

Bago Limited

# Midsummer Court

## Inspection report

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Date of inspection visit:  
09 September 2020

Date of publication:  
28 September 2020

### 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

Midsummer Court is a domiciliary care agency providing support to two people at the time of the inspection.

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

People received safe care. People and their relatives told us they thought the care was safe and staff were aware of their responsibility to keep people safe. Care was risk assessed and staff were employed in sufficient numbers and a safe recruitment process was followed. People were supported to take their medicines in a timely and safe way.

The service was well led. People and their relatives had the opportunity to give regular feedback and make suggestions to improve the service. Relatives told us the registered manager was open and receptive to comments.

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

### Rating at last inspection

The last rating for this service was requires improvement (published 19 September 2019) where the provider had breached the regulations. The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

### Why we inspected

We undertook this focused inspection to check they had followed their action plan and to confirm they now met legal requirements. This report only covers our findings in relation to the Key Questions Safe and Well-led which contain those requirements.

The overall rating for the service has changed from Requires Improvement to Good. This is based on the findings at this inspection. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Midsummer Court on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

## 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.

# Midsummer Court

## **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

The inspection team comprised of two inspectors.

#### Service and service type

DKM Healthcare is a domiciliary care agency. It provides personal care to people living in their own houses and flats.

The service had a manager registered with the Care Quality Commission. This means that they are legally responsible for how the service is run and for the quality and safety of the care provided.

#### Notice of inspection

We gave the service 48 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the provider or registered manager would be in the office to support the inspection.

#### What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. We made calls to people who used the service or where they could not speak with us, their close relatives.

The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report.

We sought feedback from the local authority and professionals who work with the service and Healthwatch. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England. We used all of this information to plan our inspection.

#### During the inspection

We spoke with two people who used the service and two relatives about their experience of the care provided. We spoke with four members of staff including the registered manager, deputy manager, and two care workers.

We reviewed a range of records. This included two people's care records and multiple medication records. We looked at three 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 reviewed.

#### After the inspection

We continued to seek clarification from the provider to validate evidence found.

# 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 as Requires Improvement. At this inspection this key question has improved to Good. This meant people were safe and protected from avoidable harm.

### Using medicines safely

At our last inspection we identified that staff did not complete any record of the medicines they had given to people. This meant there was a breach of Regulation 12 of the Health and Social Care Act (Regulated Activities) Regulations 2014. At this inspection we found improvements had been made and the provider was no longer in breach.

- The provider had introduced medicine records and provided training to staff on how to complete these. This assisted management to ensure people had been given their prescribed medicines.
- We saw that staff had received training in medicines administration and had their competency assessed regularly.
- Medicine records were regularly audited to identify any errors or omissions.
- There were policies and procedures in place to ensure medicines were managed safely. People told us staff administered their medicines safely.

### Systems and processes to safeguard people from the risk of abuse

- People told us they felt safe and secure with carers. Staff had received safeguarding training and told us they would always report any concerns to the registered manager.
- One person told us, "Yes [I feel] extremely safe, [named] comes when she says she'll come. "She's very kind to me and helps me."
- When we asked a relative if they felt their relation was safe, they replied, "Definitely (named) loves them [staff] and is more than happy with them, as are we."
- People told us staff always wore uniforms and identity badges, so they knew who they were.
- The management team understood their responsibilities and were aware to report any concerns to the local safeguarding team to protect people from the risk of abuse.

### Assessing risk, safety monitoring and management

- People's care had been risk assessed. Staff sought information from people and their relatives to ensure care met people's needs and was provided safely and in line with current guidance.
- Each care plan contained an environmental risk plan to ensure people and staff were safe in people's homes.

### Staffing and recruitment

- The service had sufficient staff. The registered manager currently completed the calls as the employed staff were taking time off work due to the pandemic.

- People told us they always received the right number of staff to help them. The management team told us they always had staff on standby to cover sickness if they could not cover care calls themselves.
- Appropriate pre-employment checks had been carried out on new members of staff to ensure they were suitable to work at the service.

#### Preventing and controlling infection

- Staff had training in preventing and controlling the spread of infection and understood their role in how to protect people.
- The nominated individual and registered manager had undertaken additional training due to the COVID pandemic. This improved their infection control knowledge and awareness of how to reduce the potential for transfer of infection.
- Staff received training in food hygiene, to ensure food was prepared for people safely.
- People told us staff washed their hands and wore Personal Protective Equipment (PPE) such as masks, aprons and gloves when appropriate.

#### Learning lessons when things go wrong

- There was a system in place to record and review accidents or incidents although none had occurred in the last 12 months.
- Should an accident or incident occur, all completed records would be overseen by the provider to identify any measures needed to mitigate the risk of reoccurrence. We saw that learning about this had been shared with staff.

# 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 as Requires Improvement. At this inspection this key question has improved to Good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for 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 management team was very person-centred and was committed to providing high quality care. The registered manager provided the majority of the care and so ensured a good level of consistency. They were looking forward to expanding the business and said they would retain an element of hands on care to ensure the current levels of care did not deteriorate.
- The management team were open to change and learned lessons when things went wrong. They gave us an example of a recent complaint that turned out to be a misunderstanding. This had resulted in them reflecting on how staff could improve communication to avoid misunderstandings.
- The registered manager told us they were proud of the service they provided and good staff were an integral part of that.

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

- Quality audits were performed to identify and address issues. We saw audits of medicines and care plan records which were completed regularly so any issues could be addressed.
- The management team visited people regularly to check the quality of their care and to perform spot checks on staff to monitor the care delivered. The management team tracked staff call times to monitor consistency and length of calls.
- The management team understood what they needed to report to us legally and submitted notifications of significant events.

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

- There were staff meetings where staff could raise issues and discuss concerns.
- There had not been any formal surveys sent out to people or their relatives to gather their views about the service. The registered manager currently provided all of the personal care and was in regular telephone contact with people's relatives and ascertained their opinions about the care provided.
- People who used the service and their relatives were encouraged to place any comments on the company website. We saw positive comments had been added recently about the quality of care provided.
- The management team told us they kept in regular contact with staff to ensure they forwarded any concerns people may have had.



#### Continuous learning and improving care

- Staff had regular support through supervisions, spot checks and regular meetings to reflect on care in order to improve and learn.
- The registered manager regularly accessed a national forum for domiciliary care managers to keep up to date with changes and share best practice.

#### Working in partnership with others

- The service worked with a number of outside agencies such as social services and healthcare professionals to support people.