

Transform Housing & Support Transform Homecare East Surrey

Inspection report

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Ratings

Overall rating for this service

Is the service safe? Good Is the service caring? Good Is the service responsive? Good Is the service well-led? Good Cool Good

Date of inspection visit: 06 March 2020

Date of publication: 30 April 2020

Good

Summary of findings

Overall summary

About the service

Transform Homecare East Surrey provides personal care to people in their own homes. 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 our inspection the service was supporting 14 people with personal care needs.

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

People were highly complementary about the personalised support they received and the kind and caring nature of staff. People were supported by small teams which meant they had the opportunity to develop meaningful relationships. Assessments were completed prior to people receiving care and people were involved in developing their care plans. People told us staff arrived promptly and stayed for the planned duration of their care call.

Staff understood their responsibilities in reporting potential safeguarding concerns and people told us they felt safe with the staff supporting them. Risks to people's safety and well-being were managed well and any concerns responded to promptly. People received their medicines safely and in line with their prescriptions. Safe recruitment processes were in place and staff received training relevant to their roles.

People had access to health and social care professionals to support them to stay healthy. Relevant referrals were made for equipment to help people maintain their independence and safety. People's wishes at the end of their life were explored with them. Staff had received training in this area of people's care and took pride in the care they offered to people.

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.

People told us they would recommend the service to others and felt the registered manager and senior team were kind, responsive and organised. There was a positive culture throughout the service with shared values and goals evident. Quality systems were embedded into practice in order to ensure continuous improvement. Staff felt supported in their roles and proud of the impact they had on people's lives.

Rating at last inspection

The last rating for this service was Good (published 22 July 2017).

Why we inspected This was a planned inspection based on the previous rating.

Follow up

2 Transform Homecare East Surrey Inspection report 30 April 2020

We will continue to monitor information we receive about the service until we return to visit as per our reinspection 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.	



Transform Homecare East Surrey 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 was carried out by two inspectors.

Service and service type

Transform Homecare East Surrey is a domiciliary care agency. It provides personal care to people living in their own houses and flats.

Notice of inspection

We gave the service 48 hours' notice of the inspection visit because we needed to be sure the provider would be available to support the inspection. Inspection activity started on 3 March 2020 and finished on 18 March 2020. We visited the office location on 6 March 2020.

What we did before the inspection

We reviewed all the information we held about the service, including data about safeguarding and statutory notifications. Statutory notifications are information about important events which the provider is required to send us by law. The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report. We used all of this information to plan our inspection.

During the inspection

We spoke with three people who received care from Transform Homecare East Surrey by telephone and visited two people in their homes. We spoke with two relatives by telephone to gain their views of the service provided. We also spoke with the provider's compliance support officer, the registered manager and four staff members. We reviewed a range of documents about people's care and how the service was managed. We looked at five care plans, three staff files, medication administration records, risk assessments, policies and procedures and internal audits that had been completed.

After the inspection

We spoke with an additional two staff members. We reviewed additional information from the provider including audit and quality information.

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 remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

• People and relatives told us they felt safe with the staff providing their support. One person told us, "I feel safe letting them into my home." One relative told us, "I know the staff want exactly the same as me, for mum to remain safe in her home."

• Staff understood their safeguarding responsibilities. Regular reminders were provided through training, the staff newsletter and a safeguarding quiz. One staff member told us, "I would never want anything to happen to one of our clients so I would do anything I could to make them safe and report it if I saw anything was wrong."

• The provider had effective systems in place to ensure any concerns identified these were shared with the local authority and acted upon where required.

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

- Risks management plans were in place to help people stay safe whilst maintaining their independence. One person told us, "I wouldn't be able to stay here (at home) if it wasn't for them. They will do anything I ask which means I don't have to worry."
- Staff we spoke with were aware of risks to people's safety and well-being and how to keep them safe. One staff member told us, "We are watching all the time and we know our clients very well. We know the risks and the help they need from us."
- The provider shared information with people and staff regarding risks in the home. This included information in newsletters regarding fire prevention and staying safe in extreme weather conditions.
- Staff were aware of how to report accidents and incidents. One staff member told us, "We have forms at every client's where we can record anything and report it to the supervisor, no matter how trivial."
- Prompt action was taken following accidents or incidents and risk assessments reviewed. The registered manager had processes in place to monitor incidents to minimise the risk of them happening again.

