

Easycare Limited

Evolve Supporting Prospects

Inspection report

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31 January 2019

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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?	Good ●

Summary of findings

Overall summary

About the service: Evolve Supporting Prospects is a domiciliary care agency. It provides personal care and support to people living in their own homes. At the time of the inspection approximately 65 people were using the service.

People's experience of using this service:

People continued to receive care and support in a safe way. Staff knew how to keep people safe from harm and people told us they felt safe. People said they were supported by consistent staff and received their support in the right way. Staff had received training in infection control and had access to personal protective equipment. Areas of potential risk were identified, assessed and planned for to help keep people safe.

People continued to receive effective care from skilled and competent staff. People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible. Policies and procedures were in place to support this practice. Staff supported people to maintain a healthy diet, in line with their assessed needs, and to access health care if this was needed.

People said staff were kind and caring. People were confident that staff were able to support them in meeting their individual needs in a kind and compassionate way. People were supported and encouraged by staff to make decisions as to how their needs were met. Staff spoken with clearly understood the importance of respecting people's privacy, dignity and independence.

Staff continued to support people in a responsive way. Assessments and care plans were in place which identified the areas of support people wanted and needed. The support people received was centred around them, and they were involved in any decisions made, where possible. Suitable arrangements were in place to respond to any complaints and concerns. People we spoke with felt they were listened to and were confident any issues would be responded to.

The service continued to be well managed. Staff said the registered manager and provider were approachable and responsive to requests for advice and support. People, and their family members were actively encouraged to provide feedback on the service and staff worked well as a team in an open and supportive manner. Everyone spoke positively about the service and the quality of the support being provided.

Rating at last inspection: Good – 28 July 2016.

At this inspection we found the evidence continued to support the rating of good and there was no evidence or information from our inspection and ongoing monitoring that demonstrated serious risks or concerns. This inspection report is written in a shorter format because our overall rating of the service has not changed since our last inspection.

Our findings demonstrated that the service continued to meet all relevant fundamental standards. Further information is in the detailed findings below.

Why we inspected: This inspection was carried out as part of our planned schedule of inspection based on the previous rating.

Follow up: We will continue to monitor the service through the information we receive, and will inspect the service again, if we receive information that indicates risk.

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 safe

Details are in our Safe findings below.

Good ●

Is the service effective?

The service was effective

Details are in our Effective findings below.

Good ●

Is the service caring?

The service was caring

Details are in our Caring findings below.

Good ●

Is the service responsive?

The service was responsive

Details are in our Responsive findings below.

Good ●

Is the service well-led?

The service was well-led

Details are in our Well-Led findings below.

Good ●

Evolve Supporting Prospects

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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Inspection team:

The inspection was undertaken by one adult social care inspector and 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.

Service and service type:

Evolve Supporting Prospects is a domiciliary service providing care and support to people living in their own homes. Areas of support included personal care, medication and meal preparation.

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 was a comprehensive inspection, which took place on the 30 and 31 January 2019. The inspection was announced. We gave the service notice of the inspection visit as we needed to be sure that managers would be available. On the first day of our inspection we contacted people and their relatives by telephone to seek their feedback about the service provided. On the second day we visited the office location to meet with managers and staff as well as review care records and information about the management and conduct of the service.

What we did:

Prior to the inspection the provider sent us a completed Provider Information Return (PIR). This is a form, which is requested on an annual basis and asks the provider to give some key information about the service, what the service does well and what improvements they plan to make. We also reviewed information we held about the service, including notifications the provider had sent us. A notification is information about important events which the provider is required to send us by law.

We also contacted the local authority and Healthwatch Bury to seek their feedback about the service. No concerns were received.

During our inspection we spoke with 18 people who used the service, the relatives of three people, the field supervisor, senior supervisor, two care workers, the registered manager and the registered provider. We reviewed the care files for four people, eight medication administration records (MARs), three staff recruitment files and training and development records as well as information about the management and conduct of the service.

Is the service safe?

Our findings

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

People were safe and protected from avoidable harm. Legal requirements were met.

