

Care O.W.L 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 caring?

Good ●

Is the service responsive?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

This announced inspection took place on 25 and 26 May 2017. This was the first inspection of care OWL Limited. Care OWL Limited is registered to provide personal care to people in their own homes. At the time of our inspection they were providing care to 13 people in their own homes.

There was a registered manager in place at the time of our inspection. A registered manager is a person who has registered with the Care Quality Commission 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 and their relatives told us they felt very safe whilst receiving care. Staff understood how to recognise signs of abuse and what to do to report it. Staff were knowledgeable about how to manage people's assessed risks. People told us they were supported by sufficient staff who were always on time and stayed the correct amount of time. The provider had a safe recruitment process in place which ensured people were supported by appropriate staff. All the people we spoke with said they received their medicines on time.

People and their relatives told us the staff who supported them had been trained appropriately to meet their needs. People were involved in making decisions about their own care. When people required support to meet their nutritional needs staff provided the support they needed. People were supported to access outside health professionals.

Without exception everyone we spoke with told us how kind and considerate the staff were. They said staff regularly went over what was expected of them to ensure people received exceptional care. People told us staff always respected their privacy and dignity and treated them with respect. People told us where possible staff enabled them to be as independent as they were able.

People and their relatives told us they were involved in their care and were given choices about the support they received. Staff respected people's views and choices. Staff were knowledgeable about people's needs and individual preferences. The provider had a system in place should people wish to complain, however everyone told us they had not needed to because they were very happy about the care they received.

People told us the service was very well run and they could approach the registered manager when they needed to. People were happy to recommend the service to other people. Staff told us there was strong leadership in the service and they felt supported in their roles and were involved in how the service was run. Systems were in place to ensure people got safe, effective care which responded to their individual needs.

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.

People received safe care from staff who understood how to recognise signs of abuse and how to report it. Staff knew how to support people to manage their risks. There were sufficient staff to support people. People received their medicines when they needed them.

Is the service effective?

Good ●

The service was effective.

People were supported by staff who had received training to meet their needs. People were supported to make choices about their care. When required, people were supported to access food and drink to meet their nutritional needs. People were supported to access healthcare professionals when their health needs changed.

Is the service caring?

Good ●

The service was extremely caring.

All the people who we spoke to praised the staff for the care they delivered and told us staff regularly provided care which was above and beyond their assessed needs to provide exceptional care. People told us staff always promoted their dignity and treated them with respect. Staff ensured they promoted people's independence and regularly went above and beyond to ensure this was embedded into the care they delivered.

Is the service responsive?

Good ●

The service was responsive.

People told us they always received care which met their individual needs. People and their relatives told us they were involved in their care and felt listened to. People told us they had not had to complain because they were more than happy with the care they received. There was a system in place should people wish to complain.

Is the service well-led?

Good 

The service was well led.

People were full of compliments about the care they received and told us they would recommend the service to others. Staff were involved in the running of the service and told us they were well supported by the registered manager. The provider had a system in place to ensure people got the care they needed.

Care O.W.L. 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 took place on 25 and 26 May 2017 and was announced. The provider was given 48 hours' notice because the location provides a domiciliary care service we needed to be sure that someone would be in.

The inspection team consisted of one inspector. We reviewed the information we held about the provider and the service and looked at the notifications the provider had sent us. A notification is information about important events which the provider is required to send us by law.

We contacted the Commissioners of the service to gain their views about the quality of the service provided. We used this information to plan our inspection.

We spoke with three people who used the service and two of their relatives to gain their views of the service provided. We spoke with two member's of staff and the registered manager. During our inspection we looked at three staff records and looked at one person's care records.

Is the service safe?

Our findings

Without exception everyone we spoke to said they felt safe. One person told us, "I absolutely feel safe". Relatives commented they thought their loved ones were safe when staff provided care for their family member. One relative told us it gave them peace of mind knowing their family member was safe. Staff told us they had received training which meant they had the knowledge and skills to protect people from harm and what to do should they suspected anyone was at risk of abuse. Although they had not had reason to raise any concerns the registered manager was aware of their responsibilities in reporting any potential abuse to the local safeguarding authority. People were protected from harm because staff had received training and knew what to do if they had any concerns.

People told us staff managed the risks to their health and safety by offering them support and guidance when required. One person said, "They always make sure I am using the frame right before I am moved. It's always safety first". Staff were knowledgeable about how they supported people to manage risks to their health and safety. One member of staff explained to us how they used equipment to ensure one person's skin was protected from harm and how they ensured their safety when they were moved into different positions. We saw the registered manager had ensured when people had assessed risks they were documented. We saw staff had the knowledge and skills to support people. People were supported to manage their risks by staff who had the knowledge and skills to ensure they were safe.

People were supported by sufficient numbers of staff to meet their needs. Without exception, all the people and their relatives told us staff were on time and never missed a call. One person told us, "They are always on time". Another person said, "They are always on time. You can set your watch by them". People told us they were supported by the same staff and were happy with the length of time staff stayed to support them. People told us staff always had the time to ensure they left everything clean and tidy and always asked if there was anything else they could do for them before they left. People were supported to meet their needs by sufficient staff.

