

# Sugarman Health and Wellbeing Limited Sugarman Health and Wellbeing - Watford

### **Inspection report**

Citibase Watford Suite G15 42-44 Clarendon Road Watford WD17 1JJ Date of inspection visit: 13 July 2021

Good

Date of publication: 09 August 2021

Tel: 01923801818

Ratings

### Overall rating for this service

Is the service safe?GoodIs the service effective?GoodIs the service caring?GoodIs the service responsive?GoodIs the service well-led?Good

### Summary of findings

### Overall summary

#### About the service

Sugarman Health and Wellbeing - Watford is a domiciliary care agency. It provides personal care and support to people living in their own homes in the community and in specialist housing. People who used the service received 12-hour support from care workers and some people had care workers live at their homes to provide 24-hour support. At the time of our inspection there were 43 people using the service.

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

We expect health and social care providers to guarantee autistic people and people with a learning disability the choices, dignity, independence and good access to local communities that most people take for granted. Right Support, right care, right culture is the statutory guidance which supports CQC to make assessments and judgements about services providing support to people with a learning disability and/or autistic people.

The service was able to demonstrate how they were meeting the underpinning principles of Right support, right care, right culture. Care workers deliver person-centred care and promote people's dignity, privacy and human rights. The ethos, values, attitudes and behaviours of leaders and care workers help ensure people using services lead confident, inclusive and empowered lives

People were safe and protected from avoidable harm because care workers knew how to identify and report any concerns relating to the risk of abuse. Risks to people's health, safety and well-being were assessed and measures developed to remove or reduce the risks. People were supported by care workers who had been safely recruited.

People's medicines were managed safely. Staff received appropriate training and had their competency assessed to help ensure they were sufficiently skilled and knowledgeable to safely administer medicines. Staff had received training in infection control practices and personal protective equipment was provided for them. The management team took appropriate action following any incidents and learning was shared with staff.

Before care delivery started assessments were completed to make sure people's needs could be met by Sugarman Health and Wellbeing. Care workers received training and support to enable them to carry out their roles effectively.

Care workers knew people well and were able to promptly identify when people's needs changed, and they sought professional advice appropriately. People were supported to have maximum choice and control of their lives and care workers supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

People and relatives praised the kind and caring nature of the care workers. People received consistent care

from a small team of staff. People told us they would be confident to raise any concerns with the management team.

The management team was committed to providing a high standard of care to the people they supported and understood their responsibilities under the Duty of Candour. People, their relatives spoke highly of the management team and told us that they were always available and supportive.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk Rating at last inspection

This service was registered with us on 06 April 2020 and this is the first inspection.

### Why we inspected

This inspection was carried out to check 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 Care Act 2014.

#### 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 effective?                     | Good 🔍 |
| The service was effective.                    |        |
| Details are in our effective findings below.  |        |
| Is the service caring?                        | Good 🔍 |
| The service was caring.                       |        |
| Details are in our caring findings below.     |        |
| Is the service responsive?                    | Good 🔍 |
| The service was responsive.                   |        |
| Details are in our responsive findings below. |        |
| Is the service well-led?                      | Good • |
| The service was well-led.                     |        |
| Details are in our well-Led findings below.   |        |



# Sugarman Health and Wellbeing - Watford

### **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 Care Act 2014.

Inspection team The inspection was undertaken by one inspector.

Service and service type This service is a care agency providing care for people with complex health needs living in their own homes.

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

We gave the service 48 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the provider or registered manager would be in the office to support the inspection.

Inspection activity started on 05 July 2021 and ended on 15 July 2021. We visited the office location on 13 July 2021.

#### 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 a provider information return prior to this inspection. This is information we require providers to

send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report.

#### During the inspection

We spoke with four people who used the service and five relatives about their experience of the care provided. We spoke with ten members of staff including the registered manager and management team, the provider's quality lead and care workers. We received feedback from external professionals involved with the care of people who use this service. We reviewed a range of records. This included two people's care records, complaints records and a variety of records relating to the management 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.

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.

Systems and processes to safeguard people from the risk of abuse

- The provider had effective systems to help protect people from the risk of harm or abuse. Care workers received training and were clear about how they would report any concerns both internally to the provider and externally to the safeguarding authorities. The registered manager understood their responsibilities to safeguard people from abuse.
- People and their relatives told us that people received safe care. One relative said, "The care workers we have are like family to us. I trust them completely; I know they have [person's] interests at heart." A person who used the service told us they felt safe because, "They (care workers) always follow the same procedures when hoisting me in and out of bed, ensuring that I feel safe by asking me."

### Assessing risk, safety monitoring and management

- Risks to people's health, safety and well-being were assessed and a care package was developed to remove or reduce the risks. Risk assessments enabled people to stay as independent as possible within the confines of their health needs and provided care workers with the information they needed to promote people's safety.
- The registered manager helped ensure people received support in the event of an emergency. The management team provided a 24 hour on-call service and provided emergency cover if needed for staff sickness or other such events.

