

Leeds Jewish Welfare Board

Moorcare

Inspection report

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Date of inspection visit:
05 July 2022

Date of publication:
22 July 2022

Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Moorcare is a domiciliary care service providing personal care to people in their own homes. At the time of inspection, the service was providing personal care to 55 people. Not everyone who used the service received personal care. CQC only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do, we also consider any wider social care provided.

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

Staff were trained to recognise potential risks and signs of abuse. Risks to people's safety and wellbeing were assessed and reviewed by managers. Staffing levels were safe and reviewed regularly by managers. The provider managed medicines safely. Staff used personal protective equipment (PPE) appropriately when supporting people.

Managers ensured systems were in place to monitor the running of the service. The provider had procedures in place to receive feedback on how to improve support. Managers audited support records, including accidents and incidents to assure themselves of quality. Lessons were learned when concerns were raised, and these outcomes were communicated to staff. Staff worked well in partnership with other agencies to deliver effective support.

People were supported to have maximum choice and control of their lives. Staff supported them in the least restrictive way possible and in their best interests; policies and systems supported this practice.

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

Rating at last inspection

The last rating for this service was good (published 05 October 2018).

Why we inspected

We undertook this inspection as part of a random selection of services which have had a recent Direct Monitoring Approach (DMA) assessment where no further action was needed to seek assurance about this decision and to identify learning about the DMA process.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating. The overall rating for the service has not changed. This is based on the findings at this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Moorcare on our website at www.cqc.org.uk.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

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.

Moorcare

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 Health and Social Care Act 2008.

Inspection team

This inspection was carried out by an 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

Moorcare is a domiciliary care agency. It provides personal care to people living in their own houses and flats.

Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. This means they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

At the time of our inspection there was not a registered manager in post. A new manager had been appointed in March 2022 and they were in the process of registering with CQC.

Notice of inspection

We gave the service 24 hours' notice of the inspection. This was because it is a small service and we needed to be sure the provider or manager would be in the office to support the inspection.

What we did before the inspection

We sought feedback from the local authority and professionals who work with the service. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements

they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with the manager, the nominated individual, the head of care manager, the resource planner, and seven support staff. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

We spoke with three people receiving support and four relatives. We reviewed five people's care records. We reviewed records and audits relating to the management of the service. We asked the manager to send us documents before and after the on-site inspection. These were provided in a timely manner and this evidence was included as part of our inspection.

Is the service safe?

Our findings

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

At our last inspection we rated this key question Good. The rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- The provider ensured systems were in place to protect people from the risk of harm.
- Staff received safeguarding training and knew how to recognise signs of abuse and how to report concerns.
- Managers told us systems allowed transparent investigations. Findings were escalated to the provider for analysis, so changes could be made to reduce the risk of abuse. One manager said, "We have a service champion who reviews all concerns and shares lessons learned with staff."

Assessing risk, safety monitoring and management

- Managers identified risks to people's safety and implemented procedures to manage them.
- Staff were trained to meet people's needs and to promote their safety.
- Relatives told us people were safe from harm. One relative said, "My [relative] feels safe and supported. Moorcare is far superior to providers we have experienced in the past. As far as I'm concerned it could not get any better."

Staffing and recruitment

- The provider had safe recruitment processes to ensure staff were suitable to support vulnerable people.
- There were enough staff to meet people's needs. Managers reviewed staffing levels and made changes when required.
- People told us they felt staffing levels kept them safe. One person said, "I am very pleased with my carers and happy with their care. They always arrive on time and look after me really well. I think there are enough staff."

Using medicines safely

- Medicines were managed safely by trained and competent staff.
- People's preferences were recorded, and staff knew how they wished to be supported with their medicines.
- Medicines records were audited monthly and spot-checks ensured staff were administering medicines safely. One manager said, "We review [medicines] records to make sure people are safe. Support plans are updated with changes so people receive the right support."

Preventing and controlling infection

- Staff protected people from the risk of infection. The provider had sufficient stocks of PPE and COVID-19 testing kits. Staff understood the protocols for wearing PPE appropriately when supporting people, and

when visiting the office.

- People and their relatives confirmed staff followed appropriate infection control measures, such as hand washing and wearing PPE when supporting people with personal care.
- Additional training had been completed by staff in the donning and doffing of PPE and government updates had been communicated to staff, which they confirmed.

Learning lessons when things go wrong

- Managers recorded and investigated concerns in a timely manner to keep people safe.
- Lessons were shared with staff to reduce the risk of issues reoccurring and to improve the quality of care provided.
- People said they knew how to raise a concern. One person told us, "I feel safe, I am happy with my staff; I think they do their best. If I was not happy, I know who to speak to. I have no complaints or issues."

Is the service well-led?

Our findings

Well-led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

At our last inspection we rated this key question requires improvement. At this inspection the rating has changed to good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

At the time of inspection Moorcare did not have a manager registered with the Care Quality Commission. A registered manager and the provider are legally responsible for how the service is run and for the quality and safety of the care provided. The previous registered manager had left, and their replacement was in the process of completing the registration process.

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

- Managers and staff worked together to assess and monitor people's support needs.
- The provider had made improvements in record keeping and providing staff with clear lines of accountability. This allowed managers to review records and make improvements to meet people's needs.
- Changes had been made to auditing processes to allow for clear support reviews and accountability. One manager said, "We work with staff to raise awareness of [the provider's] vision and values to make sure we provide inclusive support. Staff are good at raising concerns straight away so we can resolve them."

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

- Managers ensured people were at the centre of their support by providing staff trained to meet their needs.
- Staff knew how people preferred to be supported because support plans recorded their needs and wishes.
- People told us they were in control of their support. One person said, "I am happy with the care I receive. I am quite independent, and staff are supportive of this. I have no complaints. I would definitely recommend this service."

How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong

- The provider had transparent processes for investigating concerns.
- People felt comfortable raising concerns with managers and were confident they would be listened to.
- People and relatives were listened to, and concerns were addressed to improve outcomes. One relative told us, "As far as I am concerned, things run smoothly now. We had concerns in the past, but they have been rectified. The staff are lovely, and [my relative] gets on with them really well."

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

- The provider received regular feedback from people, relatives and staff to improve the quality of support to meet people's needs.
- People reviewed and commented on their care records and spoke to managers when they needed their support to change.
- People said recent changes in management had improved communication. One person told us, "I think the service is well managed [now]. The management has changed, and things have improved."

Continuous learning and improving care

- The provider had clear processes in place for monitoring support and highlighting areas of improvement.
- Managers shared good practice and lessons learned with staff and reviewed support needs when they changed to ensure staff met people's support outcomes.
- Managers were open to being contacted and made changes to improve support following concerns. One relative said, "Staff are well organised. When I have concerns, I contact the manager and it is quickly sorted out to my satisfaction. I am very happy with the service my [relative] receives."

Working in partnership with others

- Staff worked closely with health professionals to meet people's support needs.
- The provider had strong links with the local community, and this enabled staff to support people's emotional and cultural needs.
- Managers had close links with the Leeds Jewish community. One manager said, "We work with community leaders to ensure the people we support are able to attend synagogue. Staff will support people to observe religious events."