

Careuk247 home care ltd

Careuk247 Home Care Cambridgeshire

Inspection report

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30 November 2020
01 December 2020
02 December 2020
03 December 2020

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Ratings

Overall rating for this service

Insufficient evidence to rate

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Careuk247 Home Care Cambridgeshire is a domiciliary (home care) care agency. It provides personal care to people living in their own houses and flats. Careuk247 Home Care Cambridgeshire provides a service to people living with dementia, younger adults, people with a sensory impairment and people with a physical disability.

Not everyone using the service receives the regulated activity of personal care. CQC only inspects the service being received by people provided with personal care, help with tasks related to personal hygiene and eating. Where they do, we also take into account any wider social care provided.

At the time of our inspection there were 25 people receiving the regulated activity of personal care.

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

Staff undertook safeguarding and medicines administration training and applied their knowledge and competence to keep people as safe as practicable.

Staff knew how to identify and report any potential safeguarding concerns. There were enough safely recruited staff with the skills to meet people's needs at a time people preferred. One person said, "[Staff] never rush me. They take all the time I need." Risks to people had been identified and they were managed in a safe way.

There were systems in place that promoted good infection, prevention and control standards. There were systems in place that promoted good infection, prevention and control standards. Lessons were learned when things went wrong, and mechanisms were in place to help prevent recurrence.

The registered manager had made many improvements in the relatively short time they had been in post including, developing a positive staff team culture. Staff were supported in their role in a positive way, and when required were reminded of their responsibilities.

The registered manager was aware of their responsibilities. They had effective quality assurance systems in place that helped identify and implement changes that promote good quality care.

All the people and staff we spoke with spoke positively about the service, their involvement, and that they would recommend the service to others. The registered manager and provider worked well with others to help provide joined up care.

Rating at last inspection

This service was registered with us on 10 October 2018 and this is the first inspection. As this was a focused inspection, we are not able to provide a rating. This is because we have not assessed all domains and key

questions.

Why we inspected

We received concerns in relation to staffing, people's safety and the management of the service. As a result, we undertook a focused inspection to review the key questions of safe and well-led only.

We found no evidence during this inspection that people were at risk of harm from these concerns.

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?

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.

Careuk247 Home Care Cambridgeshire

Detailed findings

Background to this inspection

The inspection

This was a focused inspection to check whether the provider was providing enough staff, that people were safe and that the service was well managed. We will assess all of the key questions and domains at the next comprehensive inspection of the service.

Inspection team

This inspection was undertaken by one inspector.

Service and service type

Careuk247 Home Care Cambridgeshire is a domiciliary (home care) care agency. It provides personal care to people living in their own houses and flats. Careuk247 Home Care Cambridgeshire provides a service to younger adults, older people, people living with dementia, people with a physical disability and people with sensory impairments.

Not everyone using this service receives the regulated activity of personal care. CQC only inspects the service being received by people provided with personal care, help with tasks related to personal hygiene and eating. Where they do, we also take into account any wider social care provided.

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

This inspection was announced. We gave the provider 48 hours' notice. This was to ensure we only spoke with people and relatives who had mental capacity to understand our questions. We also needed to be sure the registered manager or nominated individual was in.

Inspection activity started on 30 November 2020 and ended on 3 December 2020. We visited the office location on 3 December 2020.

What we did before 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 the required Provider Information Return. This is information providers are required to send us with key information about the service, what it does well and improvements they plan to make. We took this into account in making our judgements in this report. The provider also sent us records about compliments, quality assurance audits and feedback, staff rosters and recruitment, incident records and care records.

We looked at information we had requested from the provider prior to the inspection and this information was used as part of the inspection plan.

During the inspection

We spoke with four people, five relatives of people who used the service, seven members of staff including the registered manager. We also requested information from the nominated individual.

After the inspection

We asked for various records including, policies and safeguarding incident records. These were all provided within the timescales set.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

This is the first inspection for this newly registered service. This key question has been rated Good. This meant people were safe and protected from avoidable harm.

The purpose of this inspection was to explore the concerns we had about Careuk247 Home Care Cambridgeshire. We will assess other domains and all of the key question at the next comprehensive inspection of the service.

Systems and processes to safeguard people from the risk of abuse

- Staff had training in safeguarding systems and understood how to keep people safe. They applied their knowledge about safeguards and supported people to protect them from the risk of abuse.
- One staff member described how they could identify any potential abuse such as unexplained bruising and that they could alert the registered manager, CQC or safeguarding authority.
- Systems were in place to ensure people, relatives and staff were not discriminated against. For instance, using different means of communication including other languages. The registered manager told us about some relatives who understood the care and support much more clearly in their own language. This meant that the person had a more positive experience and stayed safe.

Assessing risk, safety monitoring and management

- Risks such as, for mobility, medicines administration, environment and skin integrity had been identified. Staff knew how to manage these risks. A relative said, "I can't praise the staff enough. They keep my [family member] safe despite them living with dementia."
- Regular reviews of risks had been undertaken such as, for people's home environment and for people and staff who may be at a greater risk of infections. Measures were in place to manage these risks.
- People's and staff's records were kept up-to-date and were confidential. One person told us, "Staff never discuss other people or disclose private information."