### Staffing and recruitment

- The provider operated robust recruitment procedures; appropriate checks were undertaken to help ensure care workers were suitable to work at the service. Criminal record checks and satisfactory references had been obtained for all new recruits before they worked with people independently.
- People and their relatives told us they thought there were enough care workers available to meet people's care needs. However, some relatives told us it had taken a significant amount of time for the care package to settle with the right care worker possessing the right skills. This had been acknowledged as an area of shortfall and a pilot scheme was trialled designed to address shortfalls identified with some new complex care packages. The registered manager reported this had proved effective and will be rolled out to improve the quality of care delivered by the whole organisation.
- One relative noted that staff retention was good, meaning that staff tended to stay with the agency and people were able to grow solid relationships with their care workers.

### Using medicines safely

• Care workers received training to support them to administer people's medicines safely. The registered manager told us nurse assessors undertook competency assessments once care workers had completed

their training to ensure safe practice.

• Care workers supported some people with administering their medicines and just prompted others to take theirs as needed.

Preventing and controlling infection

• People were protected from the risk of infection because care workers had been trained in infection control and followed the current national infection prevention and control guidance. People and relatives told us care workers wore face masks, aprons and gloves during care provision.

• Care workers told us they were supplied with personal protective equipment (PPE) to help prevent the spread of infections and were clear on their responsibilities with regards to infection prevention and control. The provider held plentiful stocks of all PPE.

Learning lessons when things go wrong

• The registered manager took appropriate actions in response to any concerns and learning was shared with care workers. For example, recent learning shared with the team included the importance of a well-planned hospital discharge, the importance of checking if appropriate referrals had been sent prior to discharge and the importance of escalating concerns to the appropriate people in a timely manner.

### 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.

This is the first inspection for this newly registered service. This key question has been rated Good. This meant 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

- People's needs were assessed before they started to use the service. Assessments included people's clinical support needs, personal care needs and their individual preferences. These assessments formed the basis of people's care plans and risk assessments.
- A person told us, "Sugarman Health and Wellbeing spent a sufficient amount of time understanding my needs and then putting in place my care package." People's relatives praised care workers for the effective care and support they delivered. A relative told us how much it meant to the whole family for a person to remain in their own home and receive such professional and empathetic care.

Staff support: induction, training, skills and experience

- Care workers received training in areas including safeguarding, moving and handling, advanced dementia, fire safety and the Mental Capacity Act and had a good understanding of these topics. During the pandemic face to face training had not taken place. Additional 'team learning' sessions had been introduced in areas such as safeguarding knowledge and understanding. Care workers received supervision and competency observations to help ensure that they had the knowledge to perform their job roles. Care workers told us they enjoyed good support from the nurse assessors, care co-ordinators, rota coordinators and the provider's implementation team.
- Inductions for new care workers were thorough and their knowledge was tested by the management team prior to them working with people unsupervised.
- People and their relatives praised the team for their skills and knowledge. One relative told us, "The care workers are well trained by Sugarman Health and Wellbeing. Our assigned nurse is very through with training and follows up with any issues. The care workers are skilled and, if new to complex care, they are well trained."

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

- People and their relatives said that where people needed assistance to eat, care workers supported them in a safe and effective manner. People's dietary needs and requirements were identified in their care plans and care workers had a good understanding how to support people with these.
- One relative said, "One care worker is a very good cook and cooks daily meals from scratch for [person]. This has resulted in the person enjoying greatly improved health and wellbeing, they are now happy, smiling and engaged."

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

• The service worked well with external professionals for the benefit of people who used the service. These included social workers, GPs, occupational therapists, district nurses and speech and language therapists. An external professional told us, "I can only praise the care given by Sugarman Health and Wellbeing in dealing with a complex case which requires specialist knowledge from care workers who are trained in specialist tasks for the person to be able to live at home with their family."

• A relative told us how a person's health had significantly improved. They said, "[Person] has very complex health needs and previously suffered regular chest infections. That doesn't happen now, Sugarman Health and Wellbeing care workers are scrupulously clean and know what they are doing."

• Information was shared with other agencies if people needed to access other services such as hospitals.

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.

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA. When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty. We checked whether the service was working within the principles of the MCA.

• People and relatives told us that care workers always asked for consent when supporting them. People had been asked for their consent to be supported in line with their individual care plans and risk assessments.

• Care workers received training in the Mental Capacity Act and had a good understanding of how to put this in to practice. One Care worker told us, "Before I started providing personal care, I will gain consent from the person. When consent given, I explain what I am about to do, I will involve the person in decisions relating to their care."

