

APR Care Ltd

Caremark Harborough, Kettering, Corby

Inspection report

Unit 8, Ground Floor, Kibworth Business Park
Nursery Court
Kibworth
Leicestershire
LE8 0EX

Tel: 01162792444

Date of inspection visit:
11 January 2017

Date of publication:
21 February 2017

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

We carried out our inspection on 11 January 2017. The inspection was announced.

Caremark Harborough, Kettering and Corby is a domiciliary care service providing care and support to people living in their own homes. The office is based in Kibworth Harcourt Leicestershire. The service provide support to people living in Leicestershire and surrounding towns and villages. They support people with a variety of care needs including physical disabilities, general care and domestic needs. At the time of our inspection there were 12 people using the service.

The service had a registered manager. 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 that they felt safe using the services of Caremark Harborough, Kettering and Corby. They felt safe because they trusted staff's ability to look after them. Staff knew their responsibility to keep people safe from harm and abuse. They followed the provider's guidelines to support people and report any concerns they had on people safety and wellbeing.

There were enough staff to meet people's needs. Staff attended to people in a timely manner and kept to the agreed times stated in people's care records. The provider completed relevant pre-employment checks which assured them of staff suitability to work with people that used the service.

Staff had the relevant skills they required to meet people's needs. They were provided with adequate training that they required to carry out their role effectively. The registered managing and director offered support and guidance when required.

People were supported in accordance to the Mental Capacity Act (MCA) 2005. Staff sought people's consent before they supported them.

Staff supported people to meet their nutritional needs. They also supported people to access health care services when they needed this.

Staff were knowledgeable about the needs of the people they supported. They treated people with compassion, respect and dignity. They supported people to be as independent as possible and respected their decisions about their care.

People's care plans reflected their individual needs and preferences. Their care was provided in a manner that tailored to the needs of the individual. The provider was flexible to meet people's changing needs and request.

People were satisfied with the service. They knew how to raise a complaint if required. The provider listened to feedback from people using the service and their relatives and acted promptly to respond to any complaints.

People complimented the management team and the service they provided. The managing director and registered manager were easily accessible and approachable. Staff felt supported in their role which enabled them to deliver a good standard of care. The provider had effective procedures for monitoring and assessing the quality of service that people received.

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 support from suitably recruited staff at the agreed times.

Staff were aware of their responsibilities to keep people safe from avoidable harm.

People felt safe when they received care from staff. They received the support they required to take their medicines.

Is the service effective?

Good ●

The service was effective.

Staff had the skills to meet people's needs. They had access to effective training and regular support and guidance.

People were supported in accordance with the Mental Capacity Act 2005 and Deprivation of Liberty Safeguards. Staff sought their consent before they provided support.

People were effectively supported with their nutritional and healthcare needs.

Is the service caring?

Good ●

The service was caring.

People felt respected. Staff treated them with dignity and made them feel like they mattered.

Staff supported people in a kind and compassionate way.

People were involved in decisions about their care. They were supported to remain as independent as possible.

Is the service responsive?

Good ●

The service responsive.

The support that people received from staff focused on their individual needs and the outcomes that they wanted to achieve.

People's care plans reflected their current needs. Staff reviewed people's records.

People knew how to raise any concerns or complaints they may have. The registered manager dealt with their concerns promptly.

Is the service well-led?

Good ●

The service was well-led.

The provider had procedures for monitoring and assessing the quality of the service. They used these to ensure that they provided high quality care.

The management team were easily accessible and readily supported staff to meet people's needs.

People were satisfied with the service that they received and were confident to recommend the service to other people.

Caremark Harborough, Kettering, Corby

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.

We carried out our inspection visit on 11 January 2017. The inspection 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 an inspector and an expert by experience. An ExE is a person who has personal experience of using this type of service or caring for someone who uses this type of service.

Before our inspection visit we reviewed information we held about the service. This included notifications sent to us by the provider. Notifications tell us about important events which the service is required to tell us by law.

We used a variety of methods to inspect the service. We spoke with three people who used the service, relatives of five people who used the service, two care staff, the managing director and the registered manager. We looked at the care records of two people who used the service, a person's medicines records, staff training records, two staff recruitment records and the provider's quality assurance documentation and policies. We had email contact with the service's training provider who gave us feedback about the provider.

Is the service safe?

