

## **Clover Carers Ltd**

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#### **Inspection report**

The Little Granary Burghill Hereford Herefordshire HR4 7RJ

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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

This was an announced inspection carried out on the 8 March 2017.

Clover Carers Ltd is an agency that provides a domiciliary service to people living in their own homes. At the time of the inspection, personal care was being provided to 22 people living in the Hereford, Bromyard and Leominster areas.

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. There was a registered manager in post at the time of the inspection.

This service has not been previously inspected at this location by CQC.

People told us they felt safe with the staff who delivered care and support in their own homes.

The provider had assessed and managed the risks connected with people's individual care and support needs. Staff were able to tell us of the risks people faced and the action they took to support them.

People told us there were sufficient numbers of staff available to meet all their needs safely, and that staff were generally on time.

Staff knew how to recognise and report abuse to the provider. The provider had appropriate recruitment procedures in place, and checks were carried out before staff began work at the service

People had the support they needed to take their prescribed medicines safely.

Staff had the skills and knowledge needed to meet people's individual care needs. Staff confirmed they received training both at induction and then annually as required.

The provider understood and protected people's rights under the Mental Capacity Act 2005.

People were supported to access healthcare from other professionals.

People received care and support that took into account their specific needs and preferences. Staff adopted a caring approach to their work with people. People told us they were actively involved in the care they or their relative received.

Staff were knowledgeable about the people they supported, which enabled them to provide a personalised and responsive service. Staff knew how to promote people's independence.

People knew how to raise a complaint about the service, and felt comfortable contacting the provider. The provider had developed procedures to ensure people's complaints were dealt with properly.

The provider promoted an open and inclusive culture within the service. People and staff found the management team approachable and willing to listen. Staff felt well supported by the registered manager and provider.

The provider monitored the quality of the service by a variety of methods, including checks and feedback from people and their families.

The five questions we ask about services and w	hat we found
We always ask the following five questions of services.	
Is the service safe?	Good •
The service was safe.	
Staff understood how to recognise and report abuse.	
The provider had assessed, and put plans in place to manage the risks associated with people's care and support.	
People had the support they needed to take their medicines safely.	
Is the service effective?	Good •
The service was effective.	
Staff had received training to give them the skills and knowledge to meet people's needs.	
Staff received regular supervision, and felt valued and supported by the registered manager and provider.	
People were supported to access healthcare from other professionals.	
Is the service caring?	Good •
The service was caring.	
People were involved in decisions about the care and support they received.	
Staff protected people's privacy and dignity.	
People were supported and encouraged to be independent and live their own lives.	
Is the service responsive?	Good •
The service was responsive.	
People received care and support to meet their individual needs	

and preferences.

People and relatives were encouraged to give feedback about the care they received.

Staff were knowledgeable about the people they supported, which enabled them to provide a personalised and responsive service.

#### Is the service well-led?

Good •



The service was very well-led

There was an open and inclusive culture.

People and staff felt the provider were approachable and supportive.

The provider monitored the quality of the service by a variety of methods, including checks and feedback from people and their families.



# Clover Carers Ltd

**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.

This inspection took place on 08 March 2016 and was announced. We provided 48 hours' notice of the inspection to ensure management were available at their office to facilitate our inspection. The inspection was carried out by one inspector.

Before the inspection, the provider completed a Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. We took this information into account during our inspection.

We also reviewed information we held about the service in the form of statutory notifications received from the service and any safeguarding or whistleblowing incidents, which may have occurred. A statutory notification is information about important events, which the provider is required to send us by law. We also asked the local authority for any information they had, which would aid our inspection.

We spent time visiting people in their own homes and asked them what they thought about the care they received. We also undertook telephone interviews with people and relatives to gauge their impression on the quality of care provided. In total, we spoke to 11 people who used the service and 6 relatives.

At the office, we reviewed a range of records about people's care and how the domiciliary care agency was managed. We looked at five care records, five personnel and training records, five medicine administration record (MAR) sheets, and audit spot checks undertaken by the provider

The service employed 12 members of staff, including the registered manager. We spoke with the registered manager and six members of care staff during the inspection.



