

Merit Care Limited

# Merit Care Ltd

## 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

Merit Care Ltd is a domiciliary care service that provides personal care and support to people living in their own homes. The service supported six people at the time of our 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

We heard positive comments about the service provided such as "I never want to move from Merit Care.", "Superb" and "Very pleased."

People were protected from harm and abuse through the knowledge of staff and management. Risks to people's safety were identified, assessed and appropriate action was taken to keep people safe. People's medicines were safely managed.

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 were treated with respect and kindness and their privacy and dignity was upheld. People and their representatives were involved in the planning and review of their care.

People's individual needs and wishes were known to staff. There were arrangements in place for people and their representatives to raise concerns about the service.

Effective quality assurance systems were in operation with the aim of improving the service in response to people's needs.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

### Why we inspected

This service was registered with us on 9 April 2018 and this is the first inspection.

### Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection 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 effective?

Good ●

The service was effective.

Details are in our effective findings below.

### Is the service caring?

Good ●

The service was caