

Simms Care Services Limited

Home Instead Senior Care

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



Overall summary

We carried out an inspection of Home Instead Welwyn on 27 and 28 October 2015. This was an announced inspection where we gave the provider 24 hours' notice because we needed to ensure someone would be available to speak with us.

Home Instead provides personal care and support to people who live in their own homes. At the time of the inspection Home Instead was supporting 35 people.

We last inspected the service on 5 December 2013 and found the provider was meeting the required standards at that time.

There was a registered manager in post. 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 told us they received safe care, which was reliable and consistent. The service had sufficient staff to meet people's needs, and people were given the time they needed to ensure their care needs were met.

Summary of findings

People were protected from avoidable harm and staff knew what to do if they suspected abuse. Risks to people were assessed and risk management plans were in place.

Staff had the skills, training and support they needed to deliver effective care. All of the staff we spoke with told us they were well supported by each other and the management team.

The service was working to the principles of the Mental Capacity Act, 2005 and care staff supported people to make their own choices about their care.

The owner had robust recruitment processes which helped to ensure that staff members employed to support people were fit to do so. Staff knew their roles and responsibilities and were knowledgeable about the risks of abuse and reporting procedures.

People were supported with a range of services which enabled them to continue to live in their own homes

safely. People and relatives told us they had been involved in the assessment and planning of the care and support provided and that the service responded to changes in people's needs.

All the care staff who dealt with people's medicines had received medicine management training and were clear about their role in managing medicines safely.

People told us the service was well managed and they felt they could approach the manager and owner with any concern and they would be dealt with. Care staff told us they enjoyed working for the service, they received good training and felt supported.

Systems were in place to monitor the quality of the service provided to help ensure people received safe, effective, care and support.

Summary of findings

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

The service was safe.

People were supported by staff who had been safely recruited. The service operated a matching process with the aim of finding care staff who people could relate well to.

Support staff had been provided with training to meet the needs of the people who used the service.

Staff knew how to recognise and report abuse.

People's medicines were managed safely.

Good



Is the service effective?

The service was effective.

People received support from staff who were appropriately trained and supported to carry out their roles.

Staff sought people's consent before providing all aspects of care and support.

People were supported to access a range of health care professionals to ensure that their general health was maintained.

Good



Is the service caring?

The service was caring.

People were treated with kindness and respect.

Staff had a good understanding of people's needs and wishes and responded accordingly.

People's dignity and privacy was promoted and maintained.

Good



Is the service responsive?

The service was responsive.

People had a plan of care and where changes to people's support was needed or requested these were made promptly.

People felt able to raise concerns and had confidence in the owner and the manager to address their concerns appropriately.

Good



Is the service well-led?

The service was well-led.

Staff were clear as to their roles and responsibilities and the lines of accountability across the service.

People's views were sought and systems were in place to constantly monitor the quality of the service.

People, their relatives and staff were positive about the owner and manager and how the agency operated.

Good



Home Instead Senior Care

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 was planned to check 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 27 and 28 October and was carried out by one inspector. The provider was given 24 hours' notice because the location provides a domiciliary care service and we needed to be sure that someone would be available at the location office to see us.

Before the inspection, the provider completed a Provider Information Return (PIR). This is a form that requires them to give some key information about the service, what the service does well and improvements they plan to make. We sent out questionnaires to people who use the service, their relatives, and staff. We also reviewed information we held about the service and we contacted eight health and social care professionals for their feedback and received responses from two.

During the inspection we spoke with the owner, the manager and three care staff. We looked at care plans relating to three people who used the service and four staff files along with other records related to the service. On 28 October we spoke with two people who use the service and two relatives.

Is the service safe?

Our findings

People who used the service told us they felt safe. One person told us, “The person I have is wonderful. They are always on time and in fact sometimes stay over if I need help”. Another person said, “I could not manage without them they know what they are doing and I feel secure with them”. A relative told us, “One of the best care services in my experience. Reliable, regular service, delightful staff.”

Everyone told us staff were reliable and never missed any calls. They all confirmed they had regular care staff. One person said how they had a team of care staff and back up ones if their regulars were away. People told us that if staff were late it was usually because they stayed to help someone else.

Staff were trained in how to safeguard people from avoidable harm and were knowledgeable about the potential risks and signs of abuse. Staff said they would not hesitate to report any issue of concern or use the whistleblowing policy if necessary and were confident in management dealing with it.