Systems and processes to safeguard people from the risk of abuse

- All the people we spoke with told us that they felt safe with the staff who supported them. People told us, "Yes, I feel safe" and "I'm safe, no concerns." People also said that staff were consistent, and that new staff were always introduced, so no 'strangers' arrived.
- Suitable arrangements continue to be in place to help protect people who used the service from abuse. Policies and procedures relating to safeguarding adults were available for staff to refer to. We saw workbooks had been completed during 2018, providing an update in training for all staff. Staff spoken with were aware of the types of abuse and knew what to do if they witnessed or an allegation of abuse was made to them. Staff said they were confident any issues raised with managers would be dealt with appropriately.
- The registered manager spoke of a recent initiative regarding the use of key safes. With their agreement, people had been supported to update their security so that their property was kept safe.

Assessing risk, safety monitoring and management

- Individual risk assessments were in place to address people's health, physical and social care needs. Assessments outlined how staff were to support people so that potential risks were reduced.
- Where people had been assessed as requiring the use of equipment, such as mobile hoists, competency assessments and observations were carried out to ensure staff knew how to use them safely. People we spoke with told us; "They [care staff] help me in and out of the bath, they don't rush me. The staff know the bath lift well. I feel very safe in their hands. I have watched them when they are training someone up and they are very thorough" and "It's the little things, they talk to me constantly asking me if I am alright and comfortable, I feel safe. They are so caring."
- Following advice from the fire officer personal emergency evacuation plans (PEEP) had been developed where support was provided throughout the night time period.
- Prior to working in people's homes, the service completed an environmental risk assessment exploring both internal and external areas, such as; space, lighting, trip hazards, kitchen safety, fire safety and the use of cleaning products. These assessments helped to address potential hazards around people's homes so that it was safe.
- Most people we spoke with said staff did not handle their money. People either managed this themselves or were supported by family members. Where shopping tasks had been carried out, we saw financial transaction sheets had been completed and receipts provided.

Staffing and recruitment

- A review of three staff personnel files confirmed that relevant recruitment checks continue to be made prior to new staff starting work with the service. Personnel files contained references, proof of identification, work histories and Disclosure and Barring Service (DBS) checks. DBS checks help employers make safe recruitment decisions as they identify if a person has had any criminal convictions or cautions. We noted

these had been obtained prior to staff starting work for the service.

- The registered provider and registered manager told us the local authority now allocated work to the service in a specific area within the borough. This had meant some changes to staff rota's however these were now established, and teams of staff had been identified to work with specific people so that continuity could be offered. It was acknowledged that recruitment had been difficult, therefore the management team were mindful about accepting additional work as this may impact on the quality of service provided.
- People told us they received reliable and consistent support from regular members of staff. People said that staff were always punctual, and should they be delayed they were contacted and given a reason for the delay. We were told staff never missed a call, even in the recent extreme weather conditions.
- Staff spoken with said; "I have a regular round with the same people", "Stable rota's" and "It's well planned for people."

Using medicines safely

- People received their medicines as prescribed. Policies, procedures and staff training were provided to guide staff on the safe management and administration of medicines. In addition, records showed staff had their competency to administer medicines checked regularly to make sure their practice was safe. Staff spoken with said, "They always check to make sure we're okay, or if we need more help" and "We have regular updates, keeps us up to date."
- Three of the people we spoke with were assisted with their medication. They told us they had no concerns, were not aware of any mistakes and had not missed medication when it was needed. One person told us staff had refused to administer an item which was not detailed on their plan. The person thought this was very well handled and it was explained to them that it was for their safety. Another person felt the support they got with her medication was a very important part of their mental health support and helped to maintain their well-being, adding "Staff know when I am down and encourage me to take my medication."
- We looked at eight Medicines Administration Records (MAR). We found that all MAR were fully completed to confirm that people had received their medicines as prescribed. Some people were prescribed topical creams. Following discussion with the registered manager, records were to be expanded upon clearly identifying where the cream was to be applied.
- We saw that MAR were regularly audited by the field supervisor to ensure accurate records were kept. Where errors or omissions had been identified, records showed what action had been taken to address this with staff.