Staffing and recruitment

- There were enough staff with relevant skills and there was also capacity to cover unplanned staff absences.
- Staff were deployed to meet people's needs at a time people preferred. One person said, "I need two [staff]. They arrive together and make sure I am safe, always." People and relatives confirmed staff arrived on time and completed all care tasks. People were provided with an explanation for any unexpected delays.
- Effective checks were in place to ensure staff were of good character and whose good health had been established. Other checks helped ensure staff did not have any criminal records and whose good character and health had been established.

Using medicines safely

- Medicines were administered and managed safely. One staff member told us, "I collect some people's prescriptions and take them straight to the person."
- Staff were regularly trained in administering medicines and had their competency assessed to do this safely. One person said, "I do all my own medicines but [staff] sometimes have to remind me to make sure I have taken them all."
- Medicines administration audits and observations of staff were effective in ensuring staff correctly recorded people's medicines including topical skin creams.

Preventing and controlling infection

- There were systems in place that promoted good infection, prevention and control standards. Staff had been shown and were trained how to put on and take off their personal protective (PPE) as well as good hygiene practises. A relative told us, "Staff always wipe the surfaces down and wear their PPE correctly. They make sure they dispose of it safely outside, out of reach of my [family member]."
- The provider had sufficient supplies of PPE and staff used this as required. One person said, "I don't like the masks, but I know it's to keep me safe from infections. They have done this really well."
- Staff changed their PPE when needed and had their temperatures checked as well as knowing when to have a COVID-19 test if they showed symptoms.

Learning lessons when things go wrong

- Incidents were recorded and acted on. The registered manager told us that when these occurred actions such as, staff supervisions or changes to procedures were implemented.
- Lessons were learned from incidents and changes made were effective in preventing the potential for recurrence. One relative told us, "[Family member] had a fall and [the provider] alerted the occupational therapy team. We now have a lifeline pendant and walking frame. The staff make sure the frame is always in the safe place for [family member] to access."
- Staff were reminded of their responsibilities such as with additional training or prompts from the registered manager. The registered manager undertook various checks to ensure staff sustained their learning.

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.

This is the first inspection for this newly registered service. This key question has been rated Good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

The purpose of this focused inspection was to explore the specific concerns we had about the management of Careuk247 Home Care Cambridgeshire. We will assess other domains and all of the key question at the next comprehensive inspection of the service.

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

- The registered manager had identified several areas to be improved upon. They had developed and created a positive staff team culture where staff were listened to and valued.
- People, in conjunction with the provider, decided when and how their care was provided. For example, assistance to attend healthcare appointments or when to have a shower or help making a meal. One relative said, "The [registered] manager] keeps in touch. Always asking if there is anything that could be improved on. If I do ever have to call them, they sort things out quickly. [Family member] is doing well, even at a grand age."
- Staff were made to feel valued and listened to. One staff member told us that whenever they contacted the registered manager, they were provided with a solution and their concerns were responded to in a positive way.

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 most of their responsibilities such as staff support, audits and informing the local safeguarding authority about incidents. People had been kept safe but, there had been three occasions where they had not notified the CQC without delay.
- The provider had ensured all other notifiable incidents had been reported to us. The registered manager said this was a genuine oversight as these incidents had not yet been confirmed as a safeguarding matter. They submitted these notifications before we completed our inspection and said they now understood when to send a notification for any allegations or when they suspected abuse had occurred.
- The provider had worked with the registered manager in improving the service. Changes had been effective such as, staff roles for care coordinating and improvements to the detail in care plans and risk assessments.
- Staff received support in their role, this included spot checks, observations of care practise and training updates. A consistent theme throughout our inspection was positive comments from people and relatives that the impact of positive staff support had been better quality care.

- The registered manager told us that if staff did not uphold the values of the provider for high quality care, effective actions were taken. They told us that staff would be reminded of their responsibilities or given other support.

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

- The registered manager had developed effective systems to collect and act on people's views. For example, using alternative communication strategies to gather people's views. Also, using people's first language, an interactive whiteboard or written communications for people who were deaf.
- We saw records of feedback and compliments praising the quality of care provided. All the people and relatives we spoke with spoke highly about staff, the quality of care and how swift actions prevented any incident from happening again. One person said, "All the staff are marvellous. They make my life worth living."

Continuous learning and improving care

- The registered manager had, since taking up post in July 2020 identified many areas of improvement, and had made a huge difference. They also used other input such as, from the local authority to help drive improvements.
- We found that there was a consistent approach to quality and learning. The registered manager was keen to further this including having an external audit company review the service against CQC fundamental standards for future CQC inspections.
- All people and relatives we spoke with told us how much better the provision of the service was and people now had care from a consistent team of staff and at the right time for their needs.

Working in partnership with others

- The provider worked well with others involved in people's care such as, care commissioners, safeguarding authorities and healthcare professionals. This had led to joined up care having a positive impact on people's care.
- Information was shared with others such as reablement teams and occupational therapists and this increased or helped regain people's independence.