

I Care (GB) Limited

I Care (GB) Limited

Inspection report

Building 3, Kincaig Business Park
Kincaig Road
Blackpool
Lancashire
FY2 0PJ

Tel: 01253508277

Website: www.icaregroup.co.uk

Date of inspection visit:

20 April 2016

27 April 2016

Date of publication:

27 June 2016

Ratings

Overall rating for this service	Good ●
Is the service safe?	Good ●
Is the service effective?	Good ●
Is the service caring?	Good ●
Is the service responsive?	Good ●
Is the service well-led?	Good ●

Summary of findings

Overall summary

This inspection visit took place on 20 and 27 April 2016 and was announced.

The service provided personal care to people who lived in their own homes. This included an extra care facility, Links View in Lytham St Anne's. This enabled people to live independently in their apartments while having communal facilities on hand and support in an emergency. This could include personal care if they wished.

I Care (GB) limited supported people with mental health problems, people with physical disabilities, people living with dementia and older people.

At the time of our inspection I Care (GB) Limited was providing a service to around 280 people.

There was a registered manager in place. A registered manager is a person who has registered with CQC to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

People we spoke with told us they felt safe. They told us they received patient and safe care and they liked the staff who supported them. They said staff were respectful, friendly and conscientious.

There were procedures in place to protect people from abuse and unsafe care. Risk assessments were in place which provided guidance for staff. This minimised risks to people.

People told us they were usually supported by the same group of staff who they knew and liked. They told us they had confidence in their usual staff team as they were familiar with their needs and preferences.

People told us they received their medicines as prescribed and at the times they needed them. Staff had received training to assist people with their medicines.

Recruitment and selection was carried out safely with appropriate checks made before new staff could start working for the service. Staff had the skills, knowledge and experience needed to care for people.

People told us staff did not miss visits. Almost everyone we had contact with said staff were usually on time for their visits. Although three people said staff were sometimes late, particularly at weekends.

Staff received regular training and were knowledgeable how to support and care for people. They had the skills, knowledge and experience to provide safe and effective support.

Staff supported people to have a nutritious dietary and fluid intake, assisting them in preparation of food

and drinks as they needed.

Care plans were in place detailing how people wished to be supported. People who received support or where appropriate their relatives were involved in decisions and consented to their care.

People who used the service and their relatives knew how to raise a concern or to make a complaint. The complaints procedure was available and people said they were encouraged to raise any concerns. Where people had expressed concerns appropriate action had been quickly taken.

Senior staff monitored the support staff provided to people. They checked staff arrived on time and supported people in the way people wanted. Quality audits were carried out regularly and people's views sought.

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.

There were suitable procedures in place to protect people from the risk of abuse.

Staff were appropriately deployed to provide a safe and reliable service. Recruitment procedures were safe.

Medicines were managed safely and given as prescribed.

Is the service effective?

Good 

The service was effective.

Staff were skilled and knowledgeable. This helped them to provide support in the way the person wanted.

The registered manager and staff demonstrated their understanding of the Mental Capacity Act.

People were supported to eat and drink, to have good nutrition and appropriate healthcare.

Is the service caring?

Good 

The service was caring.

People were pleased with the support and care they received. They said staff respected their privacy and dignity and they were treated with kindness and compassion.

People were involved in making decisions about their care and the support they received.

Staff knew and understood the likes, dislikes and preferences of people who received care and support. They were aware of and met each person's diverse cultural, gender and spiritual needs.

Is the service responsive?

The service was responsive.

Care plans were in place outlining people's care and support needs. These reflected their preferences, needs and wishes.

Staff were knowledgeable about how to support people according to their preferences.

People were aware of how to complain if they needed to. They said any comments or complaints were listened to and acted on effectively.

Good 

Is the service well-led?

The service was well led.

The registered persons had clear lines of responsibility and accountability. Staff understood their role and were committed to providing a good standard of support for people in their care.

Systems and procedures were in place to monitor and assess the quality of service people received. Action was taken to make improvements in a timely manner.

People who received a service and their relatives were encouraged to air their views, suggestions and comments.

Good 

I Care (GB) Limited

Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection checked whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

This inspection visit took place on 20 & 27 April 2016 and was announced. The provider was given 48 hours' notice because the location provides a personal care service to people who lived in the community. We needed to be sure that we could access the office premises.

