

Promises of Care Limited

Promises of Care

Inspection report

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Ratings

Overall rating for this service	Inspected but not rated
Is the service well-led?	Inspected but not rated

Summary of findings

Overall summary

About the service

Promises of Care is a domiciliary care service providing personal care and support to people living in their own homes. At the time of our inspection there were 15 people using the 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 and what we found

In response to the governance and auditing concerns raised during the last inspection, the provider developed a new care co-coordinator role to assist with the monitoring and auditing processes. The registered manager was keen to develop a culture of improvement, partnership working and transparency.

The provider monitored the quality of care and support provided to people, involving the person, their families and other professionals as appropriate.

The provider completed regular audits of the care plans, risk assessments and medicine administration. Improvement were identified and acted upon in a timely manner.

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 requires improvement (published 9 December 2022).

At our last inspection we found breaches of the regulations in relation to a lack of oversight and governance of risk within the service. The provider was made aware of our concerns and the improvements which were required to be completed by 20 January 2023.

At this inspection we found improvements had been made and the provider was now meeting this regulation.

Why we inspected

We undertook this targeted inspection to check whether the Warning Notice we previously served in relation

to Regulation 17 (Good Governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 had been met. The overall rating for the service has not changed following this targeted inspection and remains requires improvement.

We use targeted inspections to follow up on Warning Notices or to check specific concerns. They do not look at an entire key question, only the part of the key question we are specifically concerned about.

Targeted inspections do not change the rating from the previous inspection. This is because they do not assess all areas of a key question.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Promises of Care 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 well-led?

At our last inspection we rated this key question requires improvement. We have not reviewed the rating as we have not looked at all of the key question at this inspection.

Inspected but not rated

Promises of Care

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.

This was a targeted inspection to check whether the provider had met the requirements of the Warning Notice in relation to Regulation 17 (Good Governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 on a specific concern we had about the providers systems to give oversight of the service and govern risks.

Inspection team

The inspection was carried out by 1 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, although they were on leave during the office inspection.

Notice of inspection

We gave the service 24 hours' notice of the inspection. This was because it is a small service and we needed to be sure that a representative of the provider would be in the office to support the inspection.

What we did before the 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

During the inspection, we spoke with 1 person and 5 family members who used the service, to ask about their experience of the care provided. We spoke with 7 members of staff, which included care co-ordinators, senior staff and care staff. We used technology such as video calls to enable us to engage with the registered manager when they returned from their leave, and electronic file sharing to enable us to review additional documentation.

We reviewed a range of records. This included 4 people's care records and multiple medication records. We looked at a range of records relating to the governance and management of the service.

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 requires improvement. We have not changed the rating as we have not looked at all of the Well-led key question at this inspection.

The purpose of this inspection was to check if the provider had met the requirements of the warning notice we previously served. We will assess the whole key question at the next comprehensive inspection of the service.

At the last inspection we had concerns about the way in which the quality and safety of the service was being monitored which was a breach of Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. At this inspection we found improvements had been made and the provider was now meeting this regulation.

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

- The provider's governance systems were effective when assessing and monitoring the quality of service provided to people.
- During the last inspection, we found audits had not identified missing emergency response information from care plans, such as using fire emergency devices. During this inspection, we found care plans contained relevant emergency information.
- During the last inspection, we found medicine quality audits were insufficient to ensure time specific medicines were managed and administered safely. During this inspection, we found medicine audits reviewed time specific medicine.
- During the last inspection, we found concerns over quality monitoring processes for nutrition and hydration, skin care and the monitoring of controlled drugs. During this inspection, we found information stored in these documents was subject to regular auditing processes. Although, no one was receiving a controlled drug at the time of inspection.
- Checks and audits were in place to monitor quality and safety and these effectively identified areas for improvement. We saw how one audit identified a concern, whereby action was not taken following a person who declined to take their medication. The audit clearly detailed the follow-up action taken, and lessons learnt were discussed.

- Quality monitoring processes ensured care plans were regularly updated and contained relevant and current information. Staff told us there were regular meetings and opportunities to review and discuss people's changing needs or pass on concerns.
- Risk assessments were regularly reviewed, and relatives told us the staff members acted on people's changing needs. One relative told us, "The GP has changed [my family member's] medication. The staff are supporting the person with these changes."
- Relatives told us staff knew people well and managed risks safely. Although, some relatives told us they had difficulty accessing the electronic system to review the care provided. The registered manager told us they will resend out the instructions and a reminder to all relevant people and relatives about how to access the system.
- Relatives told us communication systems had improved and the provider was quick to respond to concerns. One relative said, "Communication is good; It is bang on. They always let us know if someone cannot attend or will be late. The consistency and communication is great. If I have any concerns, they always get right back to me."