

Supreme Care Services Limited

# Supreme Care Services Limited

## Inspection report

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## Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

# Summary of findings

## Overall summary

### About the service

Supreme Care Services Limited is a domiciliary care agency that provides personal care to people living in their own houses, flats and specialist housing in the community. The Care Quality Commission (CQC) only inspects the service received by people provided with 'personal care', that is help with tasks related to personal hygiene and eating. Where they do this, we also take into account any wider social care provided. At the time of our inspection there were 65 people using the service, living in the London Boroughs of Croydon and Bromley.

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

People were safe. Staff had been trained and understood how to safeguard people from abuse.

Staff understood the risks to people's safety and wellbeing and what they should do to keep people safe. At the time of this inspection the provider was taking action to improve the quality of information for staff about risks to make this easier to read and follow.

There were enough staff at the time of this inspection to support people using the service and meet their needs. People did not have significant concerns about the timeliness of their scheduled care visits. The provider made sure the same staff attended care visits so people experienced continuity in the support they received.

Recruitment and criminal records checks had been undertaken on staff to make sure they were suitable to support people.

People were supported to take their prescribed medicines. Staff followed current practice and guidance to reduce infection and hygiene risks within people's homes.

People had positive experiences of using the service and were satisfied with the care and support they received from staff. The provider obtained and acted on people's feedback about how the service could continue to improve.

The provider made sure accidents, incidents and complaints were investigated and people were kept informed of the outcome. They undertook regular checks to monitor, review and improve the quality and safety of the service and addressed any issues found through these checks.

At the time of this inspection the provider was working proactively with local authorities as part of their ongoing contract quality monitoring arrangements. The provider had dealt with concerns raised in an appropriate way and was making the improvements required to the quality and safety of the support people received. The provider had also made improvements to the submission of statutory notifications to CQC of events and incidents involving people to make sure we received these without delay.

The provider worked well with healthcare professionals involved in people's care and acted on their recommendations to deliver care and support that met people's needs.

For more details, please see the full report which is on the Care Quality Commission (CQC) website at [www.cqc.org.uk](http://www.cqc.org.uk).

#### Rating at last inspection

The last rating for this service was Good (published 20 December 2018).

#### Why we inspected

We received concerns in relation to the timeliness of people's care visits, missed care visits, record keeping and management and leadership at 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 remains unchanged from Good. This is based on the findings at this inspection.

We also looked at infection prevention and control measures under the safe key question. We look at this in inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to coronavirus and other infection outbreaks effectively.

#### Follow up

We will continue to monitor information we receive about the service. If we receive any concerning information we may re-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 well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

# Supreme Care Services 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 Care Act 2014.

#### Inspection team:

This inspection was carried out by two inspectors and two Expert by Experiences. 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, flats and specialist housing.

The service had a manager registered with the CQC. 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:

This inspection was announced. We gave the provider 48 hours' notice to enable them to ensure they could accommodate an inspection as safely as possible. Inspection activity started on 18 November 2021 and ended on 30 November 2021.

#### What we did before the inspection:

We reviewed information we had received about the service since the last inspection. We reviewed statutory notifications submitted by the provider. Statutory notifications contain information providers are required to send to us about significant events that take place within services. We used the information the provider

sent us in the provider information return. 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, the quality and compliance consultant and the nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider. We reviewed a range of records including six people's care records, medicines administration records for five people, four staff records and other records relating to the management of the service.

After the inspection:

We spoke with eight people using the service, eleven relatives and five care support workers. We also obtained feedback from the contract quality monitoring teams at two local authorities that worked with the service. We continued to speak with the registered manager, the quality and compliance consultant and the nominated individual and sought clarification about the evidence gathered.

# 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 good. At this inspection this key question 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 said they were safe using the service. One person told us, "I'm very happy with them and I trust them and I do feel safe with them because they are nice girls, very good. I can't say anything against them." Another person said, "They have respect for who I am and they protect my dignity and they are aware of the occasions when I can't manage." A relative told us, "Yes, [family member] is very safe. She is very happy with the carers."
- The provider had systems in place to safeguard people from abuse. Staff received relevant training and were confident in recognising signs that might indicate abuse or neglect and the action they should take to report this. A staff member said, "If I notice any abuse or neglect then I contact my line manager."
- The provider understood their responsibility to liaise with local authorities when a safeguarding concern about a person was reported to them. We looked at recent examples which showed the provider submitted information to the investigating authority when requested, to assist them with their enquiries. This was in line with current guidance and practice.

Assessing risk, safety monitoring and management

- Risks to people's health and safety were managed. People's records contained information about identified risks to their safety and wellbeing. There were plans for staff to follow about how to manage these risks to reduce the risk of harm or injury to people.
- We noted information about risks to people was recorded in a format that was long and detailed and difficult to follow. We were concerned this might deter staff from reading through documents in full to understand how to manage risks to the person, although we did not find evidence of this at this inspection. Staff understood the risks to people and the action they should take to support people to stay safe.
- We discussed our concern with the provider who told us they had already identified this as an area for improvement and had plans in place to review these documents to make them more person centred and easier to read and understand.