We saw the provider had a system in place to ensure new staff were recruited safely. Staff explained the process in place when they had begun their employment. They told us they had to bring in documents to prove their identity and they were not allowed to commence work until disclosure and Barring Service (DBS) checks had been completed. DBS helps employers to make safer recruitment decisions and prevents unsuitable people being recruited. Records we saw confirmed what staff had told us. The provider had a safe recruitment system in place which ensured people were safe to work with vulnerable people.

Not all the people we spoke to received support to manage their medicine. Those who were told us they were happy with how staff supported them. One person showed us how staff left their medicine for them where they were able to reach it and staff respected their choice with how they chose to take it. Staff told us they had received training and told us how they documented on people's daily records when they had taken it. The registered manager told us they regularly checked people's medicine records to ensure people got their medicine when they needed it. However, they told us they would be changing the process to simplify

how staff recorded people's medicines.

Is the service effective?

Our findings

All of the people and their relatives we spoke to were very happy with the care they received. They told us they thought staff were well trained to provide the care and support for them and their family member. One person told us staff who supported them talked about the training they received with them which gave them assurance they were trained to meet their needs. A relative told us, "They all appear to be trained. I can't fault them". Staff confirmed they received regular training which helped them to provide effective care for people. Staff told us they shadowed more experienced staff before commencing their role and this included the registered manager. The registered manager told us although staff received regular paper based training they also liked to complete hands on training with staff to give both the staff and themselves confidence they were suitable for the role. This also meant that staff got to know how people liked to have the support they required to meet their needs. Staff told us they received a good induction and were not left to support people until the registered manager and people were confident in their abilities. People were supported by staff who had received training to provide effective care.

People told us staff always sought their consent before providing any care. One person said, "They always ask if it is alright before they do anything". Staff understood the need to ask for consent and told us they would not provide care if the person refused.

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. The registered manager told us the people who received care had capacity to make decisions about the care they received.

People can only be deprived of their liberty so that they can receive care and treatment when this is in their best interests and legally authorised under the MCA. The authorisation procedures for this in domiciliary care agencies applications should be made to the Court Of Protection. The manager told us at the time of our inspection they were not depriving any people of their liberty as all the people they provided care to were able to make their own decisions about their care.

Most people we spoke to did not receive support with their meals. However, one relative told us the support their relative did receive meant they could have a cooked meal of their choice on a daily basis. Staff explained to us how they always checked if people had enough food in before they left and on some occasions went over and above the care plan. For example, one member of staff told us how they stopped off at the shops on the way to the person's house to ensure they had sufficient food and drink. People told us staff always asked if they required a drink making before they left.

Staff told us if they had any concerns regarding a person's health they would contact the registered manager so they could inform their family. The registered manager told us they accompanied people to the hospital

or to the doctors if necessary. The registered manager also told us they made referrals to other healthcare professionals with the consent of the person and their family when they believed people had health conditions which required further treatment. They gave us an example of how they had referred a person to a healthcare professional when they had sore skin which they had previously been told would not heal. With the support of the healthcare professional they had managed to heal their sore skin which had resulted in a better quality of life for the person.

Is the service caring?

Our findings

Everyone we spoke to, without exception, gave us very positive accounts of how the staff treated them. One person said, "They are always cheerful. We share banter. We have become friends now". Another person said, "They are so good. They are reliable, friendly, and chatty. We joke together and laugh our heads off". Relatives were enthusiastic about telling us the care their family member received. One relative commented, "[Name of member of staff] is a caring person. Caring in every way".

Everyone, both the people who received the service and their relatives were full of praise about the care they received and the staff who provided the care. People and their relatives were eager to share with us how both the staff and the registered manager provided care which was over and above their care plan. One person explained to us how staff had enabled them to walk again following a stay in hospital. Their relative told us this had made a huge difference in their quality of life. For example, one person told us how they had been supported by staff to walk to attend to some of their personal care needs which had given them some of their dignity back. People told us and the registered manager confirmed how when they first joined the service they were introduced to the member of staff who would support them prior to the care package starting which was important to them. All the people we spoke with felt they knew the member of staff well and staff understood their needs and knew them well. People gave us examples of how the registered manager had offered them advice and guidance in solving some of their health conditions such as pressure care. People told us how the staff gave them total commitment in delivering the care they needed and ensured they were happy and cared for.

People told us they were fully involved with their care and staff respected their views. One person told us, "They couldn't do any more than they already do". A relative told us, "Yes I am involved. We all sit round and chat together about the care." People told us they have the same regular staff and this was important to them. Relatives gave us examples of how they had been involved in the care of their family member but also told us how staff had provided them with extra support to help them at home. One relative told us the staff helped them with carrying equipment upstairs which they were unable to. Another relative told us how staff had cared for their relative to a greater extent than had been outlined in their care plan whilst they were ill which meant they could recover more quickly. One member of staff told us how they collected a person's medicine from the chemist if they were unable to. They continued by telling us, "We have to care. They are like a friend. We are an extension of their family. We know if someone is just having a bad day". The registered manager gave us examples of how staff had shown caring and thoughtful qualities which had also helped develop positive relationships with people who received the service. One example was that a member of staff had stayed over an hour in their own time to wait for an ambulance with one person, and had then accompanied them to the hospital. The registered manager told us if people go into hospital and have no family to support them they continued supporting them with their personal care during their hospital stay which gave people continuity and a familiar face to visit them. A further example was given about one person not having any family and the registered manager regularly cooked dinner and stayed and ate with the person to give them company and prevent isolation.

