

Sugarman Health and Wellbeing Limited

Sugarman Health and Wellbeing - Dorset

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

About the service

Sugarman Health and Wellbeing - Dorset is a domiciliary care service providing personal care and support to people in their own homes. The service delivers support to children, young people and adults requiring complex care and continuing healthcare. The frequency and duration of visits across the service varied dependent on people's needs. At the time of our inspection there were 23 people being provided with support.

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.

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

People told us they felt safe when supported by the care staff. People and their relatives described both care and office staff as being kind, competent and well trained.

Risks in people's lives were well known with all avenues explored to minimise the identified risks without being unduly restrictive. A professional noted staff "demonstrated good competence in keeping people safe and managing risk."

People were supported by safely recruited staff who had received safeguarding training and demonstrated a good understanding of the signs and symptoms that could indicate someone was experiencing harm and abuse. A person expressed, "I feel really comfortable and confident with the way they care for me." Staff were confident if they raised concerns appropriate action would be taken.

The service worked closely with commissioners and health professionals to provide holistic and timely support to people as their needs changed. Reviews were held regularly with input from all relevant parties including the person being supported.

People and their relatives felt listened to and involved in their day to day care. People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

People's communication needs and preferences were known, respected and met. Complaints were acknowledged and investigations conducted to resolve issues in line with the provider's complaints policy.

There was a supportive and one-team approach at the service. Care staff and office staff worked cohesively. Staff told us they enjoyed working for the service and supporting their colleagues. Staff told us the service were flexible in helping them manage caring responsibilities and have a good work-life balance.

People, relatives, staff and professionals were unanimous in their praise of the registered manager who was

seen as supportive, approachable and a good listener.

Staff felt valued and told us they were actively encouraged to learn new skills and qualifications. A staff member said, "Sugarman takes pride in helping staff improve and gain opportunities to progress within the company."

The service had developed a good working relationship and reputation with health professionals and local commissioners. The service worked closely with schools and day centres to help people transition between home and other settings.

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 1 April 2020 and this is the first inspection.

Why we inspected

This inspection was prompted by a review of the information we held about this service.

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?

The service was safe.

Details are in our safe findings below.

Good ●

Is the service effective?

The service was effective.

Details are in our effective findings below.

Good ●

Is the service caring?

The service was caring.

Details are in our caring findings below.

Good ●

Is the service responsive?

The service was responsive.

Details are in our responsive findings below.

Good ●

Is the service well-led?

The service was well-led.

Details are in our well-led findings below.

Good ●

Sugarman Health and Wellbeing - Dorset

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 Health and Social Care Act 2008.

Inspection team

The inspection was carried out by an inspector and an Expert by Experience. The Expert by Experience made telephone calls to people and relatives to get their views on the service. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

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

The service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service.. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

At the time of our inspection there was a registered manager in post.

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.

Inspection activity started on 17 March 2022 and ended on 22 March 2022. We visited the location's office on 17 March 2022.

What we did before inspection

We reviewed information we had received about the service since it was registered with us. We sought feedback from the local authority and professionals who work with the service. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with five people and three relatives about the service they receive. We spoke with the registered manager and the rota coordinator. We emailed 26 members of staff and five health professionals to obtain their views of the service. We obtained feedback from 13 staff (11 by email and two by telephone).

We reviewed a range of records. This included four people's care records and multiple medication records. We looked at four staff files in relation to recruitment, training 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. We received feedback from two health professionals who visit people supported by the service.

Is the service safe?

Our findings

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

This is the first inspection of this newly registered service. 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; Assessing risk, safety monitoring and management

- Staff recognised the signs and symptoms that could indicate people were experiencing harm or abuse and knew how to report such concerns.
- People told us they felt safe and well cared supported by the service. Their comments included, "I feel safe when hoisted" and "I feel safe that they know what they are doing." Relatives said they felt the same with one expressing, "We feel very happy that [family member] is safe. Well we must do, as we have just been away on a much-needed break and it all worked well."
- Staff told us they would not hesitate to whistle blow if they observed or heard about poor or abusive practice. They were confident management would take concerns seriously and follow up as appropriate. A staff member explained, "I once reported an issue regarding moving and handling practice of a peer. This has been handled very well and confidentially."
- People were supported to stay safe without being unduly restrictive. A professional commented, "We find staff follow professional advice and have demonstrated good competence in keeping people safe and managing risk." A relative said, "They ask questions if unsure and read the updates."
- People's risks were assessed, monitored and regularly reviewed. This covered areas such as falls, home environment, choking, going out, repositioning and dietary intake. A staff member said, "With all clients I worked with, I felt safe to do so and appropriate risk assessments have been completed." A professional offered, "The staff I have encountered understand risk."