People had care plans which included any assessments of risk and how to mitigate them. People told us they had been involved in creating their plan of support. Prior to any service being delivered to people the manager undertook a full assessment of the person’s needs together with an assessment of any risks posed by the support they required or the environment.

People who required assistance of a hoist were supported by staff trained to do so. The manager explained how each staff carried out moving and handling training and were always shown, and made sure they were confident in, the use of each individual hoist. Staff were encouraged to be hoisted themselves to ensure they would have empathy with the person they were supporting.

There was a robust staff recruitment process in place which included carrying out all relevant checks to ensure people’s suitability before they began work. Staff told us they had a formal interview and did not start work until all checks had been completed. We saw references had been received and verified and gaps in employment had been checked prior to the person starting work.

There were sufficient numbers of staff employed by the agency to meet the needs of people who used the service. People told us they never had any missed calls. They said they knew which staff would be visiting. The manager explained staff checked in when they arrived at a person’s house and this was updated in the office so they would be alerted if a care staff had not turned up for any reason.

People told us they were assisted or prompted with their medicines. One person said, “I manage my own medication but they always make sure I have a drink near me and check if I have taken them”. All staff said they had medicines training prior to supporting people.

Is the service effective?

Our findings

People were positive about the care and support they received from Home Instead. One person said, “It is an excellent service. The manager matches people with a carer to make sure they gel and it really works”. A relative told us, “We have a small team of carers and they are very good. They tend to my relative’s needs as they like to be cared for and are pretty good”.

People told us staff knew how they wanted to be supported and worked with them doing extra things if needed. One person said, “I have a very good carer they do extra things and they are a poppet”. People were happy with having the same group of carers which meant they had the consistency in the support they required. A relative wrote, ‘One thing I really appreciate is that my relative sees the same staff regularly and they therefore get to know all their

individual needs. This means they have good background knowledge of what is the norm for them and report any changes to me that cause concern. They provide a very personal service’.

People were supported by staff who had received the appropriate training for their role. The agency had their own training officer and used the new care certificate which is a nationally recognised framework for good practice in the induction of staff. Staff confirmed they had received a comprehensive induction before starting work with the agency which took place over three days. Followed by shadowing experienced carers before beginning to support people. We saw records which showed induction covered

subjects such as medicine administration, safeguarding, mental capacity act and health and safety. The manager explained they had introduced ‘grey matter training’ for all staff and a course from the Alzhiemers Association for all staff once they had been with the agency six months.

Staff told us that they were well supported and could contact the office for help and advice. They received regular supervision and appraisals as well as team meetings. People and staff confirmed the manager or training officer regularly carried out spot checks on their work.

People told us staff always sought consent before supporting them. One staff member spoke of how one person did not want to have a wash and their relative was keen they did. However the carer said, “I could only try and persuade them not push them into doing something against their will however after waiting they did decide to be supported to wash”.

Staff said they did shopping and prepared meals for people making sure they followed any special diets. One carer said, “I know what they like to eat and I encourage them to eat well”.

The staff support people to access healthcare and would, when necessary make referrals to healthcare professions. One person said how the carer contacted the district nurse for them and arranged to get new equipment for them also. A relative said that the carer always alerted them if their relative’s health needs change. Staff told us they accompanied people to hospital and helped organised GP or other health appointments when required.

Is the service caring?

Our findings

Everyone we spoke with were very happy with support they received from the staff at Home Instead. People described carers as, “Brilliant”, “Couldn’t find any better”, and “My carer is wonderful they make it so much easier to manage”. A relative commented, ‘The regular carer is so helpful – they deserve a medal’. Speaking with staff showed they knew the people they supported and had established positive and caring relationships with them.

People said staff worked in a way that upheld their dignity and kept them in control of their care and support. One person said how much better they had felt since receiving support from their carer saying, “They know how to support me they spend time helping me and don’t rush”. Speaking with staff highlighted the emphasis they put on treating people with dignity and respect. They described how they ensured people’s privacy by for example closing doors before providing care. A staff member said, “I always remember what if it was me needing support how would I feel”.

People and, where appropriate, their relatives were fully involved in planning and writing their choice and preferences in their care plans. They were clear about the support required and the time scales. These were reviewed

regularly and updated when necessary. We saw people had signed their care plans. One person told us how the carers really do what they had planned and respect the way they like things done. The manager explained how they visited and reviewed people’s care regularly and especially if they were alerted to any changes.

