

Sevacare (UK) Limited

Sevacare - Hall Green

Inspection report

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Date of inspection visit:
29 June 2016

Date of publication:
29 July 2016

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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

We undertook an announced inspection on 14 January 2016. We gave the provider 48 hours' notice of our intention to undertake an inspection. This was because the organisation provides a domiciliary care service to people in their homes and or the family home; we needed to be sure that someone would be available at the office.

Sevacare Hall green is registered to provide personal care and support to people living in their own homes. The provider registered this service with us to provide personal care and support for people with a range of varying needs including dementia, who live in their own homes. At the time of our inspection 390 people received support with personal care.

There was a registered provider for this service. A registered provider is a person who has registered with the Care Quality Commission to manage the service. Registered providers and registered managers 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 and their relatives said they were well supported by the staff and the management team. They told us staff were caring and treated them with dignity and respect. When identified as part of their care planning, people were supported to eat and drink well. Relatives told us they were always involved as part of the team to support their family member. People and their relatives told us staff would access health professionals as soon as they were needed.

Staff we spoke with recognised the different types of abuse. There were systems in place to guide staff in reporting any concerns. Staff were knowledgeable about how to manage people's individual risks, and were able to respond to peoples' needs. People were supported to receive their medicines by staff who were trained and aware of the risks associated with them. Staff really knew people well, and took people's preferences into account and respected them. The management team were adaptable to changes in peoples' needs and communicated changes to staff effectively.

Staff had up to date knowledge and training about how to support people. Staff ensured people gave their consent to the support they received. The management team took appropriate steps to ensure when people were supported with decisions these were done in their best interest.

People and their relatives knew how to raise complaints and were confident action would be taken when needed. The management team had arrangements in place to ensure people were listened to and action taken if required. Staff were encouraged to be involved in regular meetings to share their views and concerns about the quality of the service.

The management team monitored the quality of the service. The registered provider had systems in place to identify improvements and action them in a timely way.

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

People benefitted from support received from regular staff that knew their needs and managed their identified risks. Staff were aware of how to identify risks to people's safety. People were supported to have their medicines.

Is the service effective?

Good ●

The service was effective

People were supported by staff who knew how to meet their needs. Staff received support and training they needed to provide effective care for people. People received support from staff that respected people's rights to make their own decisions, where possible. People were supported to access health care when they needed to.

Is the service caring?

Good ●

The service was caring

People benefitted from caring, knowledgeable staff who provided support in an inclusive way. Staff respected peoples' dignity and their right to make decisions for themselves. They encouraged people to remain as independent as possible.

Is the service responsive?

Good ●

The service was responsive

People and their families were involved in their care and support, which was regularly reviewed. People benefitted from care that was adaptable to their needs. People and their relatives were confident that any concerns they raised would be responded to appropriately.

Is the service well-led?

Good ●

The service was well-led.

People, relatives and staff felt supported by the management

team. The culture of the service was to focus on each person and their needs and support them as part of a team. There were systems in place to drive improvement to the quality of care provided.

Sevacare - Hall Green

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.

This was an announced inspection which took place on 29 June 2016 by one inspector. The provider was given 48 hours' notice because the organisation provides a domiciliary care service and we needed to be sure that someone would be available.

We looked at the information we held about the provider and this service, such as incidents, unexpected deaths or injuries to people receiving care, this also included any safeguarding matters. We refer to these as notifications and providers are required to notify the Care Quality Commission about these events.

We asked the local authority if they had any information to share with us about the services provided by the service. The Local Authority are responsible for monitoring the quality and funding for some people who use the service.

We spoke with 14 people, and 16 relatives. We spoke with 17 staff and the deputy manager. We spoke with the registered manager and the care services director. We also spoke with two social workers that supported people using this service.

We looked at the care records for 14 people including medicine records. We also looked at complaint files, minutes of meetings with staff, and quality checks on aspects of the service which the registered manager and the provider completed.

Is the service safe?

Our findings

People we spoke with said they felt safe because they had support from regular staff who knew them well. One person said about the staff, "They are all good, they all know me well, and we have a laugh and a joke." Another person told us, "I always have regular [staff], I always know who is coming." Relatives we spoke with said they had regular staff to support their family member and they were satisfied with the service. One relative told us, "They are an excellent service, it is a real comfort to have them supporting [family member]." People explained they were supported by staff who always provided support in a safe way.