Staffing and recruitment

- People told us staff were punctual and reliable. One person told us, "They arrive on time and know when my appointments are so they always have me ready for them." A second person said, "They have never missed a call and they do call me if they are going to be late so I am kept updated."
- People told us they were supported by consistent staff who stayed for the planned duration of their care call. One person told us, "They're always here the full time. I'm not rushed. They all know me, they're like family now."
- Robust recruitment procedures were in place which included all potential staff completing an application form and undergoing a face to face interview. Disclosure and Barring Service checks (DBS) and references

were completed prior to staff starting their employment. This ensured that people were supported by suitable staff.

Using medicines safely

• Safe medicines processes were in place. People were involved in assessing what level of support they required from staff to help them with their medicines.

• Staff were trained in the different types of support people may require with their medicines and their competence was checked by senior staff.

• Records were maintained where staff administered people's medicines. These contained all relevant information and demonstrated that people received their medicines in line with their prescriptions.

Preventing and controlling infection

• People and their relatives told us staff were conscientious about cleanliness. A relative said, "I see them put their gloves on, washing hands. Their hygiene is really good."

• Staff had received training in infection control and told us they always had access to personal protective equipment. One staff member told us, "We use gloves and aprons, they're always in every home and I keep a supply in my car just in case."

• The provider had ensured people were informed of precautions they needed to take with regards to coronavirus. Information had been sent to people's homes and staff discussed this with them. One person told us, "My son is very worried about coronavirus and I can say that care staff wash their hands and they have spoken to me about the importance of keeping clean and washing hands."

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 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 fully assessed prior to them receiving a service to ensure their needs could be met. One relative told us, "We had the chance to talk about what we needed and how they would do it. They've been good right from the start."
- Assessments were comprehensively completed and covered areas including communication, health, medicines, mobility and nutrition. A senior staff member told us this meant they were assured they were able to meet people's needs before they began providing care. They told us, "When I tell new clients what we can offer I know we can do it, it's not just promises."
- Staff were aware of good practice guidance when providing people's care, such as the safe use of equipment, moving and handling practice and health and safety guidelines. Regular updates were provided to staff during training, staff meetings and through newsletters.

Staff support: induction, training, skills and experience

- People and relatives told us they felt staff had the skills required for their roles. One person told us, "They seem to know what they are doing with everything. I have no concerns over their skills."
- Staff told us they had felt supported through the induction and training process. One staff member told us, "It is fantastic. If you're not sure they will go through it with you to support you. Someone is always there to answer any questions."
- The registered manager maintained a training matrix. This demonstrated a 97% compliance rate for mandatory training. Staff were also able to access additional training to support their understanding of specific issues or health conditions relevant to people's care.
- Staff told us they received regular supervisions and felt supported in their roles. One staff member told us, "It makes me feel valued and respected. What I do is recognised and that gives me confidence."

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

- Where required, people were supported to eat and drink in line with their preferences. One person told us, "They ask me what I want but generally they know what I like." A second person said, "When staff leave, they make sure I have my water bottle filled up and have some biscuits if that's what I want."
- Where people were supported to prepare meals, there was clear information in their care plans. Staff we spoke with were able to tell us about people's preferences and specific dietary requirements.

Staff working with other agencies to provide consistent, effective, timely care;

• Staff liaised with other agencies to ensure people received the support they required. During assessment, staff found one person's living environment was unsafe and detrimental to their health. They contacted the

relevant housing provider and health teams to review the person's needs. This led to aspects of the person's property being refurbished, enabling them much greater independence.

• Staff advocated for people when their needs changed. When one person needed to move into residential care, staff worked alongside the local authority to support them through this process. The registered manager helped the person to move and ensured the care home had all the relevant information regarding the person's needs.

Supporting people to live healthier lives, access healthcare services and support

- People had access to health and social care professionals when required. One relative told us, "They always phone me with updates or concerns about mum's health."
- People had access to the equipment they required to maintain their health and independence. Staff liaised with relevant health professionals such as occupational therapists and physiotherapists to ensure people's needs were assessed.
- Where appropriate, staff attended health appointments with people to support them in sharing information about their needs with professionals. Following one appointment a professional commented, "Thank you for your amazing work with (person's name). It is great having such proactive providers."
- Information was available to staff regarding specific health conditions such as diabetes, macular degeneration, flu and cataracts. One person who had dietary requirements due to their health condition told us staff had a good understanding of their needs and how their condition affected them.
- Staff understood the positive health benefits of good oral hygiene. Each person had an oral health care plan in place and staff had completed training in supporting people with this aspect of their care.

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. We checked whether the service was working within the principles of the MCA.