Our findings

People felt safe when they received support from their care staff. A person that used the service told us, "The care I have is safe; they are really very good." A relative told us, "[Person] is hoisted and they are always safe in their handling of them."

Care staff knew their responsibilities to keep people safe from avoidable harm and abuse. They knew what constituted abuse and knew how to apply the provider's policies to report any concerns that they may have regarding people's welfare. They told us they reported any concerns they had to the registered manager or managing director who responded to address their concerns. A care staff told us, "I've raised concerns with [registered manager] and filled out relevant forms. If my concerns were not dealt with I know I will have to go higher. We [staff] have got the policies regarding agencies we could report to."

Staff assessed risks associated with people's care and ensured that there were measures in place to support them to provide safe care and to minimise the likelihood of harm to people. This included risks in people's home and those associated with their health condition. A relative told us, "[Person] likes to scratch sometimes but every mark is evaluated [by staff]." Staff ensured that where people required equipment to support their needs such as a mobility aid, that these were safe for use. We saw that risk assessments were reviewed to ensure that they reflected the level of support people currently required. They did this more frequently where people had been assessed as having a higher likelihood of risk occurring.

People told us that their care staff kept to the agreed times of their support and promptly informed them of any potential changes to their care times. People were supported by the same set of care staff. They told us that they found this reassuring. One person told us, "The staff are usually on time and I have the same staff who have gotten to know me. I can't fault it at all." Another person said, "They are occasionally a little late but they always let me know." A relative told us, "The staff always turn up and they let me know by phone if they are ever late, which is unusual. They keep me informed so it doesn't cause any problems. I can't believe how well they run with call times or how good they are as a company." Another relative said, "We know the team who come and they are always on time for us." Other comments included, "The staff are always on time and always turn up. They give safe care and we have a regular team of staff."

We reviewed staff records which showed that the provider had safe recruitment practices. They completed relevant pre-employment checks which ensured new staff were safe with the people using the service. These included obtaining references that asked for feedback about prospective staff and a Disclosure and Barring Service (DBS) check. DBS checks were completed before staff commenced their employment.

Most of the people we spoke with managed their own medicines. We saw that the provider had systems in place to safely support people with their medicines should they require this support. We reviewed the records of a person that staff supported with their medicines. We saw that staff followed the provider's guidance when they administered the person's medicines and completed their medicines records accordingly. We saw that when the person's medicines changed, the provider updated their records and guidance to support staff when delivering this task.

Is the service effective?

Our findings

People were supported by suitably trained staff. They told us that staff had the skills and knowledge to understand their needs and support them effectively. One person told us, "The staff certainly seem to be well trained. If there are new staff the manager will bring them to the house and introduce them. The next visit the manager will shadow and train them." Another person told us, "They do seem well trained and they give the care to the standards that they have been taught." A relative told us, "They [staff] are very well trained and they know [person]'s needs. Since we have been with this company it is remarkable, whenever staff arrive there is a wonderful smile on [person]'s face." Another relative told us, "The staff seem to be adequately trained and they are respectful."

Staff told us that they found their training effective because it equipped them to carry out their role to a high standard. A care staff told us, "It [training] is quite in-depth. [Registered manager] made it much better because he explains why. By explaining it gives you a better understanding of the topic." Staff went on to tell us that the registered manager and managing director were available to support them in people's home should they need further support to understand people's needs. A care staff told us, "If I feel I need any extra training [registered manager] is always on hand." Another care staff told us, "If I am unsure why [registered manager] and [managing director] will come out and show us."

Training staff received included completion of the Care Certificate. The Care Certificate is a national induction tool which outlines the standards expected of providers to support their staff to work to the expected requirements within the health and social care sector. Their training provider told us that staff completed the Care Certificate study materials and that, "A high standard of work is being maintained."

People's care and support were provided in line with relevant legislation and guidance. The Mental Capacity Act (MCA) 2005 provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The MCA 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. We checked whether the service was working within the principles of the MCA. We reviewed records that showed that staff had received training in the MCA. Staff that we spoke with demonstrated that they understood and applied MCA when they supported people. The registered manager told us that they were in the process of arranging further MCA training for staff. A relative told us, "[Staff] always ask consent." People's records of care staff's daily support to them showed that staff sought their consent before they provided support to them.

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. Applications must be made to the Court of Protection if the provider was seeking to deprive people of their liberty. The provider had not made requests as none of the people who used the service required a deprivation of their liberty.

