Sarmey Healthcare Limited

Sarmey Healthcare

Inspection report

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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
Sarmey Healthcare is a domiciliary care agency. It provides care for people living in their own houses and flats to enable them to live as independently as possible. 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. At the time of the inspection, 20 people were receiving personal care support.

People's experience of using this service and what we found
People told us they felt safe within the service. Staff we spoke with were trained and knowledgeable in safeguarding procedures.

Risk were assessed to minimise risks present within people's lives. Checks and monitoring processes were in place to keep people safe.

Medicines were administered safely by trained staff.

Prompt action was taken as a result of any incidents, to ensure lessons were learnt.

There were enough staff working at the service to keep people safe and meet their needs. Staff were recruited safely and trained to provide care safely.

Audits and checks were in place to ensure the service remained clean and well maintained, as well as to ensure that records were being accurately kept, and people were safe and happy.

Staff felt well supported within their roles and felt able to approach management with any concerns or requests for support.

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.

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

Rating at last inspection and update.
The last rating for this service was Good which was published on 5th April 2018.

Why we inspected
The inspection was prompted in part due to concerns received about staffing levels and recruitment procedures. A decision was made for us to inspect and examine those risks.

We found no evidence during this inspection that people were at risk of harm from this concern. Please see the safe and well led sections of this full report.

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 remains Good.

You can read the report from our last inspection, by selecting the 'all reports' link for Sarmey Healthcare 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.

Sarmey Healthcare

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 one inspector.

Service and service type
This service 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 that 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 a registered manager in post.

Notice of inspection
This inspection was announced. We gave the provider 48 hours notice to make sure someone would be in the office.

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 (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 four people who used the service about their experience of the care provided. We spoke with one relative of a person using the service, four members of care staff, and the registered manager.

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

Good

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.

Assessing risk, safety monitoring and management

● Risks within people's lives were documented and assessed to ensure they were safe. Risk assessments we looked at were mostly sufficient, but required more detail in some cases. For example, a person had been assessed as requiring a soft diet due to choking risks. The provider had followed instructions for the persons care given to them by their family members, but this required further detail and review by medical professionals to ensure the procedures were up to date and best practice for the person. The registered manager told us they would seek further detail and support immediately.

● Other risk assessments we saw were monitored and reviewed on a regular basis by the registered manager.

● Staff told us they were confident in approaching management and always received feedback to concerns they raised.

Systems and processes to safeguard people from the risk of abuse

● People felt safe when receiving care from the service. One person told us, "I am very happy with the service, there have been no issues and I feel safe."

● The provider had systems in place to safeguard people from abuse and knew how to follow safeguarding protocols when required.

● Staff had received training and knew how to recognise abuse and protect people from the risk of abuse. They understood how to report any concerns if they needed to by following safeguarding or whistleblowing procedures.

Staffing and recruitment

● Before our inspection, concerns had been raised about staffing levels and recruitment of staff. We found no concerns in this area on our inspection. Safe recruitment procedures were followed. This meant that ID checks, right to work checks, references, and Disclosure and Barring Service (DBS) checks were carried out before staff began working within the service. DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.

●Staffing levels were sufficient to meet people's needs. People told us that staff generally arrived on time and were consistent. One person said, "I see the same faces and they are on time."

●An electronic call logging system was in place to monitor staff care calls, however this was not fully functional at the time of our inspection and was not able to display correct data. The registered manager told us this was being rectified so that calls could be effectively monitored.

Using medicines safely

● Medicines were administered safely. Medicines administration records we looked at had been filled out correctly, and people told us they were happy with the support received in this area.
● The provider's electronic records allowed managers to monitor medicine administration. The system flagged any missed medicines or any errors in medicines so action could be taken if it was not given correctly.

Preventing and controlling infection
● Staff understood their responsibilities for keeping people safe from the risk of infection. They had been provided with infection control training; this included the correct use of personal protective equipment (PPE).
● Staff had enough supplies of Personal Protective Equipment (PPE) and people confirmed staff always wore their PPE. A staff member told us, "We are re-stocked with gloves and masks as and when we need them."

Learning lessons when things go wrong
● Any accidents or incidents were reported. There were systems in place to monitor incidents and accidents so action could be taken to promote people's safety.

Good

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 Good. The rating for this key question has remained Good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- Staff we spoke with were mostly positive about the support they received to carry out their roles. One staff member said, "There has been good support and good training. I am new to the role and to the country, but the support has been there."
- Some staff we spoke with told us there was conflicting information about their employment contracts, which caused them some anxiety about their roles. We spoke with the registered manager about this who clarified the situation, and said that further information would be given to staff members to ensure they understood what was expected of them as employees.
- Checks and audits were in place, and any problems were identified and acted upon promptly by the registered manager. This included spot checks on staff to check on timeliness and ability.
- Action had been taken in relation to any errors or areas identified for improvement.

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

- The registered manager and staff all had good knowledge and understanding of the people they were supporting, and knew them well. One person told us, "They took over from my old care company very swiftly, and I have been very happy with the service." Another person said, "The staff and manager are very friendly and kind, I can contact someone if I need to."
- The staff team spoke positively about people, and were motivated to achieve positive 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 registered manager was aware of their responsibility to keep people informed of actions taken following incidents in line with the duty of candour.

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

- People and relatives we spoke with felt that communication was good. People were able to feedback on the care they received both formally and informally. This included the use of a questionnaire, the responses to which were analysed by the registered manager to identify any areas for improvement.
- People felt their needs and individual characteristics were known and understood by the staff that cared

for them.

●Team meetings were held for staff to discuss updates within the service. One staff member said, "The meetings are good, we cover things like confidentiality, staff staying for the right amount of time on a care call, and safeguarding procedures."

Working in partnership with others

●The registered manager and staff were open and honest during our inspection.

●We saw the service had been working in partnership with the local authority who had looked at areas for improvement and set an action plan.