

Grace at Home Ltd

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Inspection report

Summer Keep Cottage Pyrford Road Woking Surrey GU22 8UE

Tel: 07912661047

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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?	Requires Improvement

Summary of findings

Overall summary

About the service:

Grace at Home Limited is a privately-owned home care agency providing care and support to people in their own houses and flats in the community. The service has one location with a small office in Woking and provides care and support to people living in the nearby surrounding areas. At the time of the inspection Grace at Home were providing personal care to 10 people. Those receiving a service were older adults in the age range of 80 plus.

People's experience of using this service:

- Improvements were required that related to the recording of audits, staff supervision and recruitment. We have made a recommendation around this.
- People who received care from Grace at Home told us that all staff were very caring and that care was of a high quality and consistent standard. One person said, "They are all lovely, they will do anything you ask, you just have to ask."
- People and relatives using the service told us they felt safe and were reassured with the care provided. One relative said, "I absolutely feel my mother is safe in their care."
- Relatives and families told us that the service was caring, and well led and respected individuals needs and preferences. One relative said. "The agency is very caring, both the individual carers and the manager."
- People liked the size of the agency as it was small, and personal. One person said, "They don't rush in and out, they spend time with you."
- People's care was personalised to their individual needs. People received their care from regular staff who knew their care needs well. Staff spoke positively about working for the agency. They felt supported and they could talk to the registered manager. They felt the registered manager was extremely caring and had people's best interests at the heart of the business. They said that the ethos of the agency was providing the best possible care for people.
- Staff felt valued and happy in their work.

More information for each of the key areas of Safe, Effective, Caring, Responsive, and Well-led can be found in the full report.

Rating at last inspection:

• At our last inspection the service was rated as Good. The report was published on 14 June 2016. We found at this inspection, the service was rated Good.

Why we inspected:

• This inspection was part of our routine scheduled plan of visiting services to check the safety and quality of care people receive.

Follow up:

- Following our inspection the registered manager supplied information we requested. We have used this information to support us with our judgements.
- We will continue to monitor the service as per our published inspection methodology to ensure that people receive safe, high quality care. Further inspections will be planned for future dates.

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 findings below.	
Is the service effective?	Good •
The service was effective.	
Details are in our findings below.	
Is the service caring?	Good
The service was caring	
Details are in our findings below.	
Is the service responsive?	Good •
The service was responsive.	
Details are in our findings below.	
Is the service well-led?	Requires Improvement
The service was not always well-led.	
Details are in our findings below.	



Grace at Home Limited

Detailed findings

Background to this inspection

The 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.

Inspection team:

• The inspection was carried out by two inspectors.

Service and service type

• Grace at Home Limited is a care agency that provides personal care to people in their own homes. The Care Quality Commission (CQC) regulates the care provided by the agency. The service had a manager registered with the CQC. 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 visit to ensure the registered manager was present at the office to assist with our inspection. The site inspection with the registered manager present took place on 21st January 2019.

What we did:

- Our inspection was informed by evidence we already held about the service including notifications.
- We also checked for feedback received from members of the public.
- We checked records held by Companies House regarding the company.
- We asked the provider to complete a Provider Information Return. This is information we require providers to send us at least annually to give some key information about the service, what the service does well and improvements they plan to make.
- On 16 January 2019 we visited four people in their homes. In addition we called and spoke with one person, two relatives and three staff to get their views on the service.

- We looked at six care plans, medicines records and daily records held in people's homes.
- We spoke with the registered manager at the office inspection to review care records and policies and procedures.
- We reviewed two staff recruitment files, staff training and competency check records, medicines records and copies of staff rotas.
- Following the inspection further information was requested from the registered manager. We received and reviewed this information. This evidence was included as part of our inspection.



Is the service safe?

Our findings

Safe – this means people were protected from abuse and avoidable harm

People were safe and protected from avoidable harm. Legal requirements were met.

Systems and processes:

- People and relatives told us that they felt the care was safe. One person said, "Obviously I feel safe it goes without saying." One relative told us, "It gives me peace of mind knowing my mother is well cared for and safe."
- People were protected as staff had a good understanding about safeguarding and the procedures to be followed. Staff undertook training to safeguard vulnerable adults from abuse and neglect. One member of staff said, "I know how to safeguard people and keep them safe. We have training and I would tell the manager or Local Authority if something was wrong."

Assessing risk, safety monitoring and management:

- Risks to people were assessed and measures to enable people to live safely in their homes were recorded. Risk assessments were in place for every person. These considered areas such as personal care, risk of falls and the environment in which care was to be provided. Records were up to date and described the actions staff should take to reduce risks.
- There were arrangements in place to ensure that people's care would continue in the event of an emergency.

