

Dr Louise May Limited

Kare Plus Wirral

Inspection report

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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?	Requires Improvement ●

Summary of findings

Overall summary

We visited the service on 9 and 14 March 2017. We gave short notice to the manager to ensure that she would be available for the inspection. This was the first inspection of the service.

Kare Plus Wirral provides care and support to people living in their own homes across the Wirral. At the time of our visit, the agency was providing support for approximately 28 people and employed 23 support staff.

The service had a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. 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.

The response from people who spoke with the expert by experience was mainly positive and everyone described the staff as kind and caring.

The care records we looked at showed that people were involved in decisions about their care and support. The care records contained detailed information about the support people required and were written in a person-centred style.

The provider had systems in place to ensure that people were protected from the risk of harm or abuse. We saw there were policies and procedures in place to guide staff in relation to safeguarding adults. We found that good recruitment practices were in place which included the completion of pre-employment checks prior to a new member of staff working at the service.

Procedures were in place for the safe management of people's medication when required and staff received medication training.

Staff received a comprehensive training programme to enable them to work safely and effectively.

Internal quality monitoring systems were still being developed to ensure that the service people received was reviewed with them on a regular basis.

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.

Safeguarding policies and procedures were in place and staff received training about safeguarding vulnerable people.

Recruitment processes were safe and thorough.

Procedures were in place for the safe management of people's medication when required and staff received medication training.

Is the service effective?

Good ●

The service was effective.

Staff had undertaken relevant and appropriate training.

The service had policies and procedures in place in relation to the Mental Capacity Act 2005 and staff had received training about consent.

People received the support they needed with their meals.

Is the service caring?

Good ●

The service was caring.

All the people we spoke with praised the staff. They said staff were kind, caring and helpful.

Is the service responsive?

Good ●

The service was responsive.

People who used the service were involved in their plans of care and in decisions about how their support was provided.

The care plans contained detailed information for staff.

A complaints procedure was in place and people who used the service knew how to make a complaint.

Is the service well-led?

The service was not entirely well led.

The service had a manager who was registered with the Care Quality Commission.

Quality monitoring systems were still being developed to ensure that the service people received was reviewed with them on a regular basis.

Requires Improvement 

Kare Plus Wirral

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.

An Adult Social Care inspector visited the office on 9 and 14 March 2017 and looked at records, which included three people's care records, five staff files, and other records relating to the management of the service. We spoke with the provider, the manager and the deputy manager. Following the visit, we received feedback from three members of staff.

The visit was followed up with telephone calls to people who used the service and their relatives, which were carried out by 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.

Before our inspection, we looked at information the Care Quality Commission (CQC) had received about the service including notifications received from the registered manager. We checked that we had received these in a timely manner. We also looked at safeguarding referrals, complaints and any other information from members of the public and from the local authority.

Is the service safe?

Our findings

People who used the service and their relatives said they felt safe, or that their family member was safe with the care staff. People told us "I like all the girls very much, they are all very good I feel safe."; "I feel safe, they all know how to manage my condition." and "They help me feel safe as they will always ask if they can do anything extra."

The staff we heard from confirmed that they had received training about safeguarding and would know how to report any suspicion of abuse. One member of staff told us that information about safeguarding was available on the office notice board and in the care worker handbook and the customer handbook. Records showed that all staff had completed training about safeguarding adults. The provider had a policy on safeguarding and a whistleblowing procedure. No safeguarding referrals had been recorded but the manager was aware of issues that should be reported.

We asked people if the carers arrived on time and if they had experienced any late calls. One person said "Yes they come on time, sometimes they are a little bit early which is good for me as I know they are coming. I have not had a missed call." Another person told us "They are very rarely late. If this has happened Kare Plus has had a legitimate reason. Once I had a missed call. I rang them up. They didn't realise and sent someone quickly within ten minutes."

A third person said "Hardly ever very late, if it gets to half an hour late they usually send someone else or one of the managers comes. Occasionally they will ring if they are going to be late. I have only had one or two missed calls in a year. One happened a fortnight ago, I rang them, I wasn't on the list. They sent a carer."

We looked at how the service supported people with their medication. Some people were prompted to take their medication, whilst other people needed support with administration of their medication. Medication administration record sheets (MARs) were available in people's care files. Staff had received training about safe medication administration and the service had a detailed medication policy and procedures for staff to refer to. Records showed that staff had an annual medication competency test.

Most of the people we spoke with stated they received support administering medication and/or creams. They all considered the medication to be administered safely, correctly and with kindness. They told us "First thing when they come in is they put my tablets in front of me and make sure I take them. They put my cream on, they are very good." and "The carers assist me to open the bottles of medication. Once they realised my patches sting if they are cold they started to put them on a hot water bottle to warm them up before they put them on my skin."