- People told us staff asked for their consent prior to supporting them and respected their wishes. One person said, "They ask for my consent every time as they're walking through the door."
- Staff were aware of their responsibilities under the MCA. One staff member told us, "We ask people, make sure they are involved with their care. I talk to them about the choices they have. If there was a difficult decision, we would set up a meeting (with them) to talk about their capacity and maybe what's in their best interests."

• Records showed that, where required, people's capacity had been assessed. At the time of our inspection no one lacked the capacity to consent to the care they received.

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

- People and relatives told us staff were exceptionally kind in their approach. Comments included, "They are lovely and very good, they treat me very kindly when they are here.", "They are fabulous. They make sure that I am happy and calm when they are helping." And, "They are all lovely and would never leave without asking if there was anything else they could do."
- People told us they valued receiving their support from the same staff so they could build trusting relationships. One person told us, "They don't just come in and support me. They spend time talking to me and getting to know me and my family. I feel like I am important to them and they have an interest in my life." One relative told us, "They've taken the time to know mum, which is so lovely. They treat her like a friend or a family member."

• People and their relatives shared examples of staff going the extra mile to support people. One relative told us, "When mum was in hospital, (registered manager) came to see her which was really lovely. They don't have to and a couple of the ladies (staff) came to visit her as well. It always feels very personal."

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

- People told us staff regularly spoke to them about their care and what they wanted support with. One person told us, "They talk to me about my care. They ask me how I am and how I have been. I feel I can rely on them."
- People were involved in planning their care. One person told us, "My care plan is accurate and up to date. I have a copy here in the house and the information is how I like my care being delivered and this is how staff support me."
- Wherever possible, people were introduced to staff members before they started supporting them. This helped to provide consistency in people receiving their care how they wanted it. One staff member told us, "The supervisors will come out with us on the first visit to show us what to do. It's like introducing a friend. They can say if they're happy with everything."

Respecting and promoting people's privacy, dignity and independence

- People were supported to maintain their independence. One person told us, "I try and do most things by myself. They help me to do what I can on my own. I always say use it or lose it, I want to keep to this."
- Staff showed respect for people's homes. One relative told us, "They are very kind and considerate to her feelings. They seem to really respect they're in her home." One staff member said, "I always try to be calm and give a positive atmosphere. You're in their home and that's where they should feel safe and I want to create that."

• People told us they were treated with respect. One person told us, "They treat me with respect, always. They're very good at listening." Staff demonstrated understanding of respecting people's privacy and dignity. One staff member told us, "Bedroom and bathroom doors would be shut and I make sure curtains are pulled. One person has neighbours who pop in so I make sure I lock the front door."

Is the service responsive?

Our findings

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

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

- People received person-centred care and records showed they were involved in developing and reviewing their care plans. One person told us, "They do just what I want them to do. I like to do things for myself but when I need help during calls the staff will always be there for me."
- People's care records contained personalised information regarding their life histories and personal preferences. Staff we spoke with were able to describe what was important to the people they supported. One staff member told us, "The clients are all very interesting, you can learn a lot from them. I enjoy listening to them and we become friends really."
- Detailed records were maintained of the care provided to people. These included details of the person's health, their mood, general conversations and the support provided. A compliment received from a healthcare professional commented that one person's daily records were the 'best they had seen from any agency', giving them a complete audit trail of how the person had been over the previous days.

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 and their relatives told us they received clear communication from the service and staff. One relative told us, "They know mum so well so the communication is always good. They are good at communicating and updating us."
- Where people's first language was not English, the service made efforts to match staff who were able to communicate effectively. One person received regular visits from a senior staff member who was able to speak the same language. This meant they were able to help the person sort out any concerns they found difficult to address due to the language barrier.
- People's communication needs were clearly recorded and shared with staff. Each person had an AIS document in place which highlighted their preferred method of communication. This also included any additional information staff should be aware of, such as sensory impairments.

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

• People were supported to build relationships within their local community. One person was supported to collect their shopping each week before going for a drink at a local community centre. The staff member told us, "It's a really sociable thing. Everyone there knows us now which makes them (person) feel

comfortable."

• Staff provided support for people to develop and maintain their interests. One person wished to attend a choir event but did not have the details for this. With support from staff they were able to find out the relevant information to attend this event. Staff supported another person by taking jigsaws to them from their home and charity shops. This person enjoyed the activity which helped vary their day and gave them a shared interest with the staff member.

Improving care quality in response to complaints or concerns

• People and their relatives told us they knew how to raise any concerns and felt these would be listened to and addressed. One relative told us, "I would be completely comfortable to raise it (a complaint) with the staff members or the office and I know they would sort it."