Staffing and recruitment

- There were adequate numbers of staff to meet the needs of people using the service.
- Staff were allocated to people's care visits in advance. On the whole, people's feedback indicated the same staff attended care visits so people experienced continuity in the support they received.
- Prior to this inspection we received concerning information that staff were not always on time for scheduled care visits and on some occasions had not turned up.
- We discussed this with the provider and they told us they were aware of these concerns and had already taken action to improve this by introducing an electronic call monitoring system. They told us this had

helped them monitor care visits in real time and ensure staff turned up for people's care visits on time. The provider said since this system was introduced they had seen improvements in the timeliness of people's care visits and care visit calls were no longer missed

- There were systems in place to let people know if staff were running late to a scheduled care call. One person told us, "They do let me know when they are running late."
- At the time of this inspection people did not have significant concerns about the timeliness of their care visits. One person said, "[Staff member] comes on time...she does let me know if she is stuck in traffic." Another person told us, "I understand they are travelling from place to place. I'm okay with that and sometimes they are held up. That's happened a couple of times but they let me know." People also said there had been no recent incidents of care visits being missed.
- The provider operated safe recruitment practices. They carried out appropriate checks on staff that applied to work at the service to make sure only those suitable were employed to support people.

#### Using medicines safely

- People received their medicines safely and as prescribed.
- Where the provider was responsible for this, people's records contained information about their prescribed medicines and how staff should support them to take them in a timely and appropriate way. Our checks of records showed people consistently received the medicines prescribed to them.
- Staff had been trained to administer medicines. The provider made sure staff remained competent to do so by carrying out spot checks and refreshing their skills and knowledge annually.

#### Preventing and controlling infection

- Staff followed current guidance to keep people safe from the risks associated with poor infection control and hygiene. Staff told us the provider regularly checked their knowledge and understanding of current practice and guidance and let them know about any changes or updates to it.
- Staff used personal protective equipment (PPE) safely and effectively and people confirmed this. One person told us, "Oh yes, they wear the masks. They do put gloves and aprons on when they are washing me or doing any cleaning."
- The provider's infection prevention and control policy was up to date and they had plans in place to make sure infection outbreaks could be effectively prevented or managed.
- Staff had been trained in food hygiene practices to help them reduce risks to people of acquiring foodborne illnesses when preparing and serving food.

#### Learning lessons when things go wrong

- There were systems in place for staff to record and report accidents and incidents.
- The provider investigated accidents and incidents and took appropriate action to reduce the risk of them reoccurring. This included sharing learning with staff to help them reduce safety risks. We saw a recent example of this where staff were provided extra training and support to help improve their awareness of how to reduce the risk of people having a fall in their homes.



# 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 good. At this inspection this key question 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.

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

- Prior to this inspection we received concerning information about the quality and safety of the support provided to people and the current management arrangements for the service.
- At this inspection we found the provider was aware of these concerns and had responded by reviewing their processes around these concerns and making improvements where this was identified.
- We saw improvements had been made to the timeliness of care visits, staff rotas and records relating to people and staff. Further improvements were planned to documents used by the service to inform staff how to manage risks to people.
- There was provider level oversight to review the progress of these improvements to make sure all the planned changes were made in a timely manner.
- The provider undertook spot checks and telephone monitoring calls to people to seek assurances they were receiving safe, high quality care. Outcomes from recent checks showed people were satisfied with the care and support provided by staff.
- The staff structure had clearly defined roles and responsibilities for all the office-based staff, including the registered manager, who told us they were only responsible for the day to day management of this service.

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

- The provider investigated accidents, incidents and complaints and made sure people were kept informed of the outcome.
- The provider understood their responsibility for notifying CQC of events and incidents involving people and our records confirmed this. We discussed two incidents with the provider that appeared to have been reported to CQC sometime after they occurred. We were satisfied with their explanation for why this had happened. The provider told us they have since improved their systems to ensure all notifications are consistently reported to CQC. They told us this gave them assurance notifications had been received by CQC and without delay.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- The provider encouraged a culture within the service that was focussed on people receiving high quality care and support. They used spot checks, telephone monitoring calls and reviews to check the care and

support delivered by staff was to the expected standard. They also sought people's views about any improvements they wished to see. We saw examples of changes made to the support people received based on their feedback.

- People spoke positively about their experiences of using the service. Comments we received included; "They are very good, very efficient because they know what they are doing and they know how to deal with [family member] because people with dementia can get very agitated and aggressive"; "[Staff member] is friendly and very helpful. I need her to help to get up in the morning and go back to bed. I am very satisfied with her. I feel safe with her"; "They are reasonably on time, very friendly, do their job correctly and make sure I'm happy. If I'm not happy they will sit down and talk to me. They know I get depressed so they will sit and have a cup of tea with me"; "I'm satisfied with all of it since [family member] came out of hospital. He does sleep a lot and they were concerned about it. They phoned the office and they phoned the doctor. I was quite impressed with that, that they picked up on it".
- Staff told us they felt well supported by the provider. A staff member said, "The management are good and very supportive. I have no complaints. I get all the training and I don't think there is anything I feel like I am missing. I like it here." Another staff member told us, "I enjoy working here. They treat me how staff should be treated. I'm really happy. Whenever I put a report in they act on it. They always act if there is a problem. When I go in [to the office] they are very responsive. I get on well with the management team and I am really friendly with them."

#### Working in partnership with others

- At the time of this inspection the provider was working proactively with local authorities as part of their ongoing contract quality monitoring arrangements. The provider was cooperating and addressing the local authority's concerns about the quality of service provision. We saw the provider had responded to requests for information and dealt with concerns in a proportionate and appropriate way.
- The provider worked proactively with healthcare professionals involved in people's care and treatment. They had acted on their recommendations and advice to design and deliver care and support that met people's needs. We saw recent feedback from a healthcare professional who had thanked the service for the quality of care and supported provided to a person which had enabled them to be 'happy and safe to live at home'.