

UK Case Management Limited

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Inspection report

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service effective?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

UK Case Management Limited is a domiciliary care agency providing personal care to people in their own homes. The service provides support to children, adults and older people who may have physical disabilities. At the time of our inspection there were 8 people using the service receiving personal care. 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

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.

Risks to individuals were identified and well managed. There was an emphasis on safely promoting people's well-being and independence. Medicines were managed safely. Staff had received training in safeguarding and were aware of their responsibilities. There were safe systems of staff recruitment in place and sufficient staff deployed to meet people's needs. Staff teams were built specifically around individuals and their needs and preferences.

Staff received the induction, training and support they needed to carry out their roles effectively. People's needs were assessed and detailed care plans and risk assessments gave staff clear guidance on people's needs and preferences. People were supported to access a range of health care professionals and staff and managers worked closely with other agencies to ensure people's needs were met.

The service was well managed. The registered manager had a good understanding of what was needed to provide good quality care and support. There was a range of detailed quality monitoring, auditing and oversight in place. People who used the service spoke very positively about the service, registered manager and staff. The registered manager demonstrated a commitment to providing a person-centred, responsive service. Staff we spoke with shared that commitment. Staff and the registered manager spoke with compassion and empathy about the people who used the service.

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 March 2023) and there were breaches of regulations relating to management of risk, medicines, safeguarding and governance. The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

Why we inspected

We undertook this focused inspection to check whether the Warning Notice we previously served in relation to Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 had been met and to check they had followed their action plan and to confirm they now met legal requirements. This report only covers our findings in relation to the Key Questions Safe, Effective and Well-led which contain those requirements.

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 has changed from requires improvement to good. 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 UK Case Management Limited 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?

The service was safe.

Details are in our safe findings below.

Good ●

Is the service effective?

The service was effective.

Details are in our effective findings below.

Good ●

Is the service well-led?

The service was well-led.

Details are in our well-led findings below.

Good ●

UK Case Management Limited

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

The inspection team consisted of 2 inspectors and an Expert by Experience. 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 specialist housing.

Notice of inspection

The inspection was announced. We gave the service a short period of notice of the inspection. This was because it is a small service and we needed to be sure a manager would be in the office to support the inspection.

What we did before the inspection

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 the service, what it does well and improvements they plan to make. We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and Healthwatch. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England. We used all this information to plan our inspection.

During the inspection

We spoke with 2 people using the service and 4 relatives, who had given us permission to contact them. We also spoke with 7 staff including support workers, clinical lead, assistant case manager and the registered manager.

We reviewed a range of records, including people's care records, staff recruitment files, records relating to medicines, training and supervision, accidents and incidents, safeguarding logs, policies and procedures, and a variety of records relating to the management of the service, including audits and governance records.

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 requires improvement. At this inspection the rating has changed to good. This meant people were safe and protected from avoidable harm.

At our last inspection the provider had failed to establish robust systems to safeguard and protect people from abuse. This was a breach of regulation 13(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 13.

Systems and processes to safeguard people from the risk of abuse

- People were protected from the risk of abuse.
- Staff had received training in safeguarding. They were aware of their responsibilities and were confident any concerns raised would be dealt with appropriately. One staff member said, "The person I support is safe because there is a care plan in place and staff are well trained."
- People told us the staff were kind and caring. They told us staff treated them with dignity and respect at all times. One person said of the staff, "They are all well trained and kind. I think they do genuinely care about me as a person and what my needs are."

At our last inspection the provider had failed to robustly assess the risks relating to the health safety and welfare of people. This was a breach of regulation 12(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 12.

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

- Risks to individuals were identified and well managed.
- There was a positive approach to risk management. Support plans and risk assessments were in place to guide staff. They were person centred and had good detail about what was important to and for the person. There was an emphasis on safely promoting people's well-being and independence.
- People told us they were involved in planning their care and support. One person said, "I have a nominated staff member and I know I can get in touch if I need to, but they contact me regularly to check I am ok."
- Records were kept of accidents and incidents. Evidence showed that these were reviewed by managers to see if there were any themes or patterns or if any lessons could be learned, to minimise potential risk or to see if improvements could be made.

At our last inspection the provider had failed to ensure the proper and safe management of medicines. This was a breach of regulation 12(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 12.

Using medicines safely

- There were safe systems in place for the management and administration of medicines.
- Improvements had been made to the staff medicines training and additional competency checks were being developed. Records relating to medicines administration were audited regularly by managers to ensure they were completed accurately.
- People told us they always received their medicines as prescribed.

Staffing and recruitment

- There were sufficient staff deployed to provide people with the care and support they needed
- Staff teams were built specifically around individuals and their needs and preferences. Staff worked predominately with just 1 person, this helped ensure consistency and helped staff and people who used the service get to know each other very well.
- All required checks had been undertaken prior to staff commencing employment.

Preventing and controlling infection

- Systems in place helped protect people from the risk of infections because the service followed safe infection and prevention control procedures.
- Staff had completed training in infection control and food hygiene.