People were supported to meet their nutritional needs where this was required. People's care plans set out

the support that they required to ensure that their nutritional needs were met. Records of the daily support that people received showed that they were satisfied with the support that staff provided them to eat and drink.

People were supported to access health care services when they needed it. People's care records guided staff on how to escalate and report any changes in people's health. We reviewed records of incidents that showed that staff followed this guidance and promptly sought advice from senior staff or referred people to health care professionals when needed. People's records also showed that care staff supported them to monitor their health and followed recommendations by health professionals. One person's records showed that staff worked as part of team with other providers and professionals to deliver the care required.

Is the service caring?

Our findings

People spoke positively and warmly of their care staff. They said that the compassionate attitudes of staff had given them a positive experience of care. One person told us, "They [staff] are all lovely, personable people, they are happy to chat and they interact with my family. They do not have tunnel vision in pursuing the tasks required and will take time out for you." Another person told us, "They are very caring and polite staff. I like them; they are very easy to get on with. They are so kind." Another person described staff as, "Caring carers who have something special about them; that little bit extra."

Relatives also spoke about the kindness of the care staff. They told us that staff considered their wellbeing as relatives in addition to that of people who used the service. A relative told us, "They are friendly, likeable and always want what is best for my husband, but also me too." Another relative said, "They always have time for us, there is no rush or hurry. They are lovely; polite, kind and always have a smile. They show respect and treat my husband with dignity. We look forward to them coming."

People told us that staff supported them to make decisions about their care and that staff respected their choices and supported them according to their preference. One person told us, "They [staff] help with [task] which is quite satisfactory and they always ask my preference on [task]." Another person told us, "They always ask how I like things done."

People felt that staff respected them as individuals and treated them in a way that made them feel like they mattered. One person told us, "They show me respect." Another person told us, "I really cannot fault the girls [care staff] at all. We have good laughs and chats and they respect me and my home. They don't try to take over." A relative told us, "I like that they always bring new staff and introduce them to us in person before working with them to show them how care should be delivered."

Staff were knowledgeable about the people they supported. One person told us, "They know me; they get to know what I like." A relative told us, "They know [person] and what he likes. He is happy." Another relative told us, "They take the time to talk to [person] and they know what he needs." Staff we spoke with told us that the provider arranged care in a way that allowed them to spend time with people and get to know them. A care staff told us, "We have more than enough time for clients. For one person in their care plan it says we have to have a cup of tea with them. [Person] really enjoys the company."

People were supported to remain as independent as possible. One person told us, "I like to be independent; they help to motivate me without being bossy." Another person told us, "They really help me to be independent." The registered manager and managing director told us that their aim was to enable and empower people to be able to be independent with their own care where possible. They gave us examples of how they had supported people to reduce the number of times they required care workers to support them. They also told us how they had worked therapeutically with a person to overcome their anxiety which allowed them to become more independent with their daily living tasks and enabled them to access their local community independently. Records showed that staff supported a person with completing domestic tasks to support them to continue to live in their own home.

Is the service responsive?

Our findings

The care that people received was tailored to their individual needs. A relative told us, "They [staff] seem able to adapt to the needs of the day. We have got to know them and they always talk to [person], even if he doesn't respond. They are adaptable and deal with whatever is required." Records we reviewed showed that the provider was flexible in their care arrangements to meet the needs of people that used the service. For example, we saw that they adjusted call times and staff availability to meet people's request and preference. Records of the daily care that people received showed that they were supported according to their individual needs. A care staff told us, "They [provider] are really good and flexible. [People] feel comfortable to ask for changes."

The managing director and registered manager told us that their company provided support only when they were certain that they had the full resources to meet the needs of a potential client. The registered manager told us, "Some people we have refused calls. If we can't do it we signpost them. We say to people, we may not be able to support you but you can use us as a sounding board." The managing director told us, "Because we are not taking on too much, we have that leeway to be flexible."

Staff assessed people needs before they received support from Caremark Harborough, Kettering and Corby. They used information from their assessment to develop a care plan. We saw that people's care plan were comprehensive and focused on them as individuals, the support they required and the outcomes they hoped to achieve with the support of their care staff. The registered manager told us, "Everything thing we do is outcome focused." Staff gave us examples of how they had supported people to achieve some outcomes that they wanted to achieve. A relative told us, "They are very good. They came out twice to meet her and get to know her. They are good at building relationships and in my opinion are extremely good as a company."