People told us that staff arrived promptly to support them with their needs. Staff and the registered manager said they had enough staff to meet the needs of people using the service. The registered manager told us they had a rolling recruitment campaign to ensure there was always enough staff available. People told us small teams of staff supported them and whilst not all of them always knew exactly who was coming they were happy with whomever came. Staff told us they had regular calls and they provided continuity of care. They knew how important it was to people that they knew the staff coming to their home.

Relatives told us their family member received care that improved their safety and received the support they needed. They said staff supported their family member's well-being. One relative explained how they contacted by one member of staff when the service first started. They went on to say how reassuring this was for them to know their family member was safe.

The management team explained their responsibilities to identify and report potential abuse under the local safeguarding procedures. All the staff we spoke with had a clear understanding of their responsibility to report any potential abuse and who they could report it to. They told us training on potential abuse and safeguarding concerns formed part of their induction and was regularly updated. This was also discussed in team meetings to support staff knowledge.

People and their families told us staff had discussed their care needs with them. This included identified risks to their safety and welfare, for example supporting with administering medicines, and supporting people to mobilise. One person said, "We talked about everything at the beginning and they keep me safe." Staff gave examples of how they managed risks to people while maintaining people's independence where possible. For example, one member of staff explained how they encouraged one person to be more independent when they visited. They gave them time to relearn skills after an accident whilst monitoring their safety. Staff we spoke with said they always read people's care plans and looked at the daily notes so they were aware of what support the person needed and how they had been supported. One member of staff said, "We always check what has happened in the daily notes, and speak with each other to share updates." Staff had a good understanding of these identified risks, and how they reduced them. These were reflected with in people's risk assessments.

Staff we spoke with explained about the checks completed by the provider to ensure staff were suitable to support people before they started work at the service. They said they completed application forms and were interviewed to assess their abilities. The provider checked with staff members' previous employers and

with the Disclosure and Barring Service (DBS). The DBS is a national service that keeps records of criminal convictions. The registered manager used this information to ensure people using the service were not placed at risk through recruitment practices.

Some people said they needed support with their medicines. This was discussed with them and they were included in decisions about how they were supported. One person told us "They help me with my medicines; I don't have to worry about it anymore." We saw people's plans guided staff in how to support people with their medicines. Staff told us they had received training and their competency was assessed so they felt confident when administering medicines to people. We saw there were regular checks on staff and records to ensure people received their medicines as prescribed. When concerns were found staff told us appropriate action was taken.

Is the service effective?

Our findings

People we spoke with said staff knew how to support them. One person told us about staff, "They know what they are doing, how to help me." Another person said, "They are well trained, and know what they are doing." A relative said, "They would always sort anything to make sure everything is ok." One social worker we spoke with told us that staff were very knowledgeable about supporting people.

Staff told us that they had received an induction before working independently with people. This included training, reading people's care plans, as well as shadowing with experienced staff. Staff said they would not support people on their own until they were confident to do so. They told us they were regularly assessed to ensure they supported people appropriately. Staff said this was very supportive and enabled them to be confident about what they were doing. They also told us they were prepared and had received training in all areas of care delivery. They were encouraged to complete training to improve their skills on a regular basis.

Staff we spoke with said they felt well supported and had regular supervisions. One member of staff told us how they had completed pressure sore specific training. They now felt they were better equipped to notice the early signs and raise concerns promptly when supporting people. They also said they would always share best practice with other staff to ensure they all had a broad knowledge base. Staff explained that they were encouraged to complete their vocational training, which acknowledged their skills and ability.

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 told us staff always checked that they were happy to be helped. One person said, "They always check with me its ok before they do anything." One relative told us about staff, "They always work with [family member] to encourage them to do things." Staff we spoke with told us they were aware of a person's right to accept or refuse care. They had an understanding of the MCA, and had received training about this. Staff told us they always ensured that people consented to their care. Staff were aware of who needed support with decision making and who would be included in any best interest decisions for people. The registered manager had an understanding of the MCA and was aware of her responsibility to ensure decisions were made within this legislation. For example, where people lacked capacity a best interest decision had been made that involved other professionals where needed.