The inspection team consisted of an adult social care inspector 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. The expert by experience for the inspection of I Care (GB) Limited had experience of services for older people and people living with dementia.

Before our inspection on 20 & 27 April 2016 we reviewed the information we held on the service. This included notifications we had received from the provider, about incidents that affect the health, safety and welfare of people the service supported. We also checked to see if any information concerning the care and welfare of people who were supported had been received.

During our inspection we went to the I Care (GB) Limited office and spoke with a range of people about the service. They included the registered manager and two care coordinators. We spoke with or received surveys from 12 care staff. We also spoke with or received surveys from 31 people who used the service or their relatives.

We looked at the care records of four people, training and recruitment records of five staff members and records relating to the management of the service. We contacted Healthwatch Blackpool prior to our inspection. Healthwatch Blackpool is an independent consumer champion for health and social care. We also spoke with the local authority. This helped us to gain a balanced overview of what people experienced accessing the service.

Is the service safe?

Our findings

People and their relatives who spoke with us told they felt safe and secure with the staff who supported them. They told us except in an emergency they always knew the staff, who were familiar with their needs and preferences. One person said, "I feel safe and trust the carers. I know they will look out for us." A relative said, "We feel totally safe. They make sure [family member] is safe when they provide any personal care."

The service had procedures in place to minimise the potential risk of abuse or unsafe care. We spoke with staff who told they had received safeguarding training and were familiar with how to react to safeguarding concerns. They said they would report any suspicions of abuse. We could see they had the knowledge to reduce the risk for people from abuse and discrimination. There had been no safeguarding alerts raised about the service in the previous twelve months.

Risk assessments minimised risks and provided guidance for staff and assisted them in providing the right care. Risks were assessed for the person as well as for environmental risks in the person's home.

There were procedures in place for dealing with emergencies and unexpected events. People had contact details so they could contact the service in emergencies or if they had unexpected additional care needs. We saw emergency situations, accidents or incidents were managed appropriately. These were evaluated for any lessons learnt by the registered manager and shared with the staff team.

We looked at how the service recruited people. We checked the staff files and recruitment information for five recently employed. There was a full employment history on their application forms, including their reasons for leaving previous employment. Gaps in employment had been explored and recorded. References had been received and all checks completed including a Disclosure and Barring Service (DBS) Check before the person was allowed to start work. These checks are made by an employer to reduce the risk of employing unsuitable staff.

We spoke with a member of staff who had only been in post a short while. They told us they had to wait for all checks to be completed before they were given a date to start working with the service. The person said, "Everything was done properly."

We looked at how the service organised staff support to people. We did this to make sure there was enough staff providing care at the times people needed. We looked at staff rotas and checked a random sample of visit times on records to see if staff stayed the agreed times. We also spoke with people supported and their relatives sent out surveys and spoke with staff.

The people we spoke with said I Care provided a safe and reliable service and they had never experienced missed visits. Almost everyone said staff usually arrived on time or let them know if they were delayed. They also said staff stayed the full agreed times. A small number of people said staff occasionally arrived at a different time, particularly at weekends. One person said they were not sure when staff would turn up particularly at weekends and they could get their tea late. But added, "I haven't told the 'office as my usual

carer is excellent." The registered manager said he was aware that there could be a problem, particularly at weekends or when a member of staff went off sick. He told us he was looking at different ways to manage this so people were not waiting for carers.

We asked people and their relatives if staff had enough time on visits to support them as they needed. They said the visits were not usually rushed and staff carried out the agreed tasks and support. Staff said they were given enough time to provide the care and support people needed at each visit. People told us they usually had the same staff. One person said, "I always have the same carers during the week. They can be different at weekend but they have to have a day off." Another person told us, "When I had an issue with the number of staff supporting me, I rang the office and it was quickly resolved."

We looked at the procedures the service had in place for assisting people with their medicines. Staff told us they prompted people to take their medicines and were also involved in assisting people in administering their medicines. Records we checked were complete and staff had recorded the support they had provided people to take their medicines. People told us the arrangements for receiving their medicines were satisfactory.

Staff received medicines training to ensure they were competent to administer medicines. Staff we spoke with confirmed they had been trained and assessed as competent to support people to take their medicines.

Is the service effective?

Our findings

People told us staff provided good care and support and staff had a good understanding of their needs and preferences. One person said, "I have great carers. They are friendly and always willing." Another person told us, "I wouldn't have lived as long as I have if it wasn't for my carers looking after me." A relative said, "They are very helpful and supportive of our situation."