Recruitment and staffing levels:

- People were cared for by suitably recruited staff. The registered manager dealt with selection and recruitment of staff. The registered manager carried out appropriate checks to ensure they employed only suitable people. We saw evidence that the provider had obtained references, proof of identity, address and a Disclosure and Barring Service (DBS) check for staff before they started work. DBS checks identify if prospective staff have a criminal record or are barred from working with people who use care and support services.
- There were sufficient staff numbers to complete the care visits being undertaken. This was confirmed by the rota we viewed.
- People and relatives reported that care visits were not missed and staff were on time as scheduled. Staff reported that the registered manager was constantly in telephone contact with staff regarding care visits, client updates and any changes.

Using medicines safely:

- People were provided with appropriate support with their medicines. This included prompting to take medicines or administering the medicines to the person.
- The registered manager carried out regular spot checks of people's medicines.
- Medicines kept in people's homes were stored appropriately and we observed a carer administering

medicines to one person appropriately.

Preventing and controlling infection:

- There were appropriate measures in place to prevent and control infection.
- Staff had access to personal protective equipment such as disposable gloves and aprons.
- Staff undertook annual training in infection prevention and control. Staff were knowledgeable in how to avoid the spread of infection. One member of staff was able to describe good care to help minimise infection around a person's catheter care.

Learning lessons when things go wrong:

- Actions were taken to ensure that if an incident or accident occurred appropriate actions was taken to reduce occurrence.
- There had been very few accidents or incidents in the service. One incident record viewed for January 2019, involving a minor fall for a client. Appropriate action had been taken by staff and their care plan was updated.
- The registered manager was very hands on to ensure that there was a focus minimising the opportunities for errors or mistakes.



Is the service effective?

Our findings

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

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:

- The registered manager assessed any potential new referrals for care. Any packages of care and support were considered carefully and matched with available staff to meet identified needs.
- The registered manager visited and assessed clients and then developed a detailed care plan.
- Assessments of people's needs were comprehensive and detailed. The care and support required to meet those needs were contained in care plans in people's home for staff to follow. This included personal preferences and what was important for people.
- A relative told us "The carers try in the best possible way to please all of the clients."

Staff skills, knowledge and experience:

- People told us that staff were skilled. One person said, "They do a very good job, they know what to do and they get on with it."
- Staff were adequately trained and supported in their role. Staff told us that the registered manager made sure that they had completed training and had shadowed care calls before caring for people on their own. One staff member said, "There is always shadowing from another experienced carer before staff provide support on their own."
- The registered manager did not allow staff to commence caring until they were satisfied that the staff member was competent and able to deliver a specific level of care and support.
- Staff undertook online training in areas such as safeguarding, infection control, first aid, fire, and hand hygiene. Face to face moving and handling training was also provided for staff.
- The registered manager undertook unannounced staff practice 'spot checks' to ensure care calls were being delivered as scheduled and to the required standard.
- Staff applied learning effectively in line with best practice, which led to good outcomes for people and supported a good quality of life.

Supporting people to eat and drink enough with choice in a balanced diet:

- People were encouraged and supported to have sufficient food and drink across the day. We observed staff checked and encouraged people in relation to this. We also saw staff offer choices and options regarding food and drink.
- There were details of people's needs and requirements in their care plans, including individual details and preferences. One person said, "They always know to make my tea in a proper cup and saucer, it's just how I like it."

Staff providing consistent, effective, timely care within and across organisations:

• Staff worked well together across the service and communicated changes in people's care. One member of staff said, "We are a small agency and we talk to each other all of the time. The manager is very involved and talks to the person, their families and staff constantly."

Supporting people to live healthier lives, access healthcare services and support:

- People told us that if they were unwell staff would support then to get appointment with their GP.
- The registered manager liaised closely with people's health professionals, including the GP, district nursing service, pharmacy, and occupational therapist to support positive health outcomes.
- We heard a staff member speak with the registered manager and liaise with the person and their relative in relation to getting health advice.

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

- People were supported by staff that knew the principles of the Mental Capacity Act 2005. including the presumption of mental capacity. People were supported to make their own decisions.
- There were no people who were assessed to lack mental capacity at the time of the inspection. Staff told us how people's relatives were involved to support people's options and decisions.
- People were asked for their consent before they received any care or support. For example, before assisting people with personal care and getting dressed; staff involved people in decisions about their care and acted in accordance with their wishes.



Is the service caring?

Our findings

Caring – this means that the service involved people and treated them with compassion, kindness, dignity and respect

People were supported and treated with dignity and respect.

Ensuring people are well treated and supported:

- People and relatives felt the service was caring. They talked about the small size of the agency and the personal approach from the registered manager and staff. A relative told us, "I have met all of the team and they are all lovely and I feel they are caring people."
- People received care from staff who had developed positive, caring and compassionate relationships with them.
- Staff we spoke with knew people's preferences and used this knowledge to care for them in the way they wanted. They spoke about people with respect, kindness and compassion.
- Staff were kind and affectionate towards people and knew what mattered to them. People's comments included, "They don't rush in and out, they spend time with you and talk to you." "They ask you how you are and about the family," and "They are always there for you, like your family I suppose."
- A member of staff said, "The service is very caring and carers become more like friends to people than just a carer."

