

Evolving Care Limited

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Inspection report

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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

Evolving Care Limited is a domiciliary care service, providing personal care to up to 140 people. The service was providing care to 80 people at the time of the inspection. It provides a service to older people, young disabled adults and children. The service also offers short term 'rapid cover' to people requiring emergency care and support until long term service provisions are found. Not everyone who used the service received personal care. The Care Quality Commission only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do we also consider wider social care provided.

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

People told us they felt the service was safe. The service had safeguarding policy and staff had received training and knew what signs of abuse to look out for. Staff recruitment was robust and staff told us they had an induction. People were supported to take medicines safely.

Peoples needs were assessed in line with current guidance and people's preferences, religious and cultural aspects were incorporated into care plan. People felt happy with the skills of the carers. Staff told us they had regular supervision and annual appraisals. Staff worked with health professionals as needed to support people's needs.

People gave positive feedback about the care they received and the positive staff attitude. There was evidence to show people were involved in the care planning and reviewing of the service provided to them. People told us their privacy and dignity were always respected.

We saw care plans reflected peoples' individual needs and risk assessments were person-centred, staff knew these. The service had a complaint policy and procedure and we saw complaints were dealt with in line with the policy. We also saw the service had received many compliments.

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

The management team were open and transparent during the inspection and responded to any requests made. People and staff were involved in the service through surveys and team meetings. The service had an effective quality assurance system in place to monitor and improve key aspect of the service. There was evidence of partnership working with health and social care professionals supporting people's needs.

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 requires improvement (published 19 July 2018).

Why we inspected

This was a planned inspection based on the previous rating

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 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.

Evolving Care 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 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 team consisted of two inspectors and an Expert by Experience who contacted people and relatives who used the service.

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

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

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 inspection was announced.

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. When we spoke to the registered manager she was on annual leave in America and unable to take part in the inspection. The inspection was supported by the deputy manager and operations manager. The registered manager told us we could contact her on the day of the inspection if we required information, however this was not required.

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. We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all of this information to plan our inspection.

During the inspection

We spoke with six people who used the service and nine relatives about their experience of the care provided. We spoke with five members of staff including the deputy manager, operations manager, senior carer and care staff.

We reviewed a range of records. This included three people's care records and multiple medication records. We looked at two staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection

We continued to seek clarification from the registered manager to validate evidence found. We spoke with two professionals who knew the service well.

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 on 23,24 and 29 May 2019 we asked the provider to make improvements to staff recruitment policy practices and to the recording of medicines. These actions had been completed.

This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People told us they felt the service was safe, one person said, "I feel good and safe with my carers when they visit."
- The service had safeguarding policy and records showed staff had received training in safeguarding of adults and children
- Staff understood the signs of abuse they needed to be aware of and knew how to raise concerns.

Assessing risk, safety monitoring and management

- Risks to people were assessed and regularly updated.
- Within people's care plans explanations provided staff with steps they needed to take to keep people safe.
- Environmental checks were taking place to support safety in peoples' homes. The service had a lone worker policy and out of hours support for staff to access.

Staffing and recruitment

- People had mixed opinions about the timing of visits. One person said, "They are late sometimes but always arrive and never rush me." Another person said, "No not always on time, however I appreciate they need to attend other calls so it is difficult in the time frame , I have no problems when they are delayed as they are assisting others. When they are here , they do a grand job." The service told us that staff punctuality was monitored and a call monitoring system was in place to highlight late calls.
- Staff recruitment was undertaken safely, processes were in place to check that people were of suitable character and had suitable experience. Disclosure and baring service (DBS) checks were completed prior to staff starting work and where appropriate risk assessments were in place. DBS helps employers make safer recruitment decisions.

Using medicines safely

- People were supported to take medicines safely.
- Staff had received medicine training and competency checks were taking place.
- Medicine audits were taking place.

Preventing and controlling infection

- Safe infection control practices were supported, the service had policy and procedures around infection control.

- Staff received training and confirmed they received Personal Protective Equipment such as gloves and aprons for their roles, which protected people from infection.

Learning lessons when things go wrong

- Lessons learned processes were in place to support future learning.
- Accident and incidents were recorded and lessons learned were feed back to staff at team meetings and through staff supervision.

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.

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

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 in line with current guidance. People's preferences and cultural/religious needs were incorporated into care plans.
- Care reviews took place on a regular basis and people told us they felt involved in the process.

Staff support: induction, training, skills and experience

- People told us they felt happy with the skills of the carers and the carers met their needs. One person told us, "I am happy with their professional work, they are well trained and polite."
- All new staff completed an induction and staff were supported to complete the care certificate. The care certificate is an identified set of standards that social care workers address in their daily working lives.
- Staff told us and documentation supported, ongoing training was taking place which supported their role. Staff told us they were receiving regular supervision and yearly appraisals.