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. We checked whether the service was working within the principles of the MCA. Any applications to deprive someone of their liberty for this service must be made through the court of protection.

The registered provider had not made any applications to the Court of Protection for approval to restrict the

freedom of people who used the service. They were aware of this legislation and were happy to seek advice when they needed to.

Some people we spoke had help with shopping, cooking and meal preparation as part of their care needs. They told us they were offered choice and encouraged to maintain a healthy diet. One member of staff explained that one person needed to be encouraged to eat. They went on to say how they tried different meals to tempt this person to eat. This was clearly documented in the person's care plan. Staff knew what level of support each person needed.

People told us they received support with their all aspects of their health care when they needed it. One person said, "They will call the doctor if I want them to, they will always help with anything." Relatives told us staff always contacted them if their family member was unwell. One relative explained how their regular carer was always quick to let them know if there were any concerns, which was very reassuring for them. Staff had involved other health agencies as they were needed in response to the person's needs. For example, staff told us would call the district nurses if a person had sore skin. We saw each person had their health care needs documented, and staff could describe how they met those needs. A social worker said staff would always raise any concerns, especially about any redness to a person's skin, to ensure people's health and well-being was monitored.

Is the service caring?

Our findings

People and relatives were very positive about the staff and the management team. One person said about the staff, "They are all really good, their company makes such a difference to me, it makes my day." Another person told us, "They are so caring; they will go above and beyond to help me." Relatives we spoke with told us they were happy with the support their family members received. One relative said, "All the staff are excellent, I couldn't ask for better, they can't do enough for [family member]." Another relative told us, "Lovely staff, our regular [staff member] even brought a present back when they went on holiday."

People said they were listened to. The management team always checked to see if the people receiving the service were happy with the support from staff. Relatives we spoke with all said they were asked if they were happy with the support their family member received. Staff told us they always supported the same people because it was so important that people knew the staff. The management team had a good understanding that people needed to build relationships with staff.

People said staff supported them to make their own decisions about their daily lives. One person told us, "I only have to say I need help with something and they will sort." Another person told us they did not know how they would manage without their support, they said, "They always go the extra mile to help me." Relatives said they were involved with their family members care planning and they felt listened to. Relatives told us that staff went above and beyond what they needed to. For example, one relative told us the staff member that supported their family member was the embodiment of what good care was all about. They said "It's a real comfort to have confidence that [family member] is ok." Another relative said the relationship between their family member and staff was more like friends, "They chat about anything." A social worker told us that in their experience staff worked really well with people and their families, keeping relatives up to date and reassuring them with the actions they took.

One relative explained how their regular staff always listened to their family member. They went onto say how their family member had been embarrassed about the support they needed. They explained how staff had worked with their family member and built up a good relationship with them which supported their family member's confidence. Their family member was no longer embarrassed, they were happy to be supported. Another relative told us how patient staff were when supporting with personal care. They went on to explain how staff never rush their family member, they encourage and coax them and work together to support them. Another relative told us their family member was supported by staff who shared a really good relationship with them. They said there was always a lot of laughter and banter which their family member enjoyed. People benefited from regular staff that really knew them well.

People said staff respected their dignity, always knocking and waiting before entering the room. One person told us, "They always show dignity and respect, they really get me." Staff we spoke with showed how they treated people as individuals and supported people to have as much choice as possible.

People's needs, preferences and how much they could do for themselves was assessed as part of the planning for their care and support. One person told us how they were encouraged to be more independent

by their regular staff. They went on to say how staff supported them to go out in the garden which they really enjoyed. Staff were aware of people's ability, and were adaptable for people whose ability may fluctuate. Staff told us the management team communicated with all of them to ensure they knew about any changes with a person's care needs.

Is the service responsive?

Our findings

People we spoke with said they were involved in planning their care. One person said, "I was asked at the beginning and they continue to check that I have all the support I need." Another person told us, "They always ask if there is anything else they can do." Relatives told us they had been asked for their information when planning their family members care. One relative said, "I am always asked if everything is working well." People we spoke with said staff understood their needs and provided the support they needed.