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 our last inspection we rated this key question requires improvement. At this inspection the rating has changed to good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

At our last inspection we recommended the provider review the systems in place to ensure support workers had the appropriate competence and skills to provide effective care, and update their practice accordingly. The provider had made improvements.

Staff support: induction, training, skills and experience; Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- Staff received the induction, training and support they needed to carry out their roles effectively.
- There was a range of mandatory training the provider had identified which was completed by all staff. Staff were also offered induction and training that was very specific to the needs or medical conditions of people who used the service that they would be supporting.
- Staff felt supported and spoke very positively about the work they did and how the service was managed. Staff had regular supervision and opportunities to talk with managers.
- People's needs were assessed prior to them starting to use the service.
- Staff told us care plans were clear and easy to follow, and they found the information contained within these plans to be helpful in ensuring people's needs were met. Care plans and risk assessments were reviewed regularly and updated if people's needs changed.
- People told us the staff were good at their jobs and they received the care and support they required. They said, "I have never had any problems with any of the care staff not knowing what to do and I always meet a new carer before they come to work with me" and "What I really like is each of the carers was introduced to me before they first came to help me."

Supporting people to live healthier lives, access healthcare services and support; Staff working with other agencies to provide consistent, effective, timely care

- People's health needs were identified clearly in support plans and risk assessments. Importance was placed on ensuring people's health needs were identified and met.
- Care records included detailed information about their health conditions and how these might impact on the person. They also detailed signs and symptoms staff should look out for.
- People were supported to access a range of health care professionals and staff and managers worked closely with other agencies to ensure people's needs were met.

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 MCA 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.

- The provider was meeting the requirements of MCA.
- People's capacity to make decisions about different aspects of their care and support was identified and well documented. Records indicated that people's consent to care and support was sought. Where appropriate those with legal authority were involved in decisions.
- Managers and staff placed great importance on ensuring people were involved in decisions about their care. People told us their wishes and views were always respected.

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

- People were supported with their nutritional needs.
- People lived in their own homes and could eat what they wanted. Care records detailed people's likes, dislikes, and preferences regarding food and drinks.

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 requires improvement. At this inspection the rating has changed to good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

At our last inspection the provider had failed to ensure effective systems were in place to monitor, mitigate risk and improve the quality and safety of the service and had failed to maintain accurate, complete, and contemporaneous records. This was a breach of regulation 17(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 17.

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

- The service was well managed. The registered manager had a good understanding of what was needed to provide good quality care and support. There was a range of detailed quality monitoring, auditing and oversight in place.
- People who used the service spoke very positively about the service, registered manager and staff. They told us, "I could not be happier with the service provided, not only do they manage [persons] care needs but everything else [person] requires to live their life as well as they can."
- The registered manager placed great importance on continuous improvement. Since our last inspection new systems had been put in place to plan, monitor and develop the service; this included a detailed service improvement plan.
- There was evidence of very regular review of care and support with people who used the service and their relatives, and a focus on outcomes for people.
- People told us any concerns were dealt with in an efficient and prompt manner.
- Staff told us the registered manager was approachable and supportive. They said, "She's really nice, easy to work with. She will always be there to solve problems both professional and personal" and "She's amazing. The most efficient manager I ever met, her attention to detail is great."

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

- There was a clear commitment and focus on ensuring a person-centred culture and supporting people to maintain and develop their independence, choice and control.
- The registered manager demonstrated a commitment to providing a person-centred, responsive service. Staff we spoke with shared that commitment. Staff and the registered manager spoke with compassion and empathy about the people who used the service.

- People told us they were happy with the service and staff. A person said, "They are a fantastic team" and "As a company they really seem to have taken my personal situation into consideration." Another said, "We would recommend this service 100%."

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

- People's views about the service were regularly sought. People's opinions, wishes and ideas were valued and respected.
- One person we spoke with said, "I can't fault anything with how (person) is looked after and if we need to speak to a manager during the week we can."
- There was a range of meetings for staff to discuss any concerns or service developments. Staff were very positive about how the service was managed and the work they did. They said, "It's the best job I've ever had; everyone is so open. We can share and create new ideas" and "I love it, its best job I've ever had. The teamwork is great, we learn from each other and support each other."

Working in partnership with others; 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

- Managers and staff worked well with other organisations and actively sought support where it was needed. The registered manager was proactive in seeking guidance and support from outside agencies.
- Policies and procedures were available to guide staff on what was expected of them in their roles.
- There was a service user guide and statement of purpose to inform people what they could expect from staff and the service.
- Records confirmed managers of the service and the provider understood and acted on the duty of candour.
- Statutory notifications are reports of certain changes, events and incidents that the registered providers must notify us about that affect their service or the people who use it. The provider had notified CQC as required.
- Systems were in place to protect people in the event of an emergency. Contingency plans gave information to staff on action to take for events that could disrupt the service.