

Saints Care Agency Ltd

Saint Care Agency

Inspection report

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Date of inspection visit:
30 November 2022

Date of publication:
05 January 2023

Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Requires Improvement ●

Summary of findings

Overall summary

About the service

Saint Care Agency is a domiciliary care agency providing personal care to people with health and social care needs in their own homes. 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 the inspection, 13 people were using the service.

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

The provider's systems and processes had not always enabled them to effectively monitor the quality of the service being provided. Audits and checks were not completed on important aspects of the service provided, such as staff training and the monitoring of people's care calls.

Systems and processes were in place to support people's safety. People were supported by staff who had undergone a robust recruitment process. People and family members spoke of the reliability of the service and the friendliness and caring attitude of staff and management.

There were sufficient staff to meet people's needs. People told us they felt safe and staff ensured they were safeguarded from harm. Staff followed the provider's policy and procedure for infection prevention and control.

Staff were supported through ongoing monitoring and good communication, which ensured information was shared in a timely manner to support in the delivery of personal care.

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

Rating at last inspection

This service was registered with us on 7 October 2014 and this is the 5th inspection. It was rated good at the last inspection.

Why we inspected

The inspection was prompted by concerns we received that safe care was not being provided to a person. As a result, we undertook a focused inspection to review the key questions of safe and well-led only.

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 remained good based on the findings of this inspection.

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?

Good ●

The service was safe.

Details are in our safe findings below.

Is the service well-led?

Requires Improvement ●

The service was not always well-led.

Details are in our well-led findings below.

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Detailed findings

Background to this 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

This inspection was carried out by 1 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

We gave the service 2 days' notice of the inspection. This was because it is a small service and we needed to be sure that the registered manager would be in the office to support the inspection. We also gave time for the registered manager to send us inspection information, so we did not have to spend an extended amount of time in the office of the service.

Inspection activity started on 29 November 2022 and ended 30 November 2022. We visited the office location on 30 November 2022.

What we did before the inspection

We reviewed information we had received about the service and we sought feedback from the local authority. The provider was not asked to complete a Provider Information Return (PIR) prior to this

inspection. A PIR is information providers send us to give some key information about the service, what the service does well and improvements they plan to make.

During the inspection

We spoke with 3 people who used the service about their experience of the care provided and 3 relatives. We also spoke with 3 care staff and the registered manager. We reviewed a range of records. This included 3 care plans.

We looked at 3 staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were also reviewed.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

This key question has been rated Good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were protected from the risk of abuse. People and relatives said staff followed safe working practices and they felt there was good protection from the risk of abuse. One person said, "There has never been a problem with staff. They are very careful with me."
- Staff understood how to safeguard people. Staff were aware of reporting concerns to the registered manager if abuse was suspected or alleged. They knew how to report to a relevant outside agency if no action had been taken by management. Staff had confidence that management would act if there were any concerns about people's safety.
- The registered manager was aware of their duty to report any safeguarding concerns to the local authority safeguarding team.

Assessing risk, safety monitoring and management

- People were protected from risks associated with their care and support. Risk assessments were in place for a range of issues including assisting people with continence and manual handling needs.
- Environmental risk assessments were completed. The assessments identified risks in people's homes. This enabled staff to take action to reduce and mitigate the chance of harm to people.

Staffing and recruitment

- Staff were recruited safely. Recruitment systems for current staff showed evidence of good character and criminal records checks had been completed for staff. Disclosure and Barring Service (DBS) checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions. These checks help prevent unsuitable people from working with people who used the service.
- Care plans identified the number of staff required to deliver care safely. People and relatives told us that the required number of staff were sent to provide personal care.

Preventing and controlling infection

- People were protected from the risk of infection. Everyone told us staff wore personal protective equipment (PPE) during the COVID-19 pandemic, which protected people from the risk of infection.
- Staff told us they had received training from the registered manager in infection control, including COVID-19 and donning and doffing of PPE. They said there was always enough PPE available to ensure people were protected from infection, and that the registered manager always ensured supplies were in place.

Learning lessons when things go wrong

- Processes were in place for the reporting and follow up of accidents or incidents. There had not been an

incident or accident to date.

- The registered manager showed that one lesson had been learnt in relation to the tone of a response to a concern received from a relative.

Using medicines safely

- People or their relatives handled medicines, so the staff of the service did not need to support people with their medicines.
- Staff told us they had received training in medicine administration from the registered manager. They said their competency was checked to ensure they knew how to supply medicine to people safely.
- The medicine policy was detailed and covered all issues of the safe administration of medicines. It supported people to receive their medicines in the way they preferred.

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.

This key question has been rated requires improvement. This meant the service management and leadership was inconsistent. Leaders and the culture they created did not always support the delivery of high-quality, person-centred care.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- Audits and checks had been carried out to see if the service met people's needs. These included checks on the care people received and care records, though not call times and staff training. Although there was no evidence this had impacted on personal care provided, this meant the opportunity to learn lessons may have been missed.
- Staff practice and knowledge was monitored by the registered manager through spot checks and staff supervision. However, issues noted in these records were not always identified as needing action. This included a staff member not wearing an ID card during a care call. There was no evidence this had caused a concern to people using the service, though, if repeated, could cause concern if the staff member was new to the person.
- As the service specialised in end-of-life care, surveys had not been provided to people or their relatives. The registered manager was considering sending out surveys to families at the end of care being provided.
- The registered manager understood their role and the needs of their staff team. Staff understood their responsibilities, and who to report to if they had concerns and needed help.

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

- The registered manager promoted a positive culture that was inclusive and empowering to achieve good outcomes for people. This had been successful for people and the relatives we spoke with. One person said, "Staff are friendly and easy to talk to. They do everything I need in a relaxed way."
- Staff felt fully supported. They said whenever they had an issue, management always responded swiftly and positively. One staff member said, "The manager is very supportive and compassionate. Management are always there if I have a query." Staff told us they were thanked for the care they provided to 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

- The registered manager was aware of the duty of candour. If mistakes were made, they had a duty to be open and honest, issue an apology and take any necessary action.
- The registered manager understood information sharing requirements. They knew that when concerns had been identified, notifications should be sent to the CQC as required by law. There had not been a need to do this to date.

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

- Feedback had been sought from people and their relatives in reviews of care. This showed that they were satisfied that care needs had been met.
- Staff received supervision. Supervision records were detailed showing that relevant issues were discussed such as people's care, staff training and whether staff had any concerns about their roles.
- People told us that they were treated fairly and with respect. They said they did not have any specific cultural or religious requirements.

Working in partnership with others

- The service worked in partnership with others.
- The registered manager was aware of the need to work with health professionals to ensure people's needs were met. There was also information in place for management to liaise with specialist medical professionals when needed. Staff told us that the registered manager had arranged a training session with an expert on motor neurone disease, who had provided guidance on this condition, which they found very useful.
- Staff understood they needed to inform the registered manager and people's families, if people's health had deteriorated or they had an accident.
- The registered manager was receptive to feedback when we discussed the inspection findings and subsequently acted on the issues raised during the inspection.