People told us that senior staff involved them and their relatives in the development of their care plan, and that staff reviewed and updated their records regularly to reflect their current needs. One person told us, "I do have a care plan in the house, as well as my own and they update this whenever they visit." Another person said, "I do have a care plan in the house. They update it as they need to." A relative told us, "They visit us regularly to review the care."

People knew how to make a complaint should they have needed to. People we spoke with were satisfied with the service and most people told us that they had not had any reason to make a complaint. They were confident that should they need to, their complaint would be dealt with satisfactorily. One person told us, "I have never had to complain. I could talk to any of them, carers or office staff because you get to know them so well. It is nice to have that relationship." Another person told us, "I did have to raise an issue on one occasion but this was dealt with thoroughly and I was very satisfied with the outcome. A relative told us, "We have no issues whatsoever but we would be fine with raising them should we ever need to." Another relative told us, "I haven't ever needed to raise an issue but they are very considerate and I think they would be very concerned if there were an issue." A care staff told us, "I do have clients say things [complain] to me and I pass it to [registered manager] and [director], they will arrange a telephone conversation or visit. Anything

that has cropped up has been sorted." We saw records of a complaint which highlighted issues of staff practice. We saw that the registered manager investigated this satisfactorily.

A relative told us, "I have no issues of trust and no worries or concerns at all. We are really pleased with them."

Is the service well-led?

Our findings

The service had a registered manager. It is condition of registration that the service has a registered manager in order to provide regulated activities to people. The registered manager understood their responsibilities to report events such as accidents and incidents to the Care Quality Commission. The registered manager was supported in their role by the managing director.

People spoke very highly of the management team. They told us that the registered manager and managing director were approachable and took time to maintain contact with them. One person told us, "I know the manager [name] and also [managing director]. They are approachable and often step in to do calls themselves. They are lovely people." Another person said, "[Managing director] often calls round. The staff seem happy in their work too which says a lot." A relative told us, "The managers hand deliver our rota as they like to stay in touch and check that everything is ok." Another relative said, "[Managing director] and [registered manager] manage the company and they are excellent. They often come to see us in person. They give 150% as a team. The management are always calling to see how we are. [Person] even had a birthday card and gift, as did all the clients at Christmas."

People went on to tell us that they would recommend the service to other people. One person said, "They are very helpful and the company as a whole is very efficient and they cope very well. I couldn't fault them at any level. We came via a personal recommendation and I would happily recommend them to others. They are genuinely excellent." A relative told us, "There is nothing I would improve as it is a pleasure to say that they are of the highest quality. I would most definitely recommend them as a company. They are the company to go with, they genuinely do care." We received similar comments from other people and relatives.

The management team supported staff to meet the standards they expected of them. They did this through supervision meetings, 'spot checks' and team meetings. At supervision meetings staff and their manager could discuss the staff member's on-going performance, development and support needs and any concerns. A care staff told us, "We have regular contact with them [registered manager and director]." Another care staff told us, "They give you updates on performance." An external training provider told us, "Their management team is one of the most supportive I have come across in many years of assessing and they receive feedback from me following my review visits and ensure that study time is available for them [staff]. There is a mutual respect between management and support staff here which is so good to see."

Staff also complimented the support they received from the director and the registered manager. A care staff told us, "They are lovely people to work for. They are approachable." Another care staff told us, "I have found working here perfect – a breath of fresh air. I've had care jobs before, I was close to giving up ... Caremark has lived up to their promise."

The provider had systems in place to assess and monitor that they provided a good quality service. The provider's systems and procedures consisted of regular home visits and telephone contacts to check that people were satisfied with the service they received. People's feedback and records were positive and

showed their satisfaction with the service they received. The registered manager completed audits to ensure that people received their care in a timely. We saw that there were no incidents where people had not received their scheduled call, and on occasion where staff arrived late, the provider compensated people accordingly. For example, they removed the call charge for one person and for another person they ensured that staff spent extra time with them at their next visit.

Senior staff carried out unannounced 'spot checks' to ensure care staff provided a good quality service. We saw that the managing director audited people daily records to check that staff supported them as directed and completed their records accordingly.

We also saw that the provider had sought support from the local authority's quality improvement team for reassurance that their systems and procedures would continue to meet the needs of people who used the service.