Preventing and controlling infection

- Information and training was provided for staff to help guide them on preventing, detecting and controlling the spread of infection. This included the use of personal protective equipment (PPE) including disposable gloves and aprons, which were seen to be available to staff in the office. Staff we spoke with confirmed that PPE was always available and used when offering personal care support. One staff member said, "We just come and collect what we need, when we need it. It's always available."

Learning lessons when things go wrong

- The introduction of the field supervisor had made a positive impact, improving communication as well as providing better monitoring and oversight of the service provided.
- Care staff told us they felt able to raise concerns with management and that any concerns would be investigated thoroughly.

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

People's outcomes were consistently good, and people's feedback confirmed this.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law; Ensuring consent to care and treatment in line with law and guidance 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.

- We found the provider continued to work within the principles of the MCA so that people's rights were protected. Information was available to guide staff with regards to capacity and consent.
- Staff spoken with were able to demonstrate some understanding of the MCA and described how they helped people to make choices and have control where decisions needed to be made. Staff comments included; "I always ask people what they want me to do or if there is anything they need before I leave" and "I'm there to do what the person needs and wants me to do."
- A review of people's records showed that people had been involved and consulted in the assessment and planning of their care and support. Where people's relatives made decisions on their behalf we saw legal authorisation was in place for them to do so.
- All the people we spoke with said staff supported them in a way they wanted and needed and felt their wishes were respected. One person commented, "I have confidence that my carers have my best interests at heart."
- Some people said they were aware of their care plan, whilst others knew of documents in their home which staff completed. One person told us; "I chat to the staff each time they come and sometimes I might ask them to do something a different way around that might work better for me, it is never a problem. They want me to be comfortable."

Staff support: induction, training, skills and experience

- A review of records showed that staff received an induction on commencement of their employment followed by a programme of training and development. This helped to ensure staff understood their role and responsibilities. Training had been provided face to face and on-line using e-learning. In addition, assessments of competency were also completed to check staff were confident in areas of practice.
- All the people we spoke with felt staff were competent and well trained. One person we spoke with told us; "When a new member of staff is present they are clear with their instructions and explanations. The carers are consistent in the way I am moved and hoisted." The relative of one person also told us they had directly observed staff caring for their family member. They said they felt staff were "capable with the equipment and were confident in the support they gave."
- The registered manager and supervisors also carried out individual supervision sessions with staff. Supervision is a one to one meeting where staff can speak with a senior member of staff about their work,

any concerns and areas of development. A review of records and discussion with staff confirmed that sessions were held, providing staff with the support and direction needed to carry out their duties.

- Staff spoken with were knowledgeable about how to effectively support people in meeting their individual needs. Staff confirmed they had regular training updates; adding, "We have lots of training", "They make sure we do refreshers to keep us up to date" and "Good team work, we support each other."

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

- Staff helped people to maintain a balanced diet in line with their assessed needs and preferences. Where this support was provided information was recorded in people's care records.

- A number of people we spoke with said they had food delivered, whilst others were made food such as sandwiches. One person preferred the more mature staff to prepare their food as they were more experienced in cooking. Another person said, "They make a sandwich for me and a drink, they make sure I get plenty to drink and leave me with extra, so I don't get too dry."

- The relative of one person told us staff had been "very kind and concerned" about the welfare of their family member as they had not been eating meals, which had been delivered. Staff offered encouragement and asked if they could make them something they fancied, for example, hot food or sandwiches to encourage their appetite.

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

- Rotas were well managed. Visits were planned so that staff supported the same group of people providing consistent care and support. Staff spoken with told us, "I've a stable rota" and "There's continuity with the visits."

- People we spoke with said they felt the staff would contact their GP on their behalf, if necessary. One person added; "The carers know in an emergency my family can't be here as they work too far away, I am confident they would help me in an emergency." People's relatives said they were confident care staff would keep them updated. One relative added, "One carer has gone out of their way to help us by giving us information of further support we may be entitled to, pointing us in the right direction."