Relatives stated "They give her medication, everything is in place it is directed by me." and "The carers always check he has had his medication. They also put his cream on, he doesn't seem to mind this. He is relaxed, they are very good."

People we spoke with who received assistance with personal care stated the carers wore gloves and aprons

as needed. One person said "They are clean they put on gloves and aprons when they come in. They change their gloves when they do a new job."

We saw that risks to people's safety and well-being had been assessed with regard to moving and handling, the environment, and people's physical health.

We looked at the staff files for four members of staff who had been recruited during the last year and one who had worked for the organisation for longer. The records showed that full recruitment and checking processes had been carried out when these staff were recruited. This included a Disclosure and Barring Service disclosure and two written references. The manager told us that the umbrella organisation Kare Plus issued identity badges for the staff and these were not issued until all of the required checks had been carried out.

Is the service effective?

Our findings

People we spoke with said "They know what to do you when they come. When I get a new carer they do what they call shadowing an experienced one." and "They all have a fortnight's training, some pick it up quicker than others. New ones come with an experienced carer."

Another person explained "The carers are well trained. The manager is looking into further training, special practical training for people with complex needs which involves me. I think it shows they are looking at the individual needs of their clients. It makes a huge difference to me, it is so much easier knowing I am well cared for and not just another call."

A relative told us "They're definitely well trained. They are extremely good. When a new carer comes out they send an experienced one to show them what to do. They get some internal training, one carer told me she was going to school in the office that afternoon."

Everyone consulted stated that, when appropriate, carers asked for their consent and involved them in the decisions about their care. A relative told us "I have heard them ask for consent, they always ask him if he wants a shower or a wash."

People we spoke with received some support with food preparation and/or support at meal times and all were happy with the service provided. People told us "Sometimes a carer will cook a dinner for me and other times they make microwave meals. I clear my plate so that says it all."; "Some carers have breakfast with me to encourage me to eat. It is nice to have someone to have breakfast with." and "They encourage me to eat, during my social contact time we make awesome vegetarian soup, it is nice to have fresh things rather than from packets."

We asked people if the care staff supported them when they required health care. Some people said they had not required additional support but they were confident the carers would help them if necessary. Those who had received healthcare support considered the carers were helpful.

Records showed that a range of training was undertaken by the staff team and this was confirmed by the staff we heard from. Subjects that all staff had covered included basic life support, fire safety, food hygiene, health and safety, infection prevention, moving and handling, safeguarding, equality and diversity, dementia, mental capacity and medication. We saw equipment in the office for moving and handling instruction. Records showed that new staff completed a comprehensive programme of induction over a full week. This training was done on site and there was also an e-learning system that included additional subjects. A member of staff told us "I do feel I have enough training and other care companies I have worked for did not offer the additional training such as pressure care, epilepsy and challenging behaviour that Kare Plus provides via e-learning." A number of staff were also working towards the Care Certificate.

We asked if support staff were supported in their role by the senior staff. One support worker replied "Definitely, they are always there when you need them." A senior member of staff told us "All staff have my

number and are aware that if they have any concerns they can get in touch at any time and I will get back to them within a suitable time frame." There was also an on-call rota outside office hours.

Care staff had an individual supervision meeting four times a year and monthly for new staff. Most staff had been in post for less than a year so had not yet had an appraisal of their performance. We saw a record of an appraisal in one of the staff files we looked at. This was from May 2016 and had not been completed well.

Staff had completed a training course which gave them a basic awareness of the Mental Capacity Act and Deprivation of Liberty Safeguards. This gave staff guidance when providing care for people who may not have capacity to make some of the decisions needed in relation to their support.

Is the service caring?

Our findings

People we consulted during the telephone interviews considered the service to have a caring approach. They told us "They are pleasant and kind to me."; "I couldn't wish for better carers, they come and spend time and chat to me." and "They are very pleasant and nice, couldn't be a nicer lot."

A relative stated: "We get on with all the carers. On the whole I am really pleased with them they have made life better."

One person described how a member of staff had helped to make their birthday a special occasion.

One person said "I feel the carers who come have mixed experience, one with a great deal of experience one who doesn't, however she does listen to me. The best people are the ones who listen."

We looked at thank you letters that the manager had received. One person had written "I wanted to thank you for the fantastic support you all gave to my [relative] during 2016 and thank you also for supporting me through a very difficult period."

Feedback received from recent telephone monitoring activity included "When the girls leave, [person's name] is always clean and comfy." and "I was dreading having care but made friends within a week."

We noticed in people's care files that any special requests had been noted, for example some people wanted only female staff and this was respected.

