

EveryDay Care & Support Ltd

EveryDay

Inspection report

Bradbury Centre
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North Shields
Tyne and Wear
NE29 6QP

Tel: 01912877028

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16 September 2022

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24 October 2022

Ratings

Overall rating for this service	Good ●
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Is the service safe?	Good ●
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Is the service well-led?	Good ●
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Summary of findings

Overall summary

About the service

Everyday is a domiciliary care agency that provides personal care to people living in their own houses and in specialist housing. It provides a service to older adults, including people living with dementia and younger disabled adults. This service provides care and support to people living in specialist 'extra care' housing. Extra care housing is purpose-built or adapted single household accommodation in a shared site or building. People's care and housing are provided under separate contractual agreements. The Care Quality Commission does not regulate premises used for extra care housing; this inspection looked at people's personal care and support service. There were 300 people using the service at the time of inspection.

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

People were looked after safely by familiar, trusted staff who arrived on time. People and relatives consistently praised staff for their diligence, patience and their caring approach.

Staff worked together well to keep people safe, for instance covering shifts when needed. Staff worked hard as a team.

Risks to people's health and safety were assessed and regularly reviewed. These assessments were person centred and detailed, with input from external specialists when needed.

Staff were recruited safely. Their competence was regularly assessed and there was a range of refresher training in place.

Medicines were administered safely. The registered manager had regard to good practice and was responsive to feedback.

Staff were trained to use PPE appropriately.

The provider had safeguarding and whistleblowing training, policies and systems in place. Staff were comfortable raising concerns if they needed to.

The registered manager demonstrated lessons learned from previous incidents and an open approach when a mistake was made.

The registered manager and other senior staff demonstrated the strong auditing and governance arrangements in place. Accidents, incidents and safeguarding concerns were all recorded, analysed and reflected on at individual staff level and taken to board meetings where there was learning to share.

Feedback from people, relatives and external agencies was positive regarding the leadership 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 good (published 29 January 2018)

Why we inspected

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

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our reinspection 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?

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.

EveryDay

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 Act.

Inspection team

The inspection was carried out by one inspector and two Experts 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

EveryDay provides personal care to people living in their own houses and in specialist 'extra care' housing. Extra care housing is purpose-built or adapted single household accommodation in a shared site or building. The accommodation is bought or rented, and is the occupant's own home. People's care and housing are provided under separate contractual agreements. The Care Quality Commission does not regulate premises used for extra care housing; this inspection looked at people's personal care and support service.

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 announced. We gave 48 hours' notice to be sure the management would be in the office and available to assist the inspection.

What we did before the inspection

We reviewed information we had received about the service. 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. 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 10 people, 10 relatives and 4 staff, including the registered manager, nominated individual and HR manager. We contacted 6 more staff and 2 external health and social care professionals via email.

We reviewed a range of records. This included 2 people's care records and medication records. We looked at 2 staff files. We reviewed a variety of records relating to the management of the service, including policies and procedures, training records, meeting minutes.

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. At this inspection the rating remains good. This meant people were safe and protected from avoidable harm.

Staffing and recruitment

- There were sufficient staff to meet people's needs safely. People told us they could rely on staff to help them as planned, and that there were rarely delays or unexpected members of staff helping them. One person said, "I don't have to worry about timings because they just appear when they're meant to." Another said, "I always know who will be visiting me and they're never late."
- The provider had a programme of rolling recruitment to ensure there were sufficient staff. The registered manager planned the rota in advance and ensured there was no reliance on agency staff.
- Staff were recruited safely. Clear systems were in place to reduce the risk of unsuitable people working with vulnerable people. This included ID checks, references, values-based interview and DBS checks.
- New staff completed a comprehensive induction which included the Care Certificate. The Care Certificate is an agreed set of standards that define the knowledge, skills and behaviours expected of specific job roles in the health and social care sectors. It is made up of the 15 minimum standards that should form part of a robust induction programme.