Staffing and recruitment

- People were supported by sufficient numbers of knowledgeable and competent staff which helped to keep them safe and meet their needs.
- The service had safe recruitment practices. Checks were done to reduce the risk that staff were unsuitable to support people. This included verified references from previous employers, right to work in the UK and Disclosure and Barring Service (DBS) checks. DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.
- Recruitment had been challenging during the COVID-19 pandemic. The service had worked to overcome this by using targeted advertising and utilising social media platforms. The service had received a good response with their 'refer a friend' scheme. Tailored adverts were used to better match staff to people.

Using medicines safely

- People were supported to take their medicines safely, in a way that suited them.

- Staff who administered medicines were trained and competent to administer medicines safely.
- Medicine records detailed the medicines people required and the reason they were prescribed. Medicine records were held electronically. Regular spot checks were undertaken to ensure compliance. Where any errors were identified these were followed up in a timely way.

Preventing and controlling infection

- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was accessing testing for people using the service and staff.
- We were assured that the provider was promoting safety through good hand hygiene.
- We were assured that the provider's infection prevention and control policy was up to date.

Learning lessons when things go wrong

- The service completed accident and incident reporting forms. These were reviewed by the registered manager to determine the root cause and any proactive action required to limit the chance of a reoccurrence. Learning was shared with staff.
- Lessons learnt had led to improvements to people's care plans, the introduction of additional risk assessments and better communication with and from other agencies.

Is the service effective?

Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

This is the first inspection for this newly registered service. This key question has been rated good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- People had pre-assessments to support their move to the service. This included their needs, abilities, lifestyle choices and goals. These were created using nationally recognised assessment tools with involvement of the person, relatives, staff and relevant health and social care professionals.
- Assessments included the use of technology and equipment including those used to provide pressure relief and to support people to reposition.

Staff support: induction, training, skills and experience

- Induction included completion of mandatory training and shadow shifts with more experienced care and clinical staff. Meet and greet visits were arranged so people and staff could familiarise themselves with each other. A staff member explained, "I had online training, face to face clinical training and competency checks specific to the client I was going into." Another said, "My induction included information on the client, more training if necessary, shadow shifts until I was ready and confident with the work, also lots of questions to make sure I am ready, and I know all protocols when signed off by the nurse."
- New staff without previous experience in care were supported to do the Care Certificate. The Care Certificate is an agreed set of standards that define the knowledge, skills and behaviours expected of specific job roles in the health and social care sectors. It is made up of the 15 minimum standards that should form part of a robust induction programme.
- Staff were trained to meet people's specific needs. Due to the pandemic the service had delivered most training online but was in the process of reverting back to face to face training. A person said, "I think they are quite well trained." Staff commented, "I feel the clinical training is good and the training that we do face to face with the clinical lead nurses is good as well. I find these both very helpful when going into a complex client" and "I receive all the training I need to carry out my job in a relaxed and confident state."
- Staff had regular spot checks and assessments of their competency. Additional training and support were provided as required. A staff member said, "I have completed many courses which has helped me gain confidence. Sugarman has made sure I have completed my training on time."
- Staff were supported by an on-call duty system. Staff told us, "[This is] very helpful at any time of the day 24/7, they respond quickly and effectively. Overall, very reliable and I feel properly supported every time I need to pick up the phone" and "There are four of us rotating one week each. The nurses are also always available for guidance and support including out of hours."

Supporting people to eat and drink enough to maintain a balanced diet

- People were supported to have a healthy and varied dietary intake according to their needs and preferences.

- Some people had their nutrition through an enteral tube. This is a tube that goes directly into a person's stomach. Staff had specific training on how to manage this.
- Where any concerns were identified with people experiencing weight loss or gain the service sought specialist advice for example from the speech and language team, GP or dietician.