### 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.

This is the first inspection for this newly registered service. This key question has been rated Good. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; respecting equality and diversity

- Care workers had a good understanding of the people they supported. They took time to get to know people's individual likes and dislikes, their pasts and interests and incorporated these into their care.
- People and their relatives praised the care team for the care and support they provided. A relative told us, "The care workers are absolutely lovely, the family also enjoy their presence in the house, and it means we are relaxed to spend quality time all together with [person] which is lovely." Another relative said, "All the care workers have been kind, caring and courteous towards [person]. "
- Care workers supported people in many aspects of daily life with care and compassion. A care worker shared a story of how they had supported a person from being physically and emotionally unwell to a situation when they could make independent decisions, communicate better and had improved health. The person now enjoyed a full life, the care worker told us, "We made great relationship, and now [person] has confidence to say what they want."

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

- People's care plans showed that they were consulted about changes to their care and that these were documented. Regular reviews of people's support involving people, their relatives and other professionals took place.
- People and their relatives told us they were always involved in any decisions about their care.

Respecting and promoting people's privacy, dignity and independence

• People and their relatives said that care workers promoted people's privacy, dignity and independence. People described how they were supported to receive personal hygiene delivered in a way that made them feel respected.

### Is the service responsive?

# Our findings

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

This is the first inspection for this newly registered service. This key question has been rated Good. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- People received care to meet their individual needs and preferences. A relative told us, "Care workers are always on time, they are very clean, they respect [person's] wishes and give them the space needed when [person] wants it."
- People's care was adapted to meet their changing needs. For example, where people began to regain some of their mobility the support was amended to help maximise independence.
- Care plans were detailed with regards to people's preferences, likes and dislikes. This meant care workers had the information available to help ensure people received consistent care that met their individual needs.

### Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

• The registered manager told us they had not had the need to make information available in different formats yet but said they would do so should the need arise.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- Care workers supported people to maintain contact with their friends and families making sure people had good access to their phones. The registered manager gave an example where a person had a tripod set up to help them maintain contact with family.
- The registered manager told us of examples where a person had been supported to visit the beach as they had dreamt of, another person supported to bake a celebration cake for a relative and a further person achieved their personal goal of being able to get out into their garden. The registered manager said, "These examples of clinical interventions and support are becoming what we expect as the norm, and we continuously strive for further improvement and success."

Improving care quality in response to complaints or concerns

- The provider had a complaints and compliments policy, people and their relatives told us they had a copy of the policy in their homes to access if needed.
- People and their relatives told us where they had raised issues with the management, they were satisfied that appropriate action was taken as a result. One relative said, "I am 100% happy with the management

response to anything I have raised with them." People and relatives told how the registered manager would come to them and talk through concerns to make sure they really understood what the issue was and then agreed a plan of action.

### End of life care and support

• Sugarman Health and Wellbeing supported people at the end of their life according to their wishes and preferences. People were supported to stay in their own home at end of life if they chose to do so and extra support was provided as needed from specialist services such as Hospice nurses. Care workers knew how to support people at the end of their life.

### 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.

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

- The registered manager had a good understanding of their responsibilities towards the people they supported and had a passion for delivering person-centred care.
- People and relatives told us they found the registered manager professional and organised. One relative said, "Overall we are very satisfied, and would recommend Sugarman Health and Wellbeing to others. Another relative told us, "I would unreservedly recommend Sugarman Health and Wellbeing to people looking for care in their own home because the care workers provide a consistently good service."

• Relatives and external professionals told us the service delivered good outcomes for people. An external professional told us about a specific case where Sugarman Health and Wellbeing had sourced and trained care workers to support a young person to leave the hospital environment after a long period and return home. The professional told us, "In my opinion, Sugarman Health and Wellbeing provide a service that is safe; effective; caring; responsive and well-led." And, "We have always been most happy with their work."

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 had a clear understanding about the duty of candour and told us they encouraged care workers to be open and honest in their feedback.
- The provider and registered manager had a system of monitoring across key areas to help ensure people received a safe and effective service. This included oversight of areas including supervision, training, risk assessments, feedback from people who used the service and safe management of medication.

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

- Care workers feedback was sought via satisfaction surveys and face to face meetings with the management team. Care workers were positive about working for Sugarman Health and Wellbeing and stated they would recommend the service to other care workers.
- Regular feedback about the quality of the service provided was gathered from people and their relatives. The provider undertook a national survey and the resulting feedback was analysed for trends and then shared with individual branches for any action needed.

Continuous learning and improving care

• Learning was taken from incidents to improve people's experience of care.

• The registered manager was a member of a local care provider's association. They had arranged training for themselves and the care team and attended some local business network meetings to help keep themselves up to date with changes in the care sector and legislation.

Working in partnership with others

• The registered manager often worked with other professionals to achieve good outcomes for people. For example, clinical teams, social working teams, community nurses, occupational therapists, GPs and dentists.

• Health and social care professionals gave positive feedback about the high level of professionalism demonstrated by the service. One professional said, "I am able to contact them with ease and they are responsive to requests and communicate any issues or seek guidance appropriately."