- Staff spoken with knew people's health needs and how to access additional support if this was needed. One staff member told us, "Any changes in care are always quickly communicated."

- Staff worked with various health care professionals, such as GP's, occupational therapists and the community nursing team to make sure people's health and well-being was maintained. Guidance for staff was then detailed on people's care records to ensure their individual needs were met.

Is the service caring?

Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect

People were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; equality and diversity

- People told us staff treated them in a kind and compassionate way and were sensitive to their needs. People's comments included, "Staff pop in to make sure I am ok, spend time sitting and talking with me, they are my life line", "I have the same carer and she makes my breakfast tray up just how I like it, she is so thoughtful she tidies up after my shower whilst I have my breakfast. She is always making sure everything is done and alright for me before she leaves", "One carer is particularly good in that she has things ready and completed without having to be asked", "I recently had a very special birthday and all the staff were asking me about it and showed such interest and wanted to know if I had a good day. It means a lot to me that they talk about their families and children, it brightens up my day" and "I consider the carers my friends, I don't know what I would do without them, I am very lucky."
- The service had a policy on 'equality and diversity' and discussion around 'values' was held with staff as part of the induction training. Information about what people could expect from the service was also outlined in the 'service user guide'. This included exploring people's rights, individuality and religious and cultural beliefs.

Supporting people to express their views and be involved in making decisions about their care

- People and their relatives said their views were considered about the delivery of care. The relative of one person said, "They don't just support my husband, but they ask how I am and how I am doing, they genuinely care." Other people told us, "We have a good relationship with the carers, it feels like we are a team" and "We work out the best way forward and sometime that has to change, but the staff take that on board really quickly."
- Where people needed help to make decisions and required independent support, information about advocacy services was available in the 'service user guide' of agencies which could be contacted.

Respecting and promoting people's privacy, dignity and independence

- Staff spoken with had a good understanding of the individual needs and preferences of people and could describe how people wished to be supported.
- People spoke positively about how staff protected their privacy and dignity. Those who were helped with personal care gave examples of how the staff ensured their dignity was maintained and expressed how they made them feel comfortable during personal tasks. People told us, "They go out of their way to make me comfortable, they pull the blind down in the bathroom, help me into the bath and then leave me in peace to have a good soak, they are always nearby so I am reassured. I really appreciate the time in the bath to myself. They then cover me with a towel to protect my dignity, so thoughtful" and "They help me with a shower, but they always make sure my bedroom is warm to go back to and my clothes are put on the radiator."

- People felt staff enabled them to maintain as much independence as possible, which was important to them. People commented, "The staff have organised a slide board to get me out of bed as easily as possible and then I can move the wheelchair by myself. They do just enough, they know me well and how much I can manage", "I chose what help I want, its important I do as much as I can for myself. I have had to adjust to needing care so it is very important that I feel in control, the staff are very good at getting that and knowing just how much to help" and "I have always been independent and they know it means a lot to me to carry on doing what I can for myself. At first the staff had to do everything for me, but bit by bit with their support I need them less and less. I couldn't have got there without them." The relative of one person added, "Staff are aware of what my family member can and can't do, but they encourage them to improve with some things if they can."
- People felt staff were also respectful towards their property. One person said, "They are respectful with my belongings and treat my home as they would their own. They know how I like things kept just so, they tidy around, shower, kitchen in the way I prefer."

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs

People's needs were met through good organisation and delivery.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control

- People were provided with a flexible service that responded to their needs. Care plans provided good information on how people's assessed needs were to be met as well as personalised information on their background, hobbies and interests and likes, and dislikes. Records clearly guided staff on the support people wanted and needed.
- People and their relatives confirmed they were involved in developing care and support plans. People told us the field supervisor often worked with the care team and checked with them if they were happy with the staff and care provided. Some people were able to recall being involved in reviews of their care records so that information was kept up to date.
- People's care records included an assessment of their needs, which took into consideration areas of equality and diversity. The staff were able to demonstrate how they maintained people's privacy and the importance of upholding people's human rights.
- People's changing care needs were identified promptly and reviewed with the involvement of relevant parties. Any changes to people's care and support needs were effectively communicated to staff. Staff spoken with told us, "Communication is better", "Good teamwork, we liaise with each other" and "Any changes are quickly communicated."