A 'Customer Guide' was provided to give people information about the service.

Is the service responsive?

Our findings

The majority of people we spoke with were aware of their care plans but not all stated their care plan was reviewed. One person said "I have got it, can't remember having a review." However another person told us "Care plan is in my file, I know what it says, it is constantly reviewed. I make suggestions at anytime about how we can make things better and it is updated, for example my new medication is updated straight away." and another person said "Yes I have a care plan, it has been updated, it pretty much stays the same." A relative told us "I have been given a more up to date care plan. I was presented with it by the manager recently, she asked me to look at it to see if anything needed changing. I haven't had a meeting with her."

The manager told us that new referrals for domiciliary care came from health or social services on a 'spot purchase' basis, or directly from clients or their families. When an enquiry was received, one of the senior staff went to visit the person to discuss their needs and the service they required. The provider told us that she was happy for the service to develop slowly and she would not accept any new customers unless she was sure that the person's needs could be met. Some of the support staff did not drive and so they could only cover a small geographic area.

A senior member of staff explained "I do initial assessments and all care plans are completed within 48 hours of start of service." We saw records of assessments in people's care files. The assessment forms had been completed in detail and recorded agreement for the service to be provided. The forms were not always signed and/or dated by the person receiving the service or a family member where appropriate. We asked a member of staff how they found out about people's needs and they told us "I read care plans, have briefings with supervisors, and I also do my own research if my ladies or gentlemen have certain illnesses."

Plans were in place for the care people required. The documentation was clear and simple and had been completed in full. Staff were given detailed instructions to follow on each call including how the person liked their care to be provided. Care staff completed a visit log after each visit to record the care they had given. Care files were kept in people's homes with another copy in the office.

The agency had complaints policies and procedures and people were given details about who they could contact if they wished to make a complaint or raise a concern. We saw that two complaints had been recorded and there were detailed records to show how the complaints had been dealt with. The manager told us that only formal complaints were recorded in the complaints log and we recommended that it would be useful to record all issues that people raised as part of quality monitoring of the service and as a way of identifying any trends.

Everyone we spoke with knew how to raise a concern or complaint at Kare Plus Wirral. People told us "I phone the manager in her office."; "I contact the manager or the office field care manager if I have any problems" and "I would approach the manager, I have the number to ring and if I didn't get what I wanted I would go to the owner"

One relative considered their concern regarding a carer had been addressed. A person who used the service

considered that their concerns about visits too early in the morning had not been addressed to their satisfaction.

Is the service well-led?

Our findings

We asked people if they considered the service provided by Kare Plus Wirral to be as well organised and well led. They replied "Yes I can't fault them."; "I know the office staff well. I am in great contact with them, I am not just number to them." and "I do think the two managers work really hard to make things as good as possible."

However, other people said "I have asked the manager to ring me back and they say she will ring you back this afternoon, she doesn't. She is well known for this." and "Sometimes they send a list and other times don't. They once sent me the wrong list for the wrong person." Another person reported that they had some issues with the payment system.

A senior member of staff wrote "I feel Kare Plus is well managed but has its ups and downs. We are working towards a two week set rota and continuity of staff for customers. I believe that we all work as a team."

A number of people told us that the management staff were very good. One person explained "I was waiting for my carer to come and I was upset. I rang the manager and she stayed on the telephone line until the carer came. It things like that which make hard things easier." Another person said "It is a very personalised service. Both managers have worked hard to get to know me and my needs. They have done calls and can care for me better because they know me."

A member of staff told us "I am very happy at this company. The management and office staff are all brilliant, couldn't work for a better company." Another member of staff told us they were not happy with their employment but did not tell us why.

The service had a registered manager who had been in post for eight months. The provider was also involved in the day to day running of the service. A deputy manager had been appointed recently and she had considerable experience in a similar role.

Staff meetings were held every two or three months. The most recent was on 12 December 2016 and the next was planned for 16 March 2017. A weekly management meeting was held.

A staff survey had been sent out in 2016 but only two staff responded. A satisfaction survey for people receiving domiciliary care had been carried out in September 2016 with ten forms returned and a summary report written.

The provider had requested a full audit of the service by the umbrella organisation Kare Plus and this was carried out in May 2016. A number of areas for improvement were identified including implementation of telephone monitoring. A re-audit in December reported significant improvements in most areas but not in telephone monitoring. A third audit carried out on 7 March 2017 reflected that all except two actions had been fully completed.

We found that the service had not yet developed and implemented effective internal quality monitoring systems and this was a work in progress at the time of this inspection. The manager told us that people who used the service should have a three monthly telephone review and an annual service review and these were being implemented. They were also developing tools for checking medication administration record sheets and the daily logs that the care workers wrote.