

Foremost Care UK Limited

Foremost Care UK Limited

Inspection report

22 Cannon Hill
Southgate
London
N14 6LG

Tel: 02039046641

Date of inspection visit:
18 August 2021

Date of publication:
21 September 2021

Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service responsive?

Good ●

Is the service well-led?

Requires Improvement ●

Summary of findings

Overall summary

About the service

Foremost Care UK Limited provides personal care services to people in their own homes. At the time of our inspection 28 people were receiving a personal care service.

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

People and relatives told us they were extremely happy with the care and support they received because they felt safe and all their needs were met by kind and caring staff.

People and their relatives felt fully involved in their assessments of risks and needs. Care plans supported the service to identify people's needs and risks. In some areas, more information was needed to manage risks to people's safety. We have made a recommendation about this.

People had access to healthcare services and were involved in decisions about their care. Partnerships with other agencies and health professionals enabled effective outcomes for people. Staff supported people to take medicines safely.

Staff understood the actions needed to minimise the risk of avoidable harm including the prevention of avoidable infection. Staff had completed safeguarding training and understood their role in identifying and reporting any concerns of potential abuse or poor practice.

People and staff praised the managers of the service and agreed that they were approachable, knowledgeable, fair and did their job well. The staff team worked well together and supported the manager.

The staff team was committed to providing a high-quality service. They had undertaken training so that they were skilled and knowledgeable to effectively meet people's needs.

Staff encouraged people to be as independent as possible and respected people's privacy and dignity. Staff knew people well. The service followed safer recruitment practices. There were enough staff to meet people's care needs and there were systems in place to allocate and deploy staff safely. People and staff told us that staff worked consistently with the same people and got to know their needs and preferences.

People were given choices about the way in which they were cared for. Staff listened to them and knew their needs well. People told us that staff were able to meet their needs and were respectful of their individual preferences.

People confirmed the service did not miss any care calls and that staff were usually on time. .

People told us that day to day issues they raised would be quickly resolved. Where issues had been raised with management, they had taken action to address the concerns.

Staff we spoke with felt well supported in their roles. They told us they had clear guidance and the registered manager was always available if they had any queries. Staff spoke highly of the management and support they gave staff during the pandemic.

The provider had systems in place to monitor and improve the quality and safety of the service provided.

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 24 December 2019).

Why we inspected

We received concerns in relation to the management of complaints. As a result, we undertook a focused inspection to review the key questions of safe, responsive and well-led only. We reviewed the information we held about the service. No areas of concern were identified in the other key questions. We therefore did not inspect them. Ratings from previous comprehensive inspections for those key questions were used in calculating the overall rating at this inspection.

The overall rating for the service has remained good..

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Good ●

The service was safe.

Details are in our safe findings below.

Is the service responsive?

Good ●

The service was responsive.

Details are in our responsive findings below.

Is the service well-led?

Requires Improvement ●

The service was not consistently well-led.

Details are in our well-led findings below

Foremost Care UK Limited

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 planned this inspection 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.

Inspection team

The inspection team consisted of two inspectors 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

Foremost Care UK Limited is a domiciliary care agency. It provides personal care to people 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 carried out the inspection visit on 18 August. It was announced. We did this because the manager is sometimes out of the office supporting staff or visiting people who use the service. We needed to be sure that they would be available at their office .

What we did before inspection

We reviewed information we had received about the service since the last inspection. 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 went to the service's office and spoke with the registered manager and four care staff. We looked at five people's care records and three staff records; we also looked at various documents relating to the management of the service.

After the inspection

We spoke to ten relatives and three people who used the service.

Is the service safe?

Our findings

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

At the last inspection this key question was rated good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management;

- Care plans and risk assessments contained information about people's individual circumstances, what was important to them, as well as the care and support they needed. However, some lacked enough detail in relation to cultural needs, although staff we spoke to clearly had understood people's cultural and religious needs.
- A staff member told us "I have a Muslim client, I put on shoe covers, I don't want to be disrespectful."
- Some records lacked specific detail on how to mitigate and manage risks to people. There was no risk to people as staff knew how to mitigate these risks and the service was small. The registered manager told us they would review all risk assessments immediately after the inspection..
- Everybody we spoke with confirmed that a risk assessment had been undertaken prior to them receiving a service. Comments from people included, "The carers treat Dad very well; he is comfortable with the carers and he feels safe. Risk assessments have been carried out. They looked around his home to make sure everything was safe" and "Risk assessments were done for Mum's safety. The manager came and had a look around to make sure the environment is safe."

We recommend the provider seeks appropriate guidance to support the recording of risk management and update their practice accordingly.

Systems and processes to safeguard people from the risk of abuse

- People were protected from the risk of abuse.
- The provider had safeguarding policies and procedures in place, which staff were aware of. The management team had oversight of any concerns raised and took action to minimise risks to people, as well as liaising appropriately with other professionals.
- People and their relatives felt the service was safe. Comments included, "My uncle likes the carers who look after him, he always feels safe in their care. When he became involved with the service, they did visit his flat regarding risk assessments and they constantly review the situation " and " My father is safe when the carers visit, he is very satisfied with the way they look after him."