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

- People told us staff supported them with their nutritional needs where it was requested.
- Care plans to support specific dietary requirements were in place to support staff in this role.
- Staff had undertaken a basic food hygiene course.

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

- Staff worked closely with other health professionals as needed to support people's needs. We saw evidence of other professionals contact details in care records.
- A healthcare professional we spoke with said the service was effective and sought advice in a timely way for people they were supporting.

Adapting service, design, decoration to meet people's needs

- The offices were well presented, clean and tidy and had ample space, which promoted privacy for people when they visited the office. Staff made use of the office building as several staff came into the office on the day of the inspection. The premises had room to undertake staff training.

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. At the time of the inspection no one using the service was subject to any authorisations under the Court of Protection.

- The service was working within the principles of MCA.
- People told us staff gained consent prior to undertaking any caring activities, staff respected people's decisions. One person said, "She explains everything, seeking my permission first."
- Records evidenced consent for care had been signed by the right person.

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.

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

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

- The service was caring. People we spoke with gave positive feedback stating they were treated with kindness and were positive about staff's attitude. One person said, "I appreciate the fact that the staff actually care and will go out of their way to help me." Another person said, "They [staff] do look after me and address all my needs." One relative said, "The girls do a great job for my relative, we are very happy with them."
- The provider had policy and procedures supporting equality and diversity, staff reported and records stated, they had training in equality and diversity.

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

- There was evidence to show people and relatives, where appropriate, were involved in care planning and reviewing the service provided to them.
- People we spoke with confirmed that they felt listened to and involved in their care. One person said, "When I need to change things or highlight a problem the staff are very understanding."
- Advocacy information was provided to people. Advocacy seeks to ensure that people are able to have their voice heard on issues that are important to them.

Respecting and promoting people's privacy, dignity and independence

- People told us their privacy and dignity was respected. One person said, "I am well looked after my dignity and privacy are always respected." Staff told us how they would promote peoples' privacy and dignity, such as by ensuring bedroom curtains and doors were closed and people were covered during personal care.
- People were encouraged to be as independent as possible in their day to day lives, such as by encouraging people to do aspects of care they could do by themselves whilst supporting them in other ways.

Is the service responsive?

Our findings

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

At the last inspection on 23,24 and 29 May 2018 we asked the provider to make improvements in supporting peoples' needs as documented in their care plan. This action had been completed.

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

- Care was planned around people's individual needs and preferences. We saw people's care plans reflected their individual needs and risk assessments were person centred and staff knew this information. One person told us, "I do make changes to my care plan as and when required." Another person said, "They [staff] know my care needs very well."
- Staff we spoke with told us they were made aware of any changes to peoples care plans.

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.

- People had care plans around communication needs.
- If people needed information in other formats such as large print, this would be arranged by the service.

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

- The service supported people to avoid social isolation, and made referrals to services such as Age UK or contact the elderly to support people's needs.

Improving care quality in response to complaints or concerns

- The service had a complaints policy and procedure. We also saw a number of compliments.
- Complaints were logged and investigated, this gave the service a clear oversight of people's views.

End of life care and support

- At the time of the inspection no one was receiving end of life care, however they had done so previously. The registered manager told us they work closely with health care professionals and followed guidance provided to ensure people received the right support.
- A health professional stated where the service had supported people at the end of life, they had done so in a professional and kind way. The service appropriately contacted healthcare services at times when peoples' needs changed.
- Staff had received end of life training.

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 on 23,24 and 29 May 2018 we asked the provider to make improvements to the oversight of the service. This action had been completed.

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 service had established a positive culture that promoted person-centred care and was open and inclusive. The service ensured people's records were person-centred and which reflected their preferences and people were involved in their care planning.
- The staff told us they were happy working for the service and felt supported to provide person-centred care.

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

- During the inspection the management team were open and transparent with requests made.
- The service understood the duty of candour and had been open with people when incidents had occurred. The staff had sent us notifications of significant incidents as required. These showed information had been shared with relevant people when incidents had occurred.
- The service had a policy on duty of candour.

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

- The service had arrangements in place to ensure the effective management of the service.
- There was an experienced registered manager, deputy manager and operations manager and staff were allocated areas of responsibility.

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

- People told us they were involved in care reviews on a regular basis.
- Surveys and views were obtained from people who used the service.
- Staff meetings regularly took place, spot checks were completed on staff to monitor their performance and checks care was being delivered safely.

Continuous learning and improving care

- Effective quality assurance systems were in place to monitor key aspects of the service, checks and audits

were completed regularly by the registered manager and senior care staff.

- Surveys were sent out to people and family members as a way to gather people's views about the service.

Working in partnership with others

- There was evidence of partnership working with health and social care professionals to ensure people's needs were being met. Referrals had been appropriately made to other agencies to support the needs of people.