Improving care quality in response to complaints or concerns

- The service had a complaints procedure which was outlined in the 'service user guide'. People were provided with a copy of the document on commencement of the service. Whilst some people were not aware of the procedure, all those we spoke with felt they or their relatives would be able to raise any concerns.
- A record of any complaints or concerns were maintained. Information showed that these were responded to appropriately.
- People we spoke with were confident that if they raised concerns these would be dealt with. We were given an example where someone had asked for a change to the time when care staff called. They said this had been dealt with promptly and to their satisfaction.
- Relatives spoken with said they had been approached by a member of the management team to check if they were happy with the care their relative received.

End of life care and support

- We were not made aware of anyone being cared for at the end of their life. Where this support may be required the service would liaise with relevant healthcare professionals to ensure people received the care and support they needed.

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

The service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- 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.
- People and their relatives had confidence in the way the service was managed and thought the service was well led. Responses in the recent surveys sent out by the service confirmed people's satisfaction. Comments included, "Excellent levels of understanding and communication" and "Evolve provides head and shoulders above other agencies that we have used. The carers have made a real effort to understand and connect with my relative. Overall excellent service."
- Managers and staff had clearly defined roles and responsibilities. Staff felt the team worked well together and they had good support from the management team. Their comments included, "Management is second to none, they do their job properly", "They are approachable and respond quickly", "Genuinely there's a lot of support and back up" and "Staff are monitored and supported properly."
- The service is open during normal office hours. People and staff were provided with an 'on-call' number which was available outside of these hours for advice or unforeseen emergencies. All the staff we spoke with said they had the 'back up' if needed.
- The service also had a business continuity plan. This provided information about what to do in the event of an incident or emergency that could disrupt the service so that people were protected.

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

- People and their relatives had been asked to comment on their experience and their views of the service. Annual surveys had recently been distributed; 21 responses had been received. People commented, "They [staff] are polite and respectful", "I am happy with my current regular carers who are attentive and helpful" and "Excellent levels of understanding and communication." People's relatives also commented about the continuity of care their relative received. Comments included, "Yes it's excellent. My [relative] has made good relationships with the staff and trusts them" and "Yes, they are lovely and always go the extra mile."
- Opportunities for staff to share their views and ideas were also provided through occasional team meetings and supervisions. We were told a recent meeting had been planned and chaired by care staff, which gave them a sense of ownership and responsibility.

Planning and promoting person-centred, high-quality care and support; and how the provider understands and acts on duty of candour responsibility

- The culture of the service focused on delivering person-centred care that met people's needs.

- People's views had been sought in the feedback surveys sent out by the service. People felt they received a good standard of care, which met their individual needs. Comments included "The staff are very aware of my needs and efficient in dealing with them" and "I have confidence in the efficiency of the staff to cope with any situation." All those who responded felt staff made them feel "supported, safe, respected and valued."
- Providers of health and social care services are required to inform the Care Quality Commission, (CQC), of important events which happen in their services. The registered manager and provider had informed CQC of significant events, where necessary and understood their responsibilities.

Continuous learning and improving care

- Systems continued to be in place to monitor the quality of the service. The management team carried out monitoring and checks, which looked at key areas such as medication, staff training and competency and care plan reviews.
- The provider strived to maintain good staffing levels and retention with little turnover in staff.
- As part of the learning from feedback received about the service, the registered manager told us that a newsletter would be distributed telling people what steps were to be taken to make any improvements needed.

Working in partnership with others

- The service worked closely with other services so that people's assessed needs were appropriately met, and their health and well-being was maintained.
- The registered manager attended the local authority manager forums. These meetings provided managers and service providers with the opportunity to share ideas and learning.