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- The service understood the importance and benefits of timely referral to community health and social care professionals to help maintain people's health and well-being.
- Health professionals praised the service. In reflecting of what they thought the service does well a professional stated, "Working with other providers, communicating with the commissioner, willing to learn and work with patients with complex needs."

Ensuring consent to care and treatment in line with law and guidance

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 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.

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA.

When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty.

We checked whether the service was working within the principles of the MCA.

- People's care plans included MCA assessments and best interest decisions where required. Records noted involvement and/or decision making by relevant parties including relatives, health professionals and, where appropriate, legal representatives. The registered manager told us they would ensure evidence of legal representation is always requested and recorded.
- All staff had received training to understand their responsibilities under the MCA and were able to confidently tell us how they sought consent and worked in people's best interests. A staff member expressed, "Getting consent helps us promote patient's choice and ensures their rights [are] respected." Another staff member said, "It is important as every client has the right to choose, as it helps them to feel valued, respected and in control of their own life."

Is the service caring?

Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

This is the first inspection for this newly registered service. This key question has been rated good. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; respecting equality and diversity; Supporting people to express their views and be involved in making decisions about their care

- People were treated well by staff who had received equality and diversity training as part of their induction.
- Care and support was provided in line with people's identified faith-based needs.
- People felt respected as individuals. Their feedback included, "I feel they are all really nice and they do listen to me."
- Relatives felt their family members were treated well. One relative had fed back, "[Staff name] has made such a strong bond with our [family member]. [Staff name] is a ray of sunshine and has made all our lives so much easier." Another relative said, "[Name of staff member] has been with me all through the pandemic and has made a difference to my life."
- People told us they were encouraged to be involved in decision about their day to day care. One person said, "I do feel like my views and opinions are respected as they always ask me if I'm happy with things or need something different."

Respecting and promoting people's privacy, dignity and independence

- People told us they were supported to maintain their privacy and dignity. Records also confirmed this. People's comments included, "They have to do everything for me so there's not a lot of privacy but they do make me feel comfortable and they do respect my privacy with door knocking" and "I feel really comfortable and confident with the way they care for me."
- Staff understood the importance of helping people to be as independent as possible. The promotion of self-care was an agenda item within staff supervision. Staff commented, "It helps the client to feel in control of their life and valued. We put the clients at the centre of their care and support them to make choices", "They can build up strength and confidence in their own abilities, improving mental and physical healing and speeding up the rehabilitation process" and, "It helps them develop self-esteem and confidence."

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs.

This is the first inspection for this newly registered service. This key question has been rated good. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences; Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- People's care plans were detailed, person-centred and regularly reviewed. A person told us, "When they first started they went through the care plan with me and since then make sure there's nothing to change and ask me if there's anything to add. They review my plan monthly." A staff member said, "Care plans support me in keeping people safe and helping them have good quality of life as it is well put together and all the information that I need while being on shift at any service user, is complete, organised and updated regularly, so it's a huge help."
- People were encouraged and, where required, supported to maintain contact with family and friends and links with the community. For example, staff supported people to attend local day centres. Staff also supported people to go on holidays and short breaks in the UK and abroad.

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- People's individual communication needs and preferences were identified, known and met. This included the use of picture communication systems, word boards and knowledge of key phrases to use or avoid.
- The service worked closely with people, their families and settings such as schools and day centres to ensure there was a consistent approach with communication.

Improving care quality in response to complaints or concerns

- People and relatives told us they knew how to raise a concern should they need to. A person said, "If I had any concerns I wouldn't hesitate to complain lots to the office if not happy, but overall, I am very happy with them all." A relative said, "They don't let things become a problem, they sort it."
- The service had a complaints policy copies of which were held on people's files in their homes. Complaints were logged, progress tracked and resolved in line with the service's policy. The manager was supported with investigating complaints by the provider's complaints and incidents team.
- Where people or relatives had raised a concern, this had been resolved to their satisfaction. For example, one relative told us, "I like how they introduce new staff to [family member] as [family member] knows straight away if [family member] likes them. They have brought [staff] in before and [family member] hasn't

taken to them so they have taken them [staff] out."