Staffing and recruitment

- The service followed a recruitment policy so that they were as sure as possible that people were suitable to work at this service. They carried out checks, such as criminal record checks and references.
- People were supported by enough staff to meet their needs. Staffing arrangements provided the flexibility to meet people's changing needs whilst ensuring consistent care. Everyone we spoke with confirmed that they had regular care workers which gave them continuity in their care. People also recognised that some

changes in staff were unavoidable due to sickness and holidays.

- People described the staff as reliable and confirmed that they had not had any missed calls and that staff stayed for the agreed length of the visit and only left earlier if asked to do so.
- People and their relatives told us they knew the staff well and had built good working relationships with them. A person using the service told us, "I am very happy with my carers and I am very safe. I have one regular carer who is wonderful."

Using medicines safely

- People received their medicines when they were needed and in ways that suited them. There were systems in place to ensure this was done safely.
- People had their medicines administered by staff who had completed safe management of medicines training and had their competencies checked regularly.

Preventing and controlling infection

- The agency had systems in place to make sure that infection was controlled and prevented as far as possible.
- Staff had undertaken training and were fully aware of their responsibilities to take appropriate measures to protect people from the spread of infection.
- Staff had access to personal protective equipment (PPE), for example, gloves and aprons. This helped to minimise the risk of infections spreading. A relative told us, "The carers have kept Mum safe throughout the pandemic as they have always worn full PPE when entering the house and they have followed hygiene rules such as washing hands."
- The registered manager ensured staff took part in weekly testing for COVID-19.

Learning lessons when things go wrong

- The service had a system in place to monitor incidents and understood how to use them as learning opportunities to try and prevent future occurrences .

Is the service responsive?

Our findings

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

At the last inspection this key question was rated good. At this inspection this key question has remained the same

This meant 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 received personalised care and support specific to their needs and preferences. People and their relatives told us they were happy with the care and support provided and everyone we spoke with told us that they had been fully involved in the care planning process.
- A relative told us, "I was fully involved in the process of putting together Mum's care plan. We had a Zoom meeting as the meeting had to take place during COVID. I was orchestral in organising the plan, and they listened to me and did what I asked for."
- Staff confirmed they checked people were happy and had everything they needed before they left them.
- Care plans reflected people's health and social care needs and demonstrated that other health and social care professionals were involved.
- Care plans gave staff detailed guidance so that staff knew each person's individual likes and dislikes.
- When people's needs changed this was quickly identified and prompt, appropriate action was taken to ensure people's wellbeing was protected.

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.

- Where people had specific needs relating to the way in which they communicated, or the support required around their communication, this was recorded within the person's care plan.

Improving care quality in response to complaints or concerns

- The service had successfully responded to a recent ombudsman judgement which had found that the service had not adequately responded to a complaint; as a result they had also improved their complaints procedure .
- A robust complaints procedure was now in place and the managers of the service had received training from an external consultant.
- People were given information about the service and how to complain when they first started to receive support from the service.
- People told us they knew how to complain if they needed to and felt confident that they would be listened to.
- The complaints procedure explained how to make a complaint and set out how people could expect any

concerns or complaints to be dealt with.

- Complaints were acknowledged, investigated and resolved in line with this policy.
- One person told us, "I have never had any need to complain about the service, I am very happy with everything they do."

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 the last inspection this key question was rated good. At this inspection this key question has deteriorated to requires improvement.

This meant the service management and leadership was inconsistent. Leaders and the culture they created did not always support the delivery of high-quality, person-centred care.

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

- The registered manager was not always clear about their roles and responsibilities.
- Systems to manage quality within the service were not always robust. Recording issues relating to risks to people we found during the inspection had not been picked up as there were not adequate quality assurance systems to include regular checks on risk, and people's cultural and religious needs had not been recorded in their care records.

We recommend the provider seek reputable advice and guidance to ensure their quality assurance systems are effective.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; 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 service promoted a positive culture and achieved good outcomes for people using the service.
- Comments from people and their relatives included, "The service is well managed, the timing of visits is good, the quality of carers pleases me, and the managers keep me informed" and "I feel the service is well managed. The office is easy to contact, and they contact me when they must. The manager is very accommodating, amicable and professional. They have responded to small concerns very quickly. I am happy with the service."
- Staff were happy in their work and felt supported by the management team. Regular supervisions and meetings were completed continuously to promote staff development and make improvements within the service.
- The ombudsman had informed us that the provider had not met their duty of candour in one instance, however they have since learned from this and the registered manager now demonstrated a good understanding of their duty of candour.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- The management team visited people during care calls to gather feedback from people and relatives on

their experiences of the service.

- Regular telephone monitoring was also taking place.
- People and relatives were extremely complimentary about all aspects of the service.
- Staff felt extremely supported by the registered manager. Staff told us communication was very good especially during the period of the pandemic .
- We saw evidence in care plans and care records of regular contact with health professionals.

Continuous learning and improving care

- The number of missed calls were kept to a minimum by regular audits and an Electronic Call Monitoring system. Everybody we spoke with told us they had not had any missed calls.
- There was evidence of learning from incidents. Investigations took place and appropriate changes took place.
- People and staff told us the registered manager was very approachable and that they would have no hesitation in raising concerns or making suggestions.