

Meraki Unique Care Limited

My Homecare Redbridge

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

This service is a domiciliary care agency and is based in the London Borough of Redbridge. The service provides personal care to adults in their own homes, primarily elderly people. 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 provided personal care to 7 people.

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

At our previous inspection on 20 September 2022, quality assurance systems were not robust enough to identify shortfalls we found on risk assessments, care planning and ensuring staff attended calls on time, therefore placing people at risk of harm. We served a warning notice to ensure improvements were made on good governance.

At this inspection, improvements in these areas had been made and there were more effective quality assurance systems in place, which included auditing care plans and staff files.

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

Rating at last inspection

The previous rating for this service was requires improvement (published 8 November 2022) and there were multiple breaches of regulation. We issued a warning notice for a breach of Regulation 17 (Good Governance). There were also requirement notices issued for Regulation 12 (Safe care and treatment), Regulation 18 (Staffing) and Regulation 9 (Person Centred Care) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection, enough improvement had been made and the service was compliant with the warning notice issued on Good Governance.

Why we inspected

We undertook this targeted 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. 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 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.

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 at this inspection. This is because we only looked at the parts of this key question we had specific concerns about.

Details are in our well-led findings below.

Inspected but not rated

My Homecare Redbridge

Detailed findings

Background to this inspection

The inspection

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.

Inspection team

The 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 homes.

Registered manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

Notice of inspection

Our inspection was announced. We gave the service 48 hours' notice of the inspection. This was because it is a domiciliary service and we needed to be sure that a member of the management team was available to support us with the inspection.

What we did before the inspection

We reviewed the information we already held about the service. This included the last inspection report, enforcement and notifications. A notification is information about important events, which the provider is required to tell us about by law.

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 of this information to plan our inspection.

During the inspection

We spoke with the registered manager and nominated individual. We reviewed documents and records that related to people's care and the management of the service. We reviewed 4 care plans, which included risk assessments and quality assurance records such as audits.

We spoke to 2 people that used the service, 2 relatives of a person that used the service and 2 staff.

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 Requires Improvement. We have not changed the rating of this key question, as we have only looked at the part of the key question we had specific concerns about.

The purpose of this inspection was to check if the provider had met the requirements of the warning notice we previously served.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good 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

At our last inspection the provider had failed to take proper steps to ensure there were effective systems to assess, monitor and mitigate risks to the health and safety of people to improve the quality and safety of the services provided. This was a breach of Regulation 17 (Good Governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. As a result, we served a warning notice to ensure action was taken and improvements were made and set a timescale for compliance. Systems were not in place to ensure robust audits were carried out on care plans, risk assessments and ensuring staff attended calls in a timely manner. This was required to ensure high quality care was being delivered at all times and there was a culture of continuous improvement.

At this inspection we found enough improvement had been made and the service was no longer in breach of Regulation 17 and had complied with the warning notice in this area.

- During this inspection we found systems were in place for quality assurance of the service. Audits were being carried out on care plans, risk assessments, medicines and call monitoring logs. The registered manager told us the audits helped the service to identify any shortfalls and take prompt action. We found improvements had been made with care plans, risk assessments and staff time keeping.
- We found risk assessments included measures to ensure people received safe care at all times and personalised care plans were in place for people being supported with personal care. The registered manager also audited call logs on a daily basis to ensure staff attended calls on time. Feedback was also sought from people by the service on staff timekeeping and relevant action taken to ensure staff attended calls on time.
- Spot checks were also completed monthly to ensure staff attended calls on time and delivered safe and person-centred care to people. Spot checks are observation carried out by the registered manager on staff delivering care to people.
- The management and staff were clear about their roles and aware of the importance of ensuring records

such as care plans and risk assessments were robust to ensure people always received safe person-centred care. Staff told us they were supported well by management. A staff member told us, "I am supported very well. [Registered manager] is a very good manager."

- Quality monitoring systems were in place. Records showed feedback was sought from people and relatives through surveys, telephone calls and as part of spot check visits to ensure there was a cycle of continuous improvement. Feedback was then used to make improvements where required. A relative told us, "They do arrive on time. Timekeeping has improved. It was problematic before."
- The registered manager notified the Care Quality Commission of any allegations of abuse, serious injuries or incidents involving the police, as they are legally required to do.
- People, relatives and staff told us the service was generally well-led. A person told us, "They are good and try their best." A relative commented, "I don't have any concerns. The carers are all lovely." A staff member told us, "Everything is good, company is improving."