Supporting people to express their views and be involved in making decisions about their care:

- Care and support was personalised with people being the primary focus and at the heart of the service. Care and support was designed around individuals and their aims and goals. Involvement of people who used the service was clearly embedded into everyday practice.
- Staff told us they supported people to make decisions about their care and knew when people needed help and support or input from their relatives.
- People were involved in day to day decisions. Relatives confirmed staff involved them when people need help and support with decision making.
- We saw examples of staff supporting people in a caring way. For example, we observed arrangements for shopping being discussed with the staff member suggesting that rather than the carer collecting the shopping them doing this together which made it more of a social event.

Respecting and promoting people's privacy, dignity and independence:

- Staff showed genuine concern for people and were keen to ensure people's rights were upheld and they were not discriminated against in any way.
- Staff were polite and courteous. They continually asked people what their preferences and choices were during care visits.
- The registered manager and staff were very aware that they were working in people's homes. We observed staff making sure doors and curtains were closed and respecting when someone needed time on their own.

• A staff member discreetly asked a relative to leave the room that they could provide personal care to their amily member.



Is the service responsive?

Our findings

Responsive – this means that services met people's needs

People's needs were met through good organisation and delivery.

Personalised care:

- Care plans were developed outlining how people's needed to be met. They used this detailed knowledge to care for people in the way they wanted. Care plans had details around how a person preferred to be supported with personal care tasks, daily routines, personal interests and hobbies. Staff demonstrated their knowledge of people's likes, dislikes and preferences.
- The registered manager and staff responded to any changes people's wanted in relation to their care. One person felt that their care call was too early and wished for it to be later in the evening. We heard a staff member offer to provide the care call at the time the person requested.
- Daily notes were completed which gave an overview of the care people had received and captured any changes in people's health and well-being.

End of life care and support:

- At the time of our inspection only one person was receiving end of life care who was new to the service.
- The registered manager was working with the person on how they wanted to be supported. There was evidence of close and effective liaison with both the family and involved health professionals. The person receiving the service told us, "Most pleasant, effective people who know what they are doing. I couldn't have chosen a better agency. I would recommend them."

Improving care quality in response to complaints or concerns:

- People and their families knew how to make a complaint and felt confident that any issues raised would be listened to and acted upon immediately. One relative said. "If I have any concerns or issues I go to the registered manager. They are dealt with promptly and is usually nipped in the bud."
- There was a complaints policy in place at the service and in people's homes.
- The agency had received no formal complaints since our last inspection.

Requires Improvement

Is the service well-led?

Our findings

Well-Led – this means that service leadership, management and governance assured high-quality, personcentred care; supported learning and innovation; and promoted an open, fair culture

There were improvements required that related to how records were maintained at the service. However, the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- Records that related to care were not always up to date and accurate. Although the registered manager reviewed and audited people's care they did not record this.
- Recruitment records contained gaps in information. The registered manager was able to explain in full these gaps but had not updated the recruitment files with this information.
- The registered manager was constantly checking on the competencies of staff but there was no formal recording of these despite their policy stating that this needed to be done.
- The registered manager told us that they knew there was a shortfall around recording. They said, "The paperwork needs to be updated." They told us that they were not surprised by our findings and accepted that work needed to be done.

We recommend that the provider ensures that they maintain an accurate records in relation to audits, staff supervision and staff recruitment.

- There were other aspects to the management of the service that was supportive.
- Staff felt supported and valued. One member of staff told us, "Grace at Home is small and personal. The manager has a genuine passion and focus to care for people and expects staff to provide a consistently high level of care. This is communicated and instilled in all the carers. The manager leads by example and is very involved in the day to day operation of the service." Another member of staff said, "The manager is very involved in all aspects of the business."

Planning and promoting person-centred, high-quality care and support with openness; and how the provider understands and acts on duty of candour responsibility:

- People and relatives expressed confidence in the registered manager and they all said they had regular personal contact with them. The ethos of the service was to provide consistent high quality care to people using the service. The registered manager led by example as she was actively and personally involved in all aspects of the care delivered and regularly worked alongside staff.
- The registered manager spoke with us about individuals they supported and demonstrated a good understanding of people's needs, likes and preferences.

Engaging and involving people using the service, the public and staff:

• Feedback was actively sought by the registered manager to maintain and make changes to the quality of

care and support offered to people.

- The service worked in partnership and collaboration with other key stakeholders and organisations. This collaboration supported people's health and wellbeing and their care provision.
- •The registered manager had developed effective relationships with other professionals and agencies involved in people's care. There was evidence of email contact with the local authority addressing people's individual needs and realising positive outcomes for people. There were clear links and collaboration with local health professionals which included occupational therapy, occupational therapy, physiotherapy, and nursing services.

Continuous Learning and Improving Care:

- The registered manager spoke positively about the future direction of the service. This included considering all aspects of the service such as office space and management.
- The registered manager also told us they would become more actively involved in the Surrey Care Association for advice and support regarding the effective running of the service to maintain the highest levels of sustainable care to people.