or they had legally authorised representatives who made decisions on their behalf. Each person or their representative had signed contracts in relation to their care.

- Care workers demonstrated a good level of understanding about the importance of obtaining people's consent before they conducted any care tasks. One care worker told us "I always ask if its ok for me to do things" and another care worker said "I always get permission before I do anything."

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

- People received a good level of support with their nutritional needs. Where people had specific nutritional needs we found their care plans contained detailed information about the support they needed and the provider had sought guidance from professionals such as speech and language therapists who were involved in their care. People's care records also contained information about their likes and dislikes in relation to food and were clear about care workers responsibilities.
- Care workers understood their duties in relation to people and explained their responsibilities. The registered manager confirmed that care workers were only required to prepare simple breakfasts and snacks and to heat food that had already been prepared for them.

We could not improve the rating for the effective key question from requires improvement because to do so requires consistent good practice over time. We will check this during our next planned comprehensive inspection.

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 remained the same. This meant the service management and leadership was inconsistent. Leaders and the culture they created did not always support the delivery of high-quality, person-centred care. We were unable to change the rating because although appropriate action had been taken to address previous issues, this has not yet been sustained over a sufficient period of time.

Continuous learning and improving care

At our last inspection the provider had failed to effectively monitor and improve the quality of the service. This was because the provider was not effectively auditing areas of the service including risk assessments, care plans and medicines administration so areas for improvement were identified and addressed. This was a breach of regulation 17 (Good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. At this inspection we found the provider was now meeting this regulation.

- The provider had appropriate quality assurance systems in place, which had been reviewed and fully implemented. People's needs had been fully reassessed, new risk assessments and care plans had been put in place and systems were in place for ongoing checks of records. MAR charts and contemporaneous notes of care were being reviewed by the registered manager on a monthly basis and the provider was conducting and reviewing the results of monthly monitoring visits.
- The provider was effectively monitoring staff competence. We found staff training and supervisions were being conducted in a timely manner and the timing of these was recorded and monitored.

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

- The provider achieved good outcomes for people. People, their relatives and staff gave good feedback about the service. A relative told us "I'm around all the time and they're very good. They provide a good service" and another person told us "The ladies are very good. They are very understanding and I like them very much."
- Staff confirmed there was a positive culture within the service. Care staff gave good feedback about senior member of the organisation including the registered manager. Their comments included "The manager is a lovely lady and the rest of the staff are very nice. They keep me up to date and are very good to me", "They are giving me what I need. They're keeping me informed with everything that's going on- I'm very satisfied" and another care worker told us the registered manager "is working flat out- she's always there to help. Everything I need- she makes sure I get it."

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

- The provider engaged and involved people who used the service. The provider was in the process of conducting a satisfaction survey for the period of 2019- 2020. The survey asked questions about the quality of care and we found a number of people had responded to this. The questionnaires we reviewed contained positive comments about the care received. The registered manager confirmed that she read each response individually, but would wait until more responses had been received to collate the response.
- People confirmed the provider engaged and involved them in the running of the service. Their comments included "Sometimes the manager will ring and find out if I'm alright and if I'm happy with the service. Other agencies won't do that. They are like a family service and they really think about their client's welfare. When I need to get through to someone, I can get through easily" and another person said "I get a call once a month asking how the care's been- if there was a problem, I would say then, but they're ever so lovely, so there's never been a need."

Working in partnership with others

- The provider worked in partnership with other organisations where needed. People's care records demonstrated advice was sought from multi- disciplinary professionals where needed. One local authority also commented positively on their working relationship with the provider.

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

- The registered manager was aware of her responsibility to report allegations of abuse to the CQC and confirmed this. There had been no safeguarding or other notifiable incidents since our last inspection. The registered manager told us her priority was to mitigate the risk of any incidents occurring and she told us "We are on the ball when it comes to pressure sores or abuse or anything like that. We take action before things go wrong. That's why we haven't had any safeguardings."
- The registered manager and other senior staff were clear about their roles. At this inspection we found the registered manager and other staff members had updated their knowledge about their responsibilities, demonstrated a full level of understanding about regulatory requirements and taken action to put systems in place to meet these.
- Care workers were aware of the requirements of their role and gave us examples of their duties towards the people they cared for. The provider also had job descriptions in place which reflected care worker's understanding of their jobs.

We could not improve the rating for the safe key question from requires improvement because to do so requires consistent good practice over time. We will check this during our next planned comprehensive inspection.