

## Total Care Nursing Limited

# Total Care Nursing Limited

### Inspection report

Highpoint  
2 Wike Ridge Gardens  
Leeds  
LS17 9NJ  
Tel: 0113 288 8728  
Website: www.example.com

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## Ratings

### Overall rating for this service

Good 

Is the service safe?

Good 

Is the service effective?

Requires improvement 

Is the service caring?

Good 

Is the service responsive?

Good 

Is the service well-led?

Good 

## Overall summary

This inspection took place on 14 September 2015 and was announced. At the last inspection in August 2013 we found the provider was meeting the regulations we looked at.

Total Care Nursing Limited is registered to provide personal care to people in their own home. At the time of the inspection, 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.

People we spoke with told us they were very happy with the care they received and were complimentary about the staff who supported them. They told us the service was well managed. People consented to their care but where they lacked capacity a formal assessment was not always completed. People received assistance with meals

# Summary of findings

and healthcare when required. People were involved in planning their care and, in the main, care and support needs were assessed and plans usually identified how care should be delivered.

People told us they felt safe. Staff understood how to keep people safe and told us any potential risks were identified. There were appropriate arrangements for the safe handling of medicines.

Everyone we spoke with said the staffing levels were good. People who used the service said the same care workers visited, staff always stayed the agreed length of time and their visit times suited their needs and wishes. Safe recruitment practices were followed.

Staff felt well supported by the management team but the provider did not have an effective system that

ensured staff had completed all the training and support that equipped them with the skills and knowledge to do their job properly. Staff were confident people received good care and knew the people they were supporting very well.

People got opportunity to comment on the service and knew who to talk to if they wanted to discuss their care or raise a concern. The management team were familiar with people's individual care packages and knew people who used the service and staff very well.

We found a breach of the Health and Social Care Act 2008 (Regulated Activities) regulations 2014. You can see the action we have told the provider to take at the end of this report.

# Summary of findings

## 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.

People told us they felt safe. Staff knew what to do to make sure people were safeguarded from abuse.

There were enough staff to meet people's needs and a robust recruitment process was followed before staff were employed by the agency.

There were appropriate arrangements for the safe handling of medicines.

Good



### Is the service effective?

The service was not consistently effective.

Staff felt well supported but the provider did not have a system that ensured staff had completed all the training that equipped them with the skills and knowledge to do their job properly.

People consented to care and support but where a person lacked capacity a formal assessment was not always completed.

People made decisions about their meals and healthcare. The service provided support when required.

Requires improvement



### Is the service caring?

The service was caring.

People were very complimentary about the staff and told us their experience was positive.

People were involved in planning their care and support.

Staff knew the people they were supporting well and were confident people received good care.

Good



### Is the service responsive?

The service was responsive to people needs.

People told us the care they received was personalised.

People's care and support needs were assessed and plans usually identified how care should be delivered.

People knew who to contact in the care agency if they needed to.

Good



### Is the service well-led?

The service was well led.

People told us the service was well managed.

Good



# Summary of findings

The management team were familiar with people's individual care packages and knew people who used the service and staff very well.

The service had a positive culture and defined quality from the perspective of the people who used the service and staff.

# Total Care Nursing Limited

## 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.

Before the inspection, we sent out surveys to ten people who used the service. Six were returned and we have included their responses in the inspection report. We also reviewed all the information we held about the service. This included any statutory notifications that had been sent to us. We contacted the local authority and Healthwatch. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England.

This inspection took place on 14 September 2015 and was announced. The provider was given 48 hour notice because the location provides a domiciliary care service; we needed to be sure that someone would be in the office. An adult social care inspector and an expert-by-experience carried out the inspection. An expert-by-experience is a person who has personal experience of using or caring for someone who uses this type of care service. Our expert had experience in older people's services.

At the time of this inspection there were ten people receiving personal care from Total Care Nursing Limited. We spoke on the telephone, with six people who used the service, two relatives and six staff. We visited the provider's office where we spoke with the registered manager and office manager, and spent some time looking at documents and records that related to people's care and support and the management of the service. We looked at three people's care and support plans.

# Is the service safe?

## Our findings

People who used the service were safeguarded from abuse. They told us they felt safe. One person said, "I feel very safe with them, I can rely on them." Another person said, "I feel very safe with the carer she knows just how to help me." A relative said, "I feel he is absolutely safe with them, it's so important." Another relative said, "I think she is very safe with the carers." Everyone who returned a survey told us they felt 'safe from abuse and or harm from their care workers'.