We looked at staff training records and spoke with staff. They told us they received training that was informative and relevant to their role. One member of staff told us, "We have quality support and good training." Another member of staff said, "The training is interesting and helps us to look after people properly." We saw all staff received a company induction and completed national induction standards or the Care Certificate. Over half of the care staff had achieved or were working towards national qualifications in care. Other staff training included; safeguarding, health and safety, fire safety, moving and handling, the Mental Capacity Act, equality and diversity, infection control, food safety and first aid awareness. Staff felt this training provided them with the skills to support people effectively.

Staff were aware of people's health needs and were able to support them appropriately. They had contact details of relevant professionals such as general practitioners or district nurses in care records. Staff could contact them, with the person's permission if they had concerns about a person's health. Where needed staff could support people to attend healthcare appointments.

Care plans seen demonstrated people's dietary needs for health or culture had been assessed and any support they required with their nutrition recorded. Staff prepared meals for people unable to do so and recorded the food provided and if eaten. If they had any concerns about people not eating sufficient they raised this with senior staff. One person said, "I can no longer manage to make my own meals. The girls are a Godsend."

Staff spoken with during our inspection confirmed they had received training in food safety and were aware of safe food handling practices.

Staff spoken with told us they received regular formal supervision where individual staff discussed their performance and development with their manager. Records seen confirmed this. Senior staff also observed the way staff supported people as well as one to one formal discussions. Staff told us they were well supported by senior staff and could speak with senior staff anytime.

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. Senior staff were clear about the process to assess capacity and the procedures they needed to follow. Staff spoken with demonstrated an understanding of the legislation as laid down by the Mental Capacity Act (MCA). We saw they had received training in these areas and were aware of the need to assess capacity.

Is the service caring?

Our findings

People we spoke with told us staff were caring and considerate and treated them with kindness. Almost all the people who spoke with us or completed surveys told us they were pleased with the service. One person said, "I am very happy with the service. My regular carers are excellent. I am very comfortable with them." Another person said, "This is a great service and great carers, couldn't be bettered." One person had not been satisfied and moved to another service. The registered manager told us that they had been unable to offer the person the times they wanted to receive support. They had tried to resolve this but without success. Other people told us they were very satisfied with carers that supported them. People's comments included, "My carer is lovely, an absolute gem." and "I always have the same group of carer's who know how I want to be cared for." Another person said, "They always do what I want them to do and more." A relative told us, "We are lucky with not just the company but the carers as well. They are fantastic"

People told us they were involved in how their care and support was delivered. They told us staff listened to them and 'their staff' cared for them in the way they wanted. One person said, "They know what I want on which day, my laundry, my cleaning and personal care. And they are always clean, tidy and smiling."

The care records we looked at demonstrated that people's care needs and their likes and dislikes and preferences were followed. We talked with staff and saw they were aware and responded to people's individual and diverse needs. "People told us they knew the staff that supported them had up to date information about their needs. They said they were encouraged to make decisions about their care and how this was provided.

Staff had an understanding of people's individual needs around privacy and dignity. People told us staff spoke with them in a polite and respectful way and respected their privacy. One person we spoke with said, "The carers show respect and maintain my dignity while delivering personal care. All my carers are fantastic." Another person told us, "I know all the girls who come to help me. We have a chat while they are doing things for me. They are very discrete. I enjoy them coming." A relative commented that the staff were excellent when their family member was very ill. They said, "The carers helped us every way possible and made some very dark days bearable."

We asked if people had information to help them to access advocacy services should they require someone independent to act on their behalf. We saw the registered manager made people aware about independent advocates.

Before our inspection visit we received information from external agencies about the service. They included the commissioning department at the local authority. Links with these external agencies were good and we received some positive feedback from them about the care provided. They told us they were satisfied with the care people received and had no concerns.

Is the service responsive?

Our findings

People we spoke with told us one of the management team met with them before they agreed to provide care for them. They said they asked them questions about the help they needed to make sure they could meet their needs. Relatives we spoke with told us that they had been included in assessments. We saw assessments in care records. The assessments were instructive and provided enough information for staff to begin to support people in the way they preferred.

