

Care Concern (NW) Limited Care Concern (NW)

Inspection report

284 Liverpool Road Birkdale Southport Merseyside PR8 4PE Date of inspection visit: 14 September 2020 15 September 2020 16 September 2020

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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

Care Concern is a home care provider which offers domiciliary care and support for people within their own homes. The service was providing support to 285 people at the time of the inspection.

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's experience of using the service was mostly positive. People received the care and support when required and at their preferred times. People said they received the same carers most of the time. People and family members told us staff were helpful and kind. Positive relationships had been developed between staff and people they supported. People said calls to their home were rarely missed and that staff usually arrived on time.

Some comments about the staff included, "I am happy with them, yes and I do feel safe. They are cheerful, and so willing to do anything you want. You can have a laugh with them", "Yes, I'm happy enough. They help me and if I want them to do anything, they will. They are very friendly", "The staff are excellent and they seem to understand my health problems" and "I'm more than happy. They are absolutely amazing. I could not ask for more".

People using the service and staff were involved in the development of their care through regular reviews meetings and surveys. The latest survey showed that people were satisfied with their care and said they would recommend Care Concern to others.

We found improvement had been made since the last inspection. Staff now managed people's medicines safely. People's care records contained information to assist staff in managing the risks people presented. Personalised information regarding people's likes dislikes and routines were recorded; further information was being added to this.

Staff had been recruited safely. There were sufficient numbers of staff employed to support people. Dedicated relief staff supported regular staff to cover vacant shifts and calls because of absence. Staff received regular training and support. Staff told us they enjoyed working for the service.

The management team completed quality audits regularly and we saw that actions were identified and addressed to bring about improvements. The service worked effectively with other professionals.

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

Rating at last inspection The last rating for this service was requires improvement (published 25/4/2019)

Why we inspected

This was a planned inspection based on the previous rating. We undertook a focused inspection to review the key questions of safe and well-led only.

We reviewed the information we held about the service. No areas of concern were identified in the other key questions. We therefore did not inspect them. Ratings from previous comprehensive inspections for those key questions were used in calculating the overall rating at this inspection.

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 Care Concern (UK) on our website at www.cqc.org.uk.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our reinspection programme. If we receive any concerning information we may inspect sooner.

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
Is the service well-led? The service was well-led.	Good ●



Care Concern (NW) 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 was carried out by an inspector and an Expert by Experience. 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 had a manager registered with the Care Quality Commission. 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.

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 14 September 2020 and ended on 16 September 2020. We visited the office location on16 September 2020.

What we did before inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from two local authorities. We used all of this information to plan our inspection.

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.

During the inspection

We spoke with 10 people who used the service and four relatives about their experience of the care provided and received feedback via email from a further four relatives. We spoke with nine members of staff including the provider/registered manager, the legal & compliance adviser and six care workers.

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 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 now improved to Good. This meant people were safe and protected from avoidable harm.

Using medicines safely

- At the last inspection we found the management of medicines was not based on current practice as staff had not recorded the time as required medication was administered.
- At this inspection improvements had been made and staff had changed their practice. Staff we spoke with were aware of this.
- People received their medicines at the right time.
- Medication Administration Records were signed appropriately.
- Managers regularly assessed staff's competence to give people medicines.

Assessing risk, safety monitoring and management

- At the last inspection we found not all risk assessments were completed to identify areas of risk and how people needed to be supported.
- Risk assessments were now completed and reviewed regularly to reflect people's current needs.
- People said they felt safe. Most people had regular staff visiting them but said changes occurred when there were staff on holiday or staff absence.
- Comments included, "I am happy with them, yes and I do feel safe", "They help me and if I want them to do anything, they will", "I'm more than happy. They are absolutely amazing. They've made me feel so comfortable. I could not ask for more" and "For the most part, yes. They have some excellent, dedicated carers who go above and beyond in terms of the care delivered".

Staffing and recruitment

- Staff had been recruited safely to ensure they were suitable to work with vulnerable people.
- There were enough staff to support people's needs. Dedicated 'relief' carers were employed to provide support to people during staff absence.

Systems and processes to safeguard people from the risk of abuse

- The provider had effective safeguarding systems in place.
- Staff understood their safeguarding responsibilities and had confidence in managers to address any concerns.

Preventing and controlling infection

- Personal protective equipment, such as gloves, masks, visors and aprons, was available to help staff maintain infection control.
- Staff had been advised and kept up to date with the requirements of which protective equipment (PPE) to

wear during the Coronavirus pandemic.

Learning lessons when things go wrong

• Incidents and accidents were recorded.

• Supervisor staff and the registered manager reviewed the records to identify what needed to be done to prevent reoccurrence.

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 now 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.

System and arrangements to monitor and improve the quality and safety of the service were robust and effective

- At the last inspection we found the quality assurance systems in place to monitor key aspects of the service were not as effective as they should have been.
- Quality assurance systems were now much improved and effective. Regular audits were now completed; these included, reviews of medication administration records, accident and incident reports and care record reviews.
- The registered manager and provider notified CQC of specific events as required as well as complying with duty of candour responsibilities.

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

- People received their support at a time which suited them; they received the support they needed to meet their needs.
- Staff told us they enjoyed working for the service and spoke of a positive team morale. Staff's comments included, "Happy in my work", "Enjoy work", "Really enjoy it", "Good staff morale", "Management are approachable", "(Managers) always there" and "Feel appreciated".

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

- There was a registered manager in post at the time of inspection.
- There was a robust management structure in place to support the staff, people who used the service and improve the quality of the service provided. This had been improved since the last inspection, by increasing the supervisory and compliance staff.
- Notifications about specific events had been received and ratings from our last inspection were displayed in line with legal obligations.

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

- People's opinion of the service was sought. Any negative feedback or issues were investigated.
- Regular reviews took place for people using the service to ensure the support was meeting their needs.
- Staff felt communication from managers and support for themselves was good.

Continuous learning and improving care

- The provider recognised the need for people and staff to have access to people with specific experience and had employed dedicated trainers in the organisation to provide better outcomes.
- The service had to meet specific key performance indicators (KPIs) in all aspects of service delivery to maintain their preferred provider status. Reports were submitted every six months to demonstrate their performance to the local authority.

Working in partnership with others

- The registered manager worked with the neighbouring local authorities and healthcare providers.
- Feedback from local authorities confirmed that commissioners had no current concerns about the service.
- Staff described how they reported concerns and worked with healthcare professionals.