The provider had safeguarding procedures and information about the local safeguarding authority. The management team understood how to report any safeguarding concerns. The provider had a whistleblowing policy. 'Whistleblowing' is when a worker reports suspected wrongdoing at work.

Staff we spoke with said they had received training which enabled them to recognise different types of abuse and the ways they can report concerns. Staff were confident that if they raised any concerns with the management team they would respond appropriately and promptly.

The service had systems in place to keep people safe through risk assessment and management. The registered manager or office manager carried out an assessment before people received a service, which involved visiting the person at home. We looked at two people's initial assessments which identified medical conditions, mobility requirements, personal risk safety, medication and dietary requirements. We looked at environmental risk assessments which showed the provider had considered the internal and external environment, heating, cooking, pets and COSHH (Control of substances hazardous to health).

Staff told us they worked in a safe environment and any potential risks were identified. One member of staff discussed a situation where they had received specialist training to meet one person's complex health needs. They said, "Before we got involved they had a specialist nurse training us and making sure we were competent. They are very thorough especially when it comes to safety." One person who used the service said, "She [care worker] knows what to do in an emergency." In our survey we asked

people if their care and support workers did all they could to prevent and control infection (for example, by using hand gels, gloves and aprons): 83% agreed 17% didn't know.

Everyone we spoke with said the staffing levels were good. People who used the service said the same care workers visited, staff always stayed the agreed length of time and their visit times suited their needs and wishes. One person said, "They arrive on time, or they ring to let us know they may be late." Another person said, "I cannot fault them, they are on time or they ring and let me know." Another person said, "They are always on time and I see the same carer most of the time." A relative told us, "We have continuity of carers which is very important."

Everyone who returned a survey told us they received care and support from familiar, consistent care workers who completed all of the tasks that they should do during each visit, and their care workers arrived on time.

Members of staff told us they were able to spend sufficient time with people and did not have to rush when providing care and support. One member of staff said, "With this agency you have time. It's so nice being able to support people then have a catch up before you have to leave." The management team discussed the arrangements for planning visits and said they always gave ample time between visits to make sure staff could meet the agreed visit times.

We looked at the recruitment records for two members of staff and saw completed application forms, proof of identity, references and Disclosure and Barring Service (DBS) checks. The DBS is a national agency that holds information about criminal records. In one staff file we saw that the employment history was not fully completed. The provider had put a note on the file but this had not been followed up. The office manager agreed to make sure the relevant detail was added to the file. We spoke with two members of staff who had started working for the agency in the last year. They said they had gone through a proper recruitment process, which included attending an interview. They said they were unable to start work until all checks were completed.

We looked at the systems in place for managing medicines and found there were appropriate arrangements in place to assist people to take their medicines safely. Care plans provided guidance to ensure staff understood how to

## Is the service safe?

administer medicines to meet their individual needs. Staff told us they only ever administered medicines from a 'dosette box' which was prepared by a pharmacist and creams must be prescribed. They said they had completed training which had provided them with information to help

them understand how to administer medicines safely. Every month medication administration records (MAR) were taken from the person's home to the provider's office. We looked at two people's MAR and saw these had been completed fully and correctly.

# Is the service effective?

## Our findings

People we spoke with were very complimentary about the care workers that supported them and felt they were well trained. One person said, “They are trained and capable of carrying out very personal procedures with dignity and efficiency.” Another person said, “They are amazing, I cannot praise them enough.” A relative said, “The care is absolutely superb, I couldn’t ask for better.” Another relative said, “They know exactly what to do.” Everyone who returned a survey told us their care workers had the skills and knowledge to give them the care and support they needed.

Staff we spoke with told us they were well supported by the management team. They said they received training that equipped them to carry out their work effectively. The management team told us all care workers had either completed or were completing a level two or three diploma/NVQ (National Vocational Qualification) in health and social care. The diploma/NVQs are nationally recognised qualifications. They told us all new starters completed the ‘Care Certificate’. The ‘Care Certificate’ is an identified set of standards that health and social care workers adhere to in their daily working life. Two staff, who had started working for the agency in the last few months, told us they had completed the ‘Care Certificate’.

Staff we spoke with said they had frequent discussions about their role and responsibilities with the management team but this was not always recorded. They said they also had formal supervision at the office which was recorded. Most staff said they had been observed when they provided care to make sure they were meeting the required standard, which they called ‘spot checks’. One member of staff said they had not been observed.