People told us staff always had time to spend with them and they weren't rushed with their care which

meant the care they received was in a dignified manner. One person commented, "[Name of staff member] always treats me with dignity". They gave us an example of the member of staff sitting outside of the bathroom door whilst they had time to bathe alone but was available should they require any support. A relative told us, [Name of staff} always treats [Name of person] with dignity. They always go above and beyond." Staff knew how to treat people with dignity and how they respected their privacy. The registered manager gave us an example of how they had encouraged one person with their continence needs which had resulted in them gaining some of their confidence back and they no longer required the same level of support.

People told us how they were encouraged to remain as independent as possible. One person told us, "[Name of staff member] does everything I need and allows me to do what I can for myself". A relative gave us an example how staff encouraged their family member to remain independent by encouraging them to help in the kitchen with small tasks such as washing up. A member of staff told us, "It's about helping people to do it themselves". People were supported by staff who encouraged them to be independent where possible.

Is the service responsive?

Our findings

People and their relatives told us staff knew them well and provided care in a personalised way which met their own individual needs. Because they received support from the same regular carers they told us staff knew them and their needs well. One person commented, "They always provide the personal touch. They are kind and patient". They went on to explain how staff respected their wishes in how they chose to have their care delivered and didn't make a fuss about anything, which made them feel comfortable. Another person told us how they didn't think they required any reviews about the care they received because staff knew them so well and always asked about how they liked their care and respected their choice.

People told us they discussed their care needs with staff and their family members when necessary. One person said, "Yes I have a care plan but it hasn't been updated recently because nothing has changed". People gave us descriptions of how staff provided care in the way which they liked and how it was 'the simple little things' that mattered to them. For example, one person described how they used to have a visit four times a day and due to the care they had received from staff and how well staff knew and understood them their care calls had reduced considerably. One person told us they didn't see the need for reviews because staff knew them well enough and would tell the member of staff if anything needed to change. Staff were able to give us details about how they cared for all of the people they looked after and about the care they delivered for them. Because staff knew people well and their preferred choices and routines we saw these were recorded where necessary but staff told us they usually spoke to people to ask their opinions about how they preferred their care and because the staff were consistent there was not always a need to record every detail.

People told us they had not had any reason to complain but felt comfortable in making a complaint should they need to. The registered manager demonstrated they had a system in place should people wish to complain and this was documented on people's contracts, but had not received any complaints to date.

Is the service well-led?

Our findings

Without exception, everyone we spoke to praised the service they received from Care OWL and told us it was well led. One person said, "It's well led, because there's nothing they could improve". A relative told us, "I am totally happy with service [name of registered manager] and their team provides for [name of relative]". Another commented, "It always runs smoothly". People explained how staff always went out of their way to provide excellent care, when and how they wanted it, and gave us examples of how staff were encouraged to go over and beyond to provide exceptional care in every way. The registered manager told us they recruited staff 'from the heart'. They told us how they recognised the values in the staff they recruited which ensured they were able to empathise and show compassion to the people they cared for. Everyone, both people who received the service and their relatives told us they would, and had, recommended the service to other people.

Staff spoke highly of the support they received from the registered manager. They told us how they were supported through regular supervisions and were given more training if they requested it. One member of staff told us, "The registered manager has values which ensure people are looked after over and above the normal standards". Staff told us although they had regular supervisions the registered manager was approachable at any time. One member of staff commented, "I love working here. I've loved all of it. [Name of registered manager] is always there if you need anything or have any questions". Staff told us they were asked for ideas on how to improve the business and one gave us an example of how they had suggested a change and this had been implemented by the provider.

The provider involved people in the running of the service by sending out regular questionnaires to gain people's views on the service they received and how they thought it could be improved. The comments people gave demonstrated they were extremely happy with the service they received and no negative comments had been raised. For example one person said, "Always gives 100% commitment". The registered manager told us they were always looking for ideas on how to improve the service and how their ethos was about caring for people in the way in which they deserve. They told us they had joined a consultation group with ourselves to help joint working. They explained how they liked to meet everybody who received the service and get to know them as well as the staff who supported them to ensure they were approachable by everyone. Everyone we spoke to confirmed they knew the registered manager and felt at ease speaking with them.

The registered manager was aware of their responsibilities in alerting the local authority of any potential safeguarding concerns and when certain incidents occurred they should notify us. The registered manager had systems in place which ensured people got the care they needed at a time they wanted and sufficient staff were available to meet their needs. We found the registered manager had ensured staff were suitable to work with the people they cared for and systems were in place to ensure staff knew the people well and had received training to ensure staff were able to deliver safe, effective and responsive care which met their individual needs.