• The provider had a complaints policy in place which detailed how people could raise concerns. The policy also informed people the timescales for responding to complaints and the action to take if they remained dissatisfied.

• There had been no complaints received regarding the service since our last inspection. However, staff were aware of the action they should take should people report concerns to them. One staff member told us, "I would give reassurance to them (person) and report it to a manager. They would sort it out quickly. They're very considerate and compassionate as a company."

End of life care and support

• The service had received compliments and thanks regarding the support they had provided to people at the end of their lives. One relative had written, "Thank you and your staff for the wonderful care and help you have given."

• Records demonstrated staff paid great attention to detail to ensure people's wishes were followed and they were able to remain at home. Advice and direction from healthcare professionals was followed to help people remain comfortable and free from pain.

• Staff were passionate about providing people with dignified and person-centred care at the end of their life. One staff member told us, "It's such a special and rewarding thing to do, to be able to get this right for the client and their families." Staff had received training in providing end of life care from the local hospice.

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 remained the same. 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

- People and their relatives told us they were happy with the service they received and how it was run. One person said, "I am very happy with them and I would be happy to recommend the service to someone else." One relative said, "It's second to none. Just brilliant."
- People were highly complimentary about the registered manager. One person told us, "She's very approachable and nothing is ever too much trouble." One family member said, "She's very approachable and has a great work ethic."
- People benefited from a service with clear values which were evident in the support they received. The core values of respect, empowerment, responsibility and excellence were clearly displayed and known to staff. One staff member told us, "I use my experience and the feeling of responsibility to help people. It makes me want to give 110% to them to help them stay in their home and make sure we don't take their individual independence away from them."
- Staff told us they felt motivated by the registered manager's approach. One staff member said, "(Registered manager) is the best manager I could ever work for. She's so understanding, helpful and friendly. We can count on her for anything, she always there to help us and encourage us."

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

- Systems were in place to monitor the quality and safety of the service. The provider completed monthly quality monitoring visits which looked at areas including training, care file reviews, staff meetings, medicines and infection control. Reports identified any actions required which were completed promptly by the management team. Quality reports also highlighted areas of good practice where staff had gone above and beyond to ensure positive outcomes to people.
- Senior staff completed regular spot checks to monitor the quality of the support people received and give guidance to staff where appropriate.
- The registered manager spoke highly of staff and the team work within the service. They told us, "I'm most proud of my staff, they are phenomenal and so flexible and willing to help if someone has a need. We've got an amazing team."
- The provider and registered manager were looking at ways to continually improve the service people received and the systems in place to support this. Regular registered manager meetings were held with mangers operated by the same provider to share good practice and ideas. The provider was in the process of investing in technology which would streamline systems to make them more effective and less time

consuming.

• A continuous improvement plan was in place which detailed the proposed actions, how this would be met and what improvement was achieved. Actions included continual reviews of training to ensure staff were working to current guidance and on-going improvements to record keeping.

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

• People and their relatives told us they were asked for their feedback on the service. One person told us, "I'm asked for feedback in surveys and we review my care to make sure I'm happy." Completed surveys showed a high level of satisfaction with 94% of people rating the service as outstanding or good. Where concerns had been identified, these were added to the action plan to ensure they were addressed and monitored.

• Staff told us they were proud to be working at Transform and felt the support they received motivated them in their roles. One staff member told us, "The company put their trust in you and give you recognition. It means you pass that on to the client. I never felt I would do something where I felt so proud of what I do and get so much reward form a job."

• Staff were involved in the running of the service. In addition to regular team meetings, staff attended the provider's bi-annual conference. This enabled them to be involved in looking at the priorities of the organisation going forward. Staff forums were also held twice a year. The registered manager told, "It's an opportunity for our voices in the care side of the organisation to be heard and taken into account with developing policies and procedures."

• The provider and registered manager were committed to ensuring people's human rights were respected. The FREDA principles (Fairness, Respect, Equality, Dignity and Autonomy), from guidance on a human rights-based approach to care and support, were displayed prominently in the office. Staff told us they had discussed how this impacted on their work and the values of the service within team meetings.

• There had been no incidents at the service which qualified as duty of candour incidents. The provider had a policy in place regarding duty of candour which demonstrated the need to act in an open and transparent manner with people and their relatives.

Working in partnership with others

• The provider was part of the Surrey Care Association which aims to support providers and ensure good practice is shared. They attended regular meetings to ensure relevant updates were received.

• The provider and registered manager had developed strong links with Skills for Care. This ensured they had access to information around training and development in addition to the latest guidance and changes to legislation.