The management team said they did not have an up to date training, supervision or appraisal matrix. We looked at five staff files and saw these contained a range of training certificates. However, we were unable to establish that all the staff had completed all the training that equipped them with the skills and knowledge to do their job properly. For example, we could not find evidence that one member of staff had completed moving and handling training. We found that some staff had not completed refresher training for over two years. Records showed appraisals were completed in May 2014; the management team said these would be completed again shortly. Staff had attended

‘meetings with management’ but there was a variation in the frequency. For example, one member of staff did not have a meeting recorded since November 2014; another member of staff had three meetings in 2015; another member of staff had one meeting recorded in 2015.

The management team were unsure how often staff should update and refresh training. The provider did not have a training and development policy that identified the training and development requirements. The provider’s quality assurance policy stated that observational supervision of each care worker would be carried out and documented quarterly, and there would be annual appraisals. Although staff felt well supported and all staff had received some training and supervision, it was evident that the training, learning and development needs of staff were not consistently reviewed during the course of their employment. This was in breach of Regulation 18(2) (Staffing) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

People who used the service told us they made decisions about their care and treatment. The management team said that as part of the initial assessment they discussed people’s involvement in their care and their ability to make decisions about their care and support. They said they would often liaise with health professionals, which included reviewing a person’s capacity to make decisions. We saw in the initial assessment that a question about making decisions was answered but there was no information to show how this was assessed. People had signed consent forms for medical information and access to keycodes. Staff we spoke with were very confident people who used the service were encouraged and supported to make decisions.

The Care Quality Commission monitors the operation of the Mental Capacity Act 2005 (MCA). The provider had a range of information about MCA and how they should support people who lack capacity. Staff we spoke with understood that people needed to consent to care, and said they had covered the MCA during their training. We looked at records which showed relatives were involved in people’s care and supported people with decision making, however, we found the provider was not carrying out formal assessments when people lacked capacity. Mental capacity assessments help protect people who lack capacity to make particular decisions and maximise their



## Is the service effective?

ability to make decisions. The registered manager took prompt action once this was raised at the inspection and said they would ensure mental capacity assessments were in place where required.

People made decisions about their meals and healthcare. One person said, "They help me to manage my appointments and they take me to my appointments." Care

plans were in place where people required assistance from Total Care Nursing Limited and daily records evidenced that staff were providing appropriate support. Some people received help from relatives with these aspects of care, for example, attending health appointments. Staff told us before they left their visit they made sure people had access to food and drink.

# Is the service caring?

## Our findings

People who used the service and the relatives we spoke with were very positive about the service they received from Total Care Nursing Limited. Comments included: “They go that extra mile for me”, “They give him the quality of care which he deserves”, “I wouldn’t change them for anything”, “They have a very caring approach to their work, I went into hospital and four carers rang up to see if I was ok”, “They are very caring, we talk and laugh while they are working. It’s a very enjoyable visit”, “They are always friendly and caring on each visit”, “The office staff are very helpful”, “They are very respectful towards me and they make me laugh”.

In our survey we asked people if they were introduced to their care workers before they provided care or support: 83% agreed 17% didn’t know. The survey results showed everyone was happy with the care and support they received, care workers always treated them with respect and dignity, and care workers were caring and kind. They told us the information they received from the service was clear and easy to understand.

We looked at care plans which showed people had been involved in planning their care and support. These were personalised and included information about the specific

support people required at each visit. A relative said it was important they were involved in the care planning and organising, and told us, “They make sure I am involved with everything, we have good communication.”

People told us the support they received helped them to be as independent as they could be. One person said, “They try hard to help me maintain my independence; they let me do the things I can manage.” Another person said, “When they help me bath, they respect my privacy and dignity, and allow me to maintain my independence.” Another person said, “They have a system when they come so that I can do as much as I can myself and it helps me to maintain my independence and dignity.”

Staff were confident people received good care and were able to tell us about people’s likes and dislikes, needs and wishes, which helped them understand the person and how to provide care to meet their needs. One member of staff said, “People are really happy with the agency. It’s definitely caring.” Another member of staff said, “I’ve worked for other agencies and this provides by far the best service.”

Staff talked about how they ensured people’s privacy and dignity was maintained and gave good examples of how they did this. They said they had received training to help them understand how to provide good care. One member of staff said, “We find out about the people we care for, we get to know them and have been trained so we know how to care for them properly.”