Care plans had been developed from the initial assessment. These were informative and took people's needs and preferences into account. We saw people received consistent, personalised care and support. Staff encouraged people to make informed choices and decisions about their care and support. People told us they were involved in and able to make changes to the care and support they received. Care plans were regularly reviewed and updated in response to any changes in care or circumstances. This gave staff guidance about how to support people with their daily routines and personal care needs. One person commented about the staff, "They are wonderful; they will do anything for you. If it wasn't for them I would never get out."

Almost all people we had contact with told us they felt the 'office staff' would always try to help if they needed to make a change to their day or time. One person said the service tries to change the times of our visits if we need them to." Another person told us, "We started off with staff coming too early but we were able to make that a bit later which is better." One person disagreed with this and said, "I asked for set times and carers but this hasn't happened yet." A relative commented, "We wanted carers at a different time. It took a little while but it got sorted. We know they have to fit everything in with other people as well."

One relative was unhappy with the service as they felt they were not providing enough support and supervision to their family member. However I Care is registered to provide personal care in people's own homes, including the apartments in Links View. They are not registered as a care home. Senior staff said they were no longer able to meet the person's needs. They said the person needed more supervision and support to keep them safe than they could provide in their own house or apartment where supervision was minimal.

We looked at the care records which reported instances where staff had needed to provide additional support and direction to the person. They told us they were concerned that the person was unsafe indoors and had tried to leave their home when unsupported. Despite the relative's reluctance, discussion was ongoing with the service and local authority. The management of the service felt the person needed to move to a care service with staff providing care and support throughout the day and night.

We saw the service had procedures in place to respond to emergencies. There was an on call rota in place. We talked with people who used the service and they said they could contact the agency whenever needed. One person told us, "I know who to contact if anything goes wrong. I have the phone number in the phone." A relative said "There is always someone at the end of a phone if you need anything."

The service had a complaints procedure which was made available to people they supported and their

relatives. This explained the ways they could make a complaint. It went on to explain how quickly they would respond to complaints. When we carried out this inspection one formal written complaint had been referred to CQC and received by the service. This was an ongoing issue which was being dealt with by the service. Any concerns that people had raised informally had been quickly dealt with. People said they felt comfortable ringing the office or talking with senior staff about anything they weren't happy with. One person said, "I sorted a problem straight away just by ringing them [senior staff]." Another person commented, "I would tell my carer first if it was something they were doing or not doing and if things didn't improve I'd ring the office."

We also saw where three people had requested not to have a particular member of staff providing their care. This was considered by the service. Senior staff spoke to each person about their concerns and took immediate action to remove that member of staff from providing their care. They also took other appropriate action so the person was no longer providing care to other people.

Is the service well-led?

Our findings

People told us the staff team were approachable and willing to listen to people. They said staff were easy to talk to, were open to discussion and encouraged people to ask questions or raise any concerns. One person said, "They ask us to fill surveys in every so often about what we think of them all. This is as well as checking with us face to face." All but two people or their relatives told us they were able to talk to any of the staff and that they listened to them and dealt with any issues. One person said, "It is a fabulous service with fabulous staff." A relative commented, "They are forever asking us if everything is all right. I could tell any of the staff if I needed them to do something and know they would do it."

We found the service had clear lines of responsibility and accountability with a structured management team in place. The management team were experienced, knowledgeable and familiar with the needs of the people they supported.

The organisation had systems and procedures in place to monitor and assess the quality of their service. Spot checks while staff supported people had been carried out by the management team. These were done to check staff were punctual, respectful, stayed for the amount of time allocated and provided safe care. The management team also used this opportunity to talk with people using the service to see if they were satisfied with the service. There was also regular telephone contact with people who used the service and their relatives and formal reviews of care.

Audits were completed by senior managers in the organisation. Audits included monitoring, care plan records, medication support, staff training and supervision and safety in the office. Any issues found on audits were acted upon and any lessons learnt to improve the service going forward.

Staff meetings were held to involve and consult staff. Staff spoken with told us the team meetings were held on a regular basis. They told us they were able to suggest ideas or give their opinions on any issues.

Staff we spoke with were praising of the support they received from managers. They told us that if they had any issues or concerns there was always support available from senior staff. One person said "We know we are never totally alone we can always ask for back up."

A registered manager was in place and the service was registered appropriately. They understood their responsibilities and were supported by the provider to carry these out. The registered manager had ensured CQC were notified of any incidents or issues in a timely manner.