End of life care and support

- The service did not currently support any people with end of life care needs. The registered manager told us there was an online end of life module on the online training system that they would support staff to access as required. A card from a relative stated, "I can't thank you enough for the support and care these last two months of my beautiful friend's life."
- Some people supported by the service had advanced care plans in place, other people had do not attempt pulmonary resuscitation (DNAR). Advanced care planning offers people the opportunity to plan their future care and support, including medical treatment, while they have the capacity to do so. A DNAR is a medical order to support a person to have a natural death if their heart stops beating. Copies were held in people's homes and the office.

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 is the first inspection for this newly registered service. This key question has been rated 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

- There was a supportive and one-team ethos at the service. Staff commented, "I really enjoy my work", "Helpful team. Easy communication with the office staff", "Everyone at the service is amazing, a well organised company, loyal, honest, friendly, professional, well committed to high quality care and hard work" and, "I feel like I'm in a tight group close to a family."
- Staff told us they enjoyed working for the service and felt valued. They felt supported by their colleagues and management. Their comments included; I feel proud to work for [them]. We have a lot of 'refer a friend' referrals", "They appreciate and value their staff", "It's a good company", "Working at [the service] is a pleasure. We have great communication, trust, flexibility and they treat the service users and myself very well and respectfully", "I'm so proud to be a part of [the service]" and, "I truly feel valued for everything I do including by senior management
- Staff spoke highly of the registered manager who they felt was supportive and a good listener. Their comments included: [Name of registered manager] is very kind, supportive and approachable, deals with issues that arise as soon as possible which reduces the risk of them escalating further", "My best manager so far", "Good communication, is very appreciative with you when you work hard within your care package" and, "Is a kind and positive person. Knowledgeable, well organised and here to give us support whenever needed."
- Staff received praise and recognition. Particularly good practice was acknowledged verbally and via a formal thank you letter from the provider. Staff were nominated for recognition and reward by their colleagues and the people they support. Compliments from people and relatives were shared with staff.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; 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 and staff had a good understanding of their roles. The registered manager told us, "That everyone understands goals we are working to, the regulations we are governed by, ensuring the office and care staff work together as a team and support each other. Ensuring compliance. The goal is clients' safety, happiness and being able to live a well-fulfilled life."
- Governance and management systems were robust and provided timely oversight and follow up as required. Auditing included medication, moving and handling and care reviews.
- The registered manager understood CQC requirements, in particular, to notify us, and where appropriate the local safeguarding team, of incidents including potential safeguarding issues, disruption to the service

and serious injury.

- The registered manager demonstrated a good understanding of the duty of candour telling us, "It's about being open and honest. If mistakes are made it is about being open and upfront with the client and their family. They will then trust you and know you're safe. Then following up on the incident by discussing why it happened and see if anything can be done to stop it happening again, any extra training required, identifying if there are any trends, for example, with the same client or carer."

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Continuous learning and improving care

- People and staff were given the opportunity to feedback via annual surveys, care reviews and telephone calls. Positive feedback was shared with staff and less favourable feedback was used to identify areas for improvement. This had included improvements to the way complaints were acknowledged and resolved. A person had feedback, "[Names of care staff], I have never met two carers as good as them. They are young but, my god, they are great with everything they do." A staff member said, "[The service] is receptive to ideas."
- Staff told us the service was flexible in helping them manage their work-life balance including caring responsibilities. For example, one staff member said, "I can choose shifts that work for me and my family, office staff are very flexible and will accommodate if possible." Another told us, "They always make sure you are comfortable with your work and not under too much pressure." In the latest survey, 98% of staff said they were happy working for the service.
- A variety of team meetings were used to share updates about people's care, upcoming training, best practice, recruitment and industry developments.
- Staff were actively encouraged to improve their skills and knowledge by undertaking qualifications and additional training courses. One staff member said, "I have had the opportunity to progress and [I] enjoy my job thoroughly. Sugarman takes pride in helping staff improve and gain opportunities to progress within the company."

Working in partnership with others

- The service worked closely with other agencies to provide good care and treatment for people. This included the local authority, day centres, clinical commissioning group, schools, physiotherapist and GP surgeries. This holistic approach was helping people to receive consistent support tuned to their current and emerging needs.