People’s information was held securely and confidentiality was maintained at all times by all the staff in the agency. When new care staff started to work with a person they were always introduced by the main staff carer or one of the senior staff so people felt comfortable. The manager explained that people could always ask to change their carer without needing to give a reason.

Everyone spoken with said they had frequent contact with the owner, manager and senior staff of the agency. One person said, “I am always asked how things are going if I want to change anything. I can also contact them at any time”.

The manager spoke of how they had supported people towards the end of their lives working closely with the person, their relatives and other care professionals to make them as comfortable as possible. A relative spoke of how they felt relaxed knowing the staff were so caring and attentive to their relative’s needs.

Is the service responsive?

Our findings

People told us that the care was personalised and responsive to their needs. One person said, “They are brilliant, they know what I need and how I like things done they are so good”. A relative wrote ‘They provide a very personal service. I am delighted with the service they give’.

Home Instead offered a range of services to support people to live at home and link people into other agencies when necessary. For example contacting an occupational therapist to review a hoist or calling on a district nurse if a carer became concerned about someone’s pressure areas.

The manager explained they visited each person before the service began to assess and plan their care package with people and their relatives when appropriate. Care plans contained the type of support people required and the length and time of each visit. Home Instead did not do visits of less than an hour unless they were going in more than twice a day and a person only wanted a brief visit to check they were ok. People were very pleased with the length of time the carers stayed and said they supported them in a relaxed and unrushed manner. Staff said they felt they could give their best and spend time supporting people in the way they wanted.

We looked at people’s care plans and saw they gave good detail of people’s care needs and preferences. Carers completed daily notes which provided a brief overview of

the support provided. A relative wrote, ‘The written notes are always appropriate and informative’. We saw carers left each other messages in the daily notes to ensure continuity of care.

People told us their views on the service were sought regularly and they felt able to contact the office at any time with any matter and were confident it would be dealt with. People knew there was a complaints procedure. A person said, “I have not had to complain but if I did I would contact the owner who keeps in contact with me and is very approachable”.

One person said, “A senior person calls round once or twice a year with a questionnaire and to see how things are going. They also call unannounced to see how the carers are doing too.” Another person who used the service wrote, ‘I find Home Instead Senior Care a very caring and understanding agency. If there are any problems I have no issues in talking to them to find a solution if needed’. All the relatives spoken with were equally at ease with contacting the agency about any concerns one person wrote, ‘The agency management are responsive to requests and understand the service that is required and follow up any issues’.

The owner and the manager both said they welcomed feedback and preferred people contacted them with any concern so that it could be dealt with quickly. They also both worked in a way to

pre-empt concerns by regular contact and by staff keeping them up to date with any changes or concerns.

Is the service well-led?

Our findings

People and their relatives told us they were confident in the way the agency was run and had contact with both the owner and the manager. The owner and manager worked closely

together to ensure the service was run effectively. They talked about the open culture they tried to foster within the agency and this was confirmed by the feedback we received from people, their relatives and staff. There was a strong emphasis on providing good personalised reliable care and maintaining people's dignity by not using less than one hour calls. The owner said "We would like to be the first care company people contact".

There were clear lines of responsibility amongst the staff in the office and systems were set up to favour communication amongst the team. Staff told us that the owner, who worked in the office and the manager were approachable and they had confidence that they would listen to and address any issues that they had. They told us that they were asked for their opinions and were able to put forward suggestions. Staff told us that morale was good and they were well supported by the manager and office staff.

Staff meetings were used also for group interactive training based on the care certificate using quizzes and scenarios. For example the last meeting had training on working on a person centred way and privacy and dignity.

There was a clear on call system which people, their relatives and carers could access at any time. The person on call held all the relevant information and could arrange for an extra carer in an emergency.

The owner obtained the views of people who receive a service via questionnaires, spot check visits and regular contact with the owner and the manager. The owner arranged for an external company to carry out an independent quality assurance survey. They said they used the feedback to inform the development of the agency and make any changes people may have suggested. For example making sure people always knew which of their back up carers would be visiting when their usual carer was away.

The owner and manager were involved with a care providers association which enabled them to meet with other care organisations, find out about local and national initiatives and any proposed policy up-dates from the Local Authority.

The owner had systems to monitor the quality of the service and promote continuous improvement, which included reviewing of care plans, risk assessments, spot checks, yearly questionnaires as well as end of service feedback and an independent review of the service. They were in the process of changing their information system to one which will flag up any aspect that requires updating.