

Kare Plus Homecare Ltd

Kare Plus Homecare West Midlands

Inspection report

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Ratings

Overall rating for this service

Requires Improvement ●

Is the service safe?

Requires Improvement ●

Is the service well-led?

Requires Improvement ●

Summary of findings

Overall summary

About the service

Kare Plus Homecare West Midlands is a domiciliary care agency providing personal care and supported living services. The provider currently supports up to 53 people living in their own houses and flats and supported living services in the community. Supported living services enable people to live in their own home and live their lives 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.

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

We found improvements were needed in relation to the documents we viewed to ensure people received a safe service. It was not always possible to establish when people had needed medicine administered to them. Protocols in administration of medicines were not always in place to ensure they were administered safely and when required.

Care plans and risk assessments viewed did not always provide enough detailed personalised information to ensure staff could provide consistent safe care.

Accidents and incidents were not always discussed and reviewed to ensure learning and improvements were made to people's care.

Management systems had not identified the shortfalls in the records identified during this inspection.

The registered manager was aware of the need to inform the Care Quality Commission of certain events although it was found one notification had not been sent due to an oversight.

People and relatives spoke positively about the service and staff, saying they [staff] treat their family member well. The provider had a policy and procedure to safeguard people from abuse. Staff had received training in safeguarding and knew how to report any concerns.

People were protected from the risk of cross infection as staff had received infection control training and followed guidelines in relation to personal protective equipment (PPE) in place due to the COVID-19 pandemic.

Recruitment was undertaken safely, with appropriate background checks before staff started work.

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 12 April 2019).

Why we inspected

We received concerns in relation to the safety of people using the service. As a result, we undertook a focused inspection to review the key questions of safe 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 changed from good to requires improvement. 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 Kare Plus Homecare West Midlands on our website at www.cqc.org.uk.

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?

The service was not always safe.

Details are in our safe findings below.

Requires Improvement ●

Is the service well-led?

The service was not always well-led.

Details are in our well-Led findings below.

Requires Improvement ●

Kare Plus Homecare West Midlands

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

This inspection was carried out by two inspectors. One expert by experience telephoned relatives to obtain feedback about their experience of the care provided to their relative. 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 and supported living settings. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for supported living; this inspection looked at people's personal care and support.

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 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.

Inspection activity started on 11 March 2021 and ended on 23 March 2021. We visited the office location on 11 March 2021.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. This included details about incidents the provider must notify us about, such as allegations of abuse, and accident and incidents. We sought feedback from the local authority and professionals who work with the service. The provider was not asked to complete a provider information return prior to this inspection. 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 the registered manager. We reviewed a range of records. This included four people's care records and 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 were reviewed.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at policies and procedures, training data and quality assurance records. We spoke with three people who used the service and 11 relatives about their experience of the care provided. Additionally, we spoke with five members of care staff.

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 as good. At this inspection this key question has now deteriorated to requires improvement. This meant some aspects of the service were not always safe and there was limited assurance about safety. There was an increased risk that people could be harmed.

Assessing risk, safety monitoring and management; Using medicines safely; Learning lessons when things go wrong

- Risk assessments were generic and not personalised for meeting people's individual needs. For example, one person's support plan stated they required support when going out in the community. This was because the person becomes anxious and distressed. However, the person's risk assessment did not reflect this or give enough guidance for staff to be able to support the person safely.
- We discussed this with the registered manager who showed us they were already working on reviewing and updating care plans and risk assessments. We will check this at our next inspection.
- Records were not always clear to show when staff should administer a person's medicines. For example, there was no written protocol or guidance for staff to follow in relation to one person's 'as required' medicines to manage their individual health needs. This could potentially place people at risk of not having their health care needs recognised and met.
- We raised this with the registered manager who gave us assurances this would be addressed and implemented immediately.
- Some people needed support with their medicines. People received this support from staff who were trained and had their competency regularly assessed to make sure they were managing people's medicines in a safe way.
- Accident and incidents were recorded. However, there was no evidence to suggest the provider had procedures in place to review accidents and incidents to support the provider in identifying trends, mitigate risks or to identify any learning to reduce the risk of similar incidents happening.

Systems and processes to safeguard people from the risk of abuse

- People told us they felt safe with staff in their homes. One person described the care and staff as, "Fantastic" and "Couldn't ask for better care".
- Relatives also gave us positive feedback about their loved one's safety and told us their family member was supported by staff that treated them well. One relative told us, "Really happy with the way they [staff] look after [family member]." Another relative described the staff as, "Very good" and "Nice."
- Staff had received training in safeguarding and knew how to keep people safe.
- Staff knew how to report any concerns they had, and where they would go if they felt their concerns weren't being listened to or acted on. Staff had access to the providers safeguarding and whistle blowing policy.

Staffing and recruitment

- People and relatives told us overall they had regular consistent staff at the times they expected, and if they [staff] were going to be late the office staff informed them.
- Relatives said the staff team were skilled and experienced to work with their family member. One relative said, "I have no doubt that the carers [staff members] know what they are doing, they certainly understand what [relative] needs".
- Staff were recruited safely, and checks were carried out prior to employment to ensure suitability to care for people. These included requesting employment references and an enhanced Disclosure and Barring Service (DBS) check. This helps employers make safer recruitment decisions.

Preventing and controlling infection

- People were protected from the risk of infection. Personal protective equipment (PPE) was provided to staff. Staff confirmed they had sufficient supplies. People and relatives said staff always wear masks, gloves and aprons.
- We were assured the provider's infection prevention and control policy was up to date and records showed staff had received infection control 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 this key question was rated as good. At this inspection this key question has now 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; 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

- Shortfalls in the records found as part of this inspection had not been identified prior to our inspection in relation to medicines and the lack of detail within care plans and risk assessments.
- However, the registered manager was in the process of improving care plans and risk assessments. We will be able to check this progress at our next inspection.
- The registered manager had not identified shortfalls in people's medicine records though. We raised this with the registered manager who assured us they would take action and implement immediately.
- Although the provider as part of their quality checking had a system in place to identify where calls were late, missed, or shorter, improvements were required to ensure people received their care safely and as they had agreed.
- The registered manager confirmed on 11 March 2021 they were providing care and support 24 hours per day to people in three supported living properties in Walsall since September 2019. However, the provider was not registered with The Care Quality Commission [CQC] to provide these services for people.
- Since the inspection the registered manager has contacted the Care Quality Commission [CQC] to resolve these issues.
- The registered manager also confirmed they were providing care and support to people with learning disabilities and autism. However, the provider was not registered with The Care Quality Commission to support this service user band.
- The provider had failed to review, update and notify CQC of changes to their statement of purpose. We raised this with the registered manager who assured us this would be addressed immediately.
- Registered providers are legally obliged to send the CQC notifications of incidents, events or changes that happen at the service within a required timescale. Statutory notifications ensure the CQC is aware of important events and play a key role in our ongoing monitoring of services. During our inspection, we discovered the registered provider had not made us aware of one safeguarding concern and had not submitted the relevant notification to us. We discussed this with the registered manager who gave assurances this was an oversight and in future they would be submitted.

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

- People and their relatives spoke positively about the staff team and their care. One relative described the

care as, "Amazing...since day one really good". Another relative told us, "Can't speak highly enough" and 'Felt humbled by the staff and the work they have undertaken during the COVID-19 pandemic".

- Staff told us they had received training and were kept up to date with information on the support people required and any last-minute changes are communicated to staff at the office.
- Senior staff carried out spot checks on the administration of medicines to check staff were competent to administer them and following good practice and to identify any errors and or areas of improvement.

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

- People and their relatives were asked for feedback on the service they received and anything which could be improved on. Responses were positive. Compliments included, "Good job, grateful", "Good carers [staff]" and "Very happy".
- Team meetings and regular supervisions had been less frequent due to the impact of COVID-19. Staff confirmed they were not getting regular updates and opportunities to share information and discuss their views and opinions.

Working in partnership with others

- The registered manager was aware of the importance of working with other agencies such as health care professionals and the local authority to ensure good outcomes for people.