Using medicines safely

- Medicines were managed safely. The registered manager had introduced a range of measures to ensure errors were reduced and administration safe. Records demonstrated accuracy in terms of core areas of good practice, such as the administration of creams and the use of body maps.
- Clear auditing systems were in place to maintain oversight of medicines and learn from errors. The registered manager and team worked well with external partners and pharmacists to ensure processes were fit for purpose and in line with current guidance. Where we made suggestions for exploring further areas of practice improvement, the registered manager was responsive to this.
- Staff were competent and well trained to administer medicines. The registered manager and other senior staff regularly assessed staff competence and there were clear lines of accountability.

Assessing risk, safety monitoring and management;

- Staff understood the risks people faced and how to reduce those risks. Risk assessments were person-centred and detailed. They were reviewed regularly to ensure they were accurate and informed by any recent advice by external healthcare professionals.
- People felt safe. One person told us, "I feel very safe. They are lovely, look after me and help with anything I need." One relative said, "We have complete confidence in them and trust them to keep mum safe."

Systems and processes to safeguard people from the risk of abuse; Learning lessons when things go wrong

- The provider had systems and processes in place to protect people from the risk of abuse. One person told us, "I'd have no qualms raising concerns but I don't have any."

- The registered manager investigated and reflected on incidents. They kept a detailed record of incidents to ensure they could identify trends or patterns and reported on these regularly to the board and to external commissioners. Where there had been an error they communicated openly with relatives to make improvements.
- Staff received safeguarding training as part of their induction and this training was refreshed regularly. People, relatives and staff felt comfortable raising any concerns.

Preventing and controlling infection

- The registered manager was aware of the current PPE guidance in place and ensured staff were regularly updated.

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 requires improvement. At this inspection the rating has changed to 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

- The culture was positive, inclusive and based on respecting people's independence. The registered manager demonstrated the work they and other staff had completed to ensure the service continually improved, such as improvements to medicines administration and daily record keeping.
- The registered manager ensured staff were able to contribute to people experiencing better health and wellbeing outcomes. They did this through effective, timely care and support, and working well with external professionals. They used data and person-centred case studies to ensure external partners knew what they were doing well, and where they might benefit from additional help.
- The registered manager demonstrated a strong understanding of all aspects of the service and a passion for learning from incidents or errors as a service. They involved people and relatives to ensure service improvements were informed by people's experiences. They planned to introduce more staff champions to upskill staff and share good practice.

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

- The registered manager gave staff clear direction, expectations and support. Staff were supported to pursue careers in health and social care through ongoing training and opportunities.
- The provider had strong governance and auditing systems in place. These were detailed and closely monitored to ensure standards were maintained. The board took an active role in scrutinising this data and ensured additional accountability. The registered manager was supported by a senior team and a nominated individual who worked with them to ensure the service performed strongly. The registered manager was responsive to feedback.
- Incidents, accidents, complaints and safeguarding matters were all meticulously logged and reflected on.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- People and relatives were listened to. One person said, "Common sense is always used and I value that. I can talk to them whenever I need to and they will always help me to sort things out." One relative said, "I have complained once and I was listened to and it turned out to be just a miscommunication by myself and a carer."
- Staff communicated well with people and their families. People said, for example, "There is always someone there if I have questions and they are always up front about everything."

- The registered manager had developed strong external relationships and community links. For instance, with utilities companies, charities, universities, volunteers and local events. During the pandemic they had worked proactively with partners to reduce the impact on people, for instance providing 40 tablets to ensure people could stay in touch with their relatives more easily. We received positive feedback from external partners.

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 had an open, learning culture, within which incidents and accidents were reflected on. The registered manager worked closely with families when things did go wrong. One relative said, "I was very impressed with how they handled it – they turned it into a positive." Staff told us they could raise any concerns openly.
- The registered manager had made relevant notifications to CQC in a timely manner.