#### Is the service safe?

### Our findings

People told us they felt safe in the presence of the staff when care and support was given in their own homes. One person told us, "I feel safe with all the staff who are fully trustworthy. We get the same staff, which is very important." Another person said, "We definitely feel safe and secure with staff. I get hoisted out of bed and staff know what they are doing and I feel safe and confident in what they are doing." One relative told us their relative was permanently in bed. Staff came in and washed them and managed their medication. There had never been any issues and their relative was safe with them.

Staff told us they had received training in how to protect people from harm and abuse. They were able to describe different signs of possible abuse and what action they would take if they suspected people were being mistreated. One member of staff told us, "I have had training in safeguarding people. If I thought someone was being abused, I wouldn't leave the property until I had spoken to the registered manager or the provider. If I wasn't taken seriously, I would contact other agencies myself as we have a duty of care to protect them." Another member of staff said, "Any safeguarding concerns and I would report straight to the manager, who I'm confident would act on the information." The registered manager was able to tell us about a recent safeguarding referral they had made and what procedures they followed with the local authority and other agencies.

Staff told us they had received appropriate checks prior to starting work with people. Checks included their identity, previous employment history and at least two character references. The provider told us they undertook a Disclosure and Barring Service (DBS) check for each member of staff before they started working with people. A DBS check is a legal requirement and is a criminal records check on a person's background. These checks help the provider to ensure new staff were suitable and safe to work with people in their own homes.

People told us their safety and well-being had been assessed by the provider and risk assessments were in place to minimise these risks and keep them safe. People told us there were plans in place, which had been agreed by the provider, which included key aspects of keeping people safe. This included medication, mobility and falls, maintaining the security of the homes and preventing pressure sores. People told us they had been involved with the provider in determining what risks they faced and the action staff needed to take to support them.

Staff were able to tell us of the risks people faced and the action they took to support them. One member of staff said, "We have people who are at risk of malnutrition and so we record everything they eat and drink. The district nurse will weigh these people so we are always alert to how they are doing." Another member of staff told us how one person they visited was unsteady of their feet and at risk of falls. They explained how they monitored the person during visits and stood next to them when they used the walking frame to prevent accidents. A third member of staff said, "I ensure the environment is clear and encourage people to use proper equipment like walking frames or sticks when moving about." If people were involved in any accidents or incidents, staff understood the need to record and report these events to the manager without delay.

People told us there were sufficient numbers of staff available to meet all their needs safely, and that staff were generally on time. One person said, "There have been no issues with lateness. When heavy traffic has been an issue, they (Staff) will ring and let us know. Generally there are spot on." Another person told us, "They (Staff) have never missed a call in all the time we have had them. Staff are very reliable." A third person told us, "Staff are absolutely wonderful and never noticeably late. If so, there is a good reason, but they are good at time keeping."

Where the provider administered people's medicines, people told us they received their medicines when they need them. One person told us, "They (staff) apply my creams on time when I need them. There are never any issues, I'm more than happy." Another person said, "I have no issues, they always give me my medicines on time." The provider had put systems and procedures in place designed to ensure people received their medicines safely. People's care plans detailed the specific support people required to take their prescribed medicines. Staff told us their competence was checked on a regular basis, as part of the provider's unannounced spot checks. One member of staff said, "We get spot checks from the manager to ensure standards are maintained. Spot checks include everything we do such as medication. Everything is checked."



#### Is the service effective?

### Our findings

People told us they felt staff were competent, professional and, well trained to undertake their roles. One person told us, "We have complete confidence in them. They are professional and all seem well trained and experienced." Another person said, "Staff are very well trained and professional, and they never overstep the mark." A third person said, "They are professional and appear well trained, especially the older staff."

Staff told us the training they received enabled them to have the right skills and knowledge to support people. The provider gave all new staff a structured induction to help them understand their role and the expectations of the provider. Staff described their induction programme as consisting of a week's training courses, which included moving and handling, medication, safeguarding and first aid. This classroom-based training was followed by a period of shadowing (working alongside) experienced staff for at least three days. Staff were also required to complete the Care Certificate within an agreed period. The Care Certificate is a nationally recognised training programme for care staff, which requires the completion of work books and practical assessments.

After completing their induction, staff told us they undertook an on-going programme of training, based upon mandatory training requirements and training directed at meeting people's specific care and support needs. One member of staff told us they had recently completed refresher training in medication and moving and handling and had enrolled on a nationally recognised training course in social care. Another member of staff said, "The training was fantastic. It was classroom based over five days. It included the Care Certificate. I shadowed for about a week and a half, which was ideal from my needs."