# Is the service responsive?

## Our findings

People told us the care they received was personalised. One person said, “They are very capable, so they do the right things for me.” Another person talked about their care which involved dressing and showering which they were happy with. One person said, “Each visit they refer to the book before they do anything.” Another person told us staff read the care plan every day. In our survey we asked people if the care agency would involve the people they chose in important decisions: 67% agreed 33% don’t know.

People’s care and support needs were assessed and plans usually identified how care should be delivered. The care plans we looked at contained information that was specific to the person and contained information about how to provide care and support. For example, one person’s care plan had detailed information about their preferred morning routine. There was also good supporting evidence from the person’s social worker. Another person’s care plan stated that they required help with washing and dressing, and the person’s daily records confirmed staff assisted the person with this every morning.

Although we found effective care planning for some aspects of care we also found that some areas of care were not clearly planned which could lead to inconsistencies in how care was delivered. For example, one person received help with their care from a family member and staff from

the agency. However, it was unclear who was responsible for providing different aspects of care, and the daily records did not state who had provided the care. Another person’s daily records made reference to the person using a ‘zimmer’ frame but there was no reference to this in their manual handling plan and assessment. The provider said they would review everyone’s assessments and care plan to make sure care was designed to meet their needs appropriately, and any changing care needs were identified.

Our survey responses showed people who used the service felt care workers and office staff responded well to any complaints or concerns they raised. 67% knew how to make a complaint about the care agency; 33% said they didn’t know. One person said they had raised a concern in the past and were happy with how it had been resolved. Everyone who returned a survey told us they knew who to contact in the care agency if they needed to.

The registered manager told us they had not received any formal complaints in the last two years. They said everyone was given a ‘statement of purpose’ and ‘service user guide’ when they started receiving a service and this gave people information about how to make a complaint. We looked at a copy of this which contained relevant details including who to contact if anyone was unhappy with the outcome of the complaint.

# Is the service well-led?

## Our findings

People who used the service and the relatives we spoke with told us the agency was well managed. Comments included: “It’s a good agency largely because the person who organises it on a daily basis is excellent”, “It’s a jolly good company, with good management and support staff”, “I would recommend the company to anyone”, “They are always so understanding and they are absolutely perfect”. One person told us they were very impressed with how smart the care workers were. Another person said they were planning to increase their care hours and would “not go anywhere else”. Everyone who returned a survey told us they would recommend the agency to others.

We talked to staff about the management arrangements and received very positive feedback. They said a member of the management team was always available. Staff told us they were very happy working for Total Care Nursing Limited. They knew what was expected of them and understood their role in ensuring people received the care and support they required. Staff told us they were encouraged to put forward views and make suggestions to help the service improve. One member of staff said, “The managers are very accessible and supportive. You can speak to them anytime.” Another member of staff said, “It’s the nicest company I’ve ever worked for. They make sure you have plenty of everything, and look after their staff.”

The management team discussed how they monitored the quality of the service. They told us they had frequent contact with everyone who used and worked for the service. They were familiar with people’s individual care packages and knew people who used the service and staff

very well. This provided them with a good overview of the service. They also recorded any significant events, such as accidents and incidents, and discussions with health professionals.

The provider had a quality assurance policy that outlined how they should monitor the service but we found they were not implementing this consistently. The management team told us they were going to review their processes to ensure their quality assurance system was effective and everything was completed in line with their policies and procedures.

People who used the service told us they could express their views. From discussions with people who used the service and relatives it was evident that they felt involved with the service in a meaningful way, and communication with care workers and managers worked very well. We looked at the provider’s surveys that had been completed in November 2015; four people had responded. Everyone provided very positive feedback about the service.

Staff told us they could express their views and frequently visited the office. Staff said they discussed the service, on the telephone or when they visited the office although these were not always recorded. The registered manager told us they had not completed any staff surveys and did not hold team meetings. It was evident that the management team encouraged openness and regularly talked to staff on an individual basis. The registered manager and office manager were confident that staff felt actively involved in developing the service but to improve quality assurance they said they would introduce a formal process to capture staff views and use the information to drive improvement. They said they would also introduce a system to ensure key messages were shared with all staff.

This section is primarily information for the provider

## Action we have told the provider to take

The table below shows where legal requirements were not being met and we have asked the provider to send us a report that says what action they are going to take. We did not take formal enforcement action at this stage. We will check that this action is taken by the provider.

### Regulated activity

### Regulation

Personal care

Regulation 18 HSCA (RA) Regulations 2014 Staffing

**Staff did not receive appropriate support to enable them to carry out their duties they are employed to perform.**