Staff knew about each person's needs, they said they knew people really well and right from the beginning they were given all the information they needed to support people. They could describe what care people needed and we saw this was reflected in people's care plans. We looked at care records for 14 people and could see people's likes and dislikes were recorded for staff to be aware of. People we spoke with confirmed their individual needs were met. Where more complex needs were identified, staff were aware of how to support the person. Staff told us people's care plans were updated quickly when there were changes in the support people needed, to ensure all staff were aware. They also said they were always informed by the office staff if there were any changes.

People said they felt they were supported by regular staff who spent the right amount of time with them. Staff we spoke with told us they would spend time to support people with everything they needed. People told us they received support that was flexible to their needs. For example, one person told us they had to change times on a regular basis and the office staff always arranged this for them.

People and their relatives told us they had regular reviews of the care they received. People felt able to say if anything around the support they received needed changing or could be improved. However all the people we spoke with felt that nothing needed improving.

Relatives we spoke with said they were listened to and involved in care reviews for their family member. For example six relatives we spoke with explained how the service met the cultural needs of their family member. For example providing same sex staff members, and staff who spoke their language. One relative said this had made a difference to their family member's wellbeing.

The people we spoke with said they felt comfortable to raise any concerns, and knew who to speak to. One person said, "I would be happy to speak to my carer [staff] or the office." Another person told us, "I am confident to say if I needed to but I haven't had any problems." Relatives said they were confident to speak to any of the staff if they had any concerns, or raise them with the office. One relative told us "I have never needed to complain, I called the office once but it was already sorted out."

There were clear arrangements in place for recording complaints and any actions taken. The registered manager explained how she investigated complaints and took action to put things right. Staff told us complaint learning was shared at team meetings to ensure lessons were learnt. We saw investigations were completed and there was on going monitoring to ensure improvements were made. The registered manager explained how important complaints were to acknowledge mistakes and inform continuous improvement.

Is the service well-led?

Our findings

People who used the service and their relatives told us they liked the management team and felt the service was well managed. They said someone was always available to speak with and they would take action straight away. One person said, "They manage everything well." Another person told us, "They all really listen, it's well managed." Relatives told us the service was well managed, one relative said, "It all seems to work well."

We saw people were asked to share their views about their experience of the service and the quality of their care through satisfaction questionnaires. These were then analysed and action taken when needed, to feed into a management plan. From last year's questionnaires the responses were positive and showed people and their relatives were happy with the service they received.

We spoke with the registered manager about the culture of the service. They explained that their focus was about caring for people and staff. People told us they felt listened to and involved with how their care was provided. The registered manager went on to say that in developing and supporting staff and people a system had been put in place to make it easier to report concerns. This had involved the owner of the company, because they felt so passionate about this. The registered manager said they believed in developing staff and invested time and money to achieve this. For example, one member of staff explained the registered manager had identified their skills in medicine management and was developing their role further. Staff we spoke with said the culture of the service was support for everyone, people who used the service, their families and staff. One member of staff explained that despite the size of the service they were all like one big family.

The registered provider completed regular checks to ensure the quality of care. For example we could see training and supervisions were checked regularly. The registered manager had identified where improvements were necessary, and completed an action plan to ensure these improvements were completed in a timely way. We could see that the registered manager regularly reviewed her plan to ensure it stayed the focus for her improvements.

The registered manager told us they were continually reviewing how they developed the service with the registered provider. For example, they had identified some concerns about staff missing calls and had looked at ways to reduce the risk of this happening. They explained how they were piloting a new technical system in one area which identified when a member of staff had not arrived at a person's house and flagged it with the office staff. This ensured vulnerable people's safety was monitored and supported the safety of staff whilst out visiting people.

Staff told us accidents and incidents were always reported. We saw the registered manager investigated the accidents to ensure any actions needed were made in a timely way. For example, when a member of staff had a concern when supporting one person. We saw that they were supported by the senior team and had their training updated to ensure they could support people safely. The registered provider explained that they worked with the registered manager and had an overview of all aspects of care delivery.

Staff said they were supported by the management team. They told us they could report concerns and they would be resolved quickly. One member of staff said, "All the management team are brilliant, they really listen to us, and communicate well, they always have an open door." Staff told us they had regular team meetings where they shared information and ideas. This included discussing concerns about the people they supported and how they would resolve them. For example, if someone needed extra time they would look at ways to take action. Staff told us how any compliments were always passed on, and how this made them feel valued and appreciated.