Staff told us about the support, supervision and appraisals they received. Supervision and appraisals enable managers to assess the development needs of their support staff and to address training and personal needs in a timely manner. Staff told us they received regular spot checks on their competence and that the registered manager and the provider were always available to provide support and guidance. One member of staff said, "The manager is always available and has an open door policy to any issues or concerns we may have. The manager is lovely and professional." Another member of staff told us, "The manager is brilliant, so supportive and always there for you. We have supervision and regular 'spot checks.'

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 Act 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 so that they can receive care and treatment when this is in their best interests and legally authorised under the MCA. We checked whether the service was working within the principles of the MCA. Staff confirmed they had received training in the MCA and were able to explain the principles of the legislation to us.

People told us staff respected their right to make their own decisions, and sought consent before carrying out care tasks. One person said, "They (Staff) always ask permission to do things and have never assumed

anything. They are very respectful like that all of the time." Another person told us that staff helped them make choices by offering different clothing and never just selected items for them wear. One member of staff said, "We work very closely with families and I wouldn't do anything without the consent of people. I always explain what I want to do and ensure they understand and agree before I do anything."

Most people we spoke with told us they did not require support with their nutrition or hydration. They either managed this themselves or were supported by their families. Where support was provided, staff were aware to monitor people's intake of nutrition and fluid and to report any concerns to the registered manager.

People told us staff played a positive role in monitoring their health and well-being. They explained that staff helped people seek professional medical advice or attention if they required it. One relative told us, "One member of staff informed us to get an ambulance when my partner was ill, so they do monitor their condition." Another person told us staff had called an ambulance for a relative and that they had insisted on waiting for the ambulance to provide both reassurance and support for the relative. The registered manager told us that all staff were focused on monitoring people's health. They were instructed to report any concerns to them, in order that these could be pursued with families and professionals, if required. One member of staff said, "If I thought someone needed a GP, I would ring the registered manager to make the necessary arrangements."



## Is the service caring?

### Our findings

People told us staff were kind and caring and that they took time to get to know them. One relative told, "They are genuinely caring and nice people. They come in and hold my relative's hand and are very reassuring towards them." One person said, "The staff are lovely, they are like my daughters. They are brilliant; we all have a laugh." Another person told us, "They are lovely; friendly and really trustworthy." Another relative said, "The staff are like good friends and we generally have the same staff all along. They listen and are very caring." A third person said, "They are very kind and always have time for a chat."

The staff told us how they supported people and were aware of people's individual needs. They explained how they got to know people best by spending time and chatting with them and their relatives. One member of staff said, "We are encouraged to get to know people well, and we develop good friendships with them."

People and their relatives told us staff respected people's privacy and dignity. They were never made to feel uncomfortable when care and support was being provided. One relative told us staff were always very respectful and were really mindful of their relative's privacy and dignity. They thought staff were very professional. One person said, "They are very respectful, draw the curtains straight away and always knock on the door before coming in." One relative said, "They are very respectful. They give more care then we ever received in hospital. They always make sure (person's name) is covered when washing them, they are perfect." Another person told us, "They are very respectful when washing me and I feel comfortable with them all." A third person said, "Yes, staff are very respectful of my privacy and dignity. They always cover me up; it's all very dignified." One member of staff told us, "When supporting people with personal care, I treat them as I would want to be treated, with respect and dignity."

People told us staff promoted their independence and always respected their wishes. One person said, "They do encourage me to do as much as I can myself." Their relative told us, "(Person's name) has improved a lot. They couldn't walk or get out of a chair. With the help from the care staff, they have improved and are now quite mobile. They always respect our wishes." Another person told us, "If it wasn't for the care staff I wouldn't be here now. I would be in hospital." A third person said, "They do support me to live at home, I wouldn't be without them." One member of staff told us, "I always encourage people to do as much as they can for themselves, so that they continue to live at home and be independent."

People and their relatives told us they were actively involved in determining the care they received. They were in regular contact with the registered manager and felt involved in decisions about the care and support staff provided and felt listened to by the provider. One relative told us, "I feel very involved in my relative's care. We have had reviews and I wouldn't hesitate to pick up the phone. If there are any issues they do listen to me and are very responsive to any requests." Another person said, "We have no concerns, as they involve me in everything. They are fantastic. I have complete confidence in them."



## Is the service responsive?

#### **Our findings**

People told us the provider delivered care that met their individual needs and preferences. People were involved in the initial assessment and subsequent reviews of their care needs. They felt able to contribute to their care planning needs and found the provider very responsive to any issues. One person said, "We had a review in January, but the registered manager will often ring up to make sure things are ok. They really want to ensure everything is right for us." A relative told us, "They are very flexible and respond very well to any requests we make and try to resolve issues." Another person told us, "We had a review with the manager. They involved us and listened to our wishes; I can't fault them." A third person said, "I have recently had my needs reviewed with the manager. We discussed my needs and any changes required, such as the length of calls."

The registered manager told us, that with their current numbers of clients, they were able to make regular contact with people. This enabled them to ensure they were meeting people's needs effectively, and responding quickly to any issues or concerns.

Staff were knowledgeable about the people they supported, which enabled them to provide a personalised and responsive service. We saw people's care plans contained information about people's preferences and expectations of the service provided. They provided guidance for staff in meeting people's specific needs and were individual to the person. Care plans were located at each person's home with duplicates held at the office. Initial assessments were undertaken to identify people's support needs and care plans were developed in full consultation with people. One member of staff told us, "The calls are well scheduled, which means we are never in a rush. I have plenty of time to spend with people."

The provider had systems in place to seek out people's views and experiences of their care, and address any concerns or complaints they may have. People told us they had not needed to raise a complaint with the provider, but they felt confident addressing any concerns with staff and the registered manager. People told us they felt listened to and were provided with information if they needed to raise complaints. One person said, "If I wanted to make a complaint I would contact the registered manager." One person told us that if they had any concerns they would contact the registered manager directly. They went on to say the registered manager was always willing and happy to sort things out, and that they were also very helpful and accommodating. A relative told us in response to a question about formal complaints, "We have absolutely no issues. We are very happy with the care we receive; we can't fault them." Another relative said, "I have never had cause to make a formal complaint. We are very happy with the quality of service and would highly recommend them."

People told us they were asked for their views and opinions about the service through questionnaires. One person said, "I have had questionnaires to fill in, and they always listen to what I say." Another person told us, "We have had questionnaires, which we have sent back, but no complaints at all." The registered manager told us questionnaires were sent out twice yearly. The provider also undertook a number of spot checks and observations of staff. During this process, people were able to provide any relevant information or concerns.



#### Is the service well-led?

### Our findings

People and their relatives told us the service was well managed by the registered manager and the provider. People consistently told us the registered manager was approachable and professional in their dealings. One person said, "I feel it is well managed and organised. It's a lovely little company." Another person said, "They are well run and managed. They are lovely and have every respect for you."

Staff told us that they were committed to providing good quality care, which was driven by the expectations of the registered manager and provider. Staff felt valued and appreciated, and they were listened to by the provider. One member of staff said, "They most definitely listen to me and take on board and deal seriously with any issues I raise. It's a good service; calls are well scheduled; I have no concerns." Another member of staff said, "They always listen to what I say. There is equal respect here." A third member of staff told us they worked in a very open environment, where management listened and acted on their concerns.

Staff also told us that they were subject of three-monthly spot checks by the manager, which they believed were a good way of maintaining high standards. All the staff we spoke with thought spot checks promoted good standards, and there was nothing to worry about if they were doing their job correctly. Staff spoke favourably about the quality of training provided, and how they were encouraged to obtain nationally recognised qualifications in health and social care.

The provider promoted an open and inclusive culture within the service. People and relatives told us communication with the provider was good and that they were always kept informed. One person said, "They always keep me up to date; they are a great lot." Any concerns or incidents were fully investigated and information was provided to people and staff where it was needed.

The provider had systems in place to ensure the continuous monitoring of the quality of the service provided. The registered manager completed regular spot checks on staff, and checks on areas such as care records and the management of medicines. We found that regular reviews of care plans and risk assessments were undertaken. There were effective systems in place to manage, monitor and schedule visits for people. At the time of the inspection, the registered manager informed us that the provider was in the process of renewing their polices and procedures, and was about to introduce new ways of administering medicines. They were also reviewing staff handbooks, staff contacts and other aspects of their 'human resources' systems.

Providers are required by law to notify CQC of certain events in the service, such as serious injuries and deaths. Records we looked at confirmed that CQC had received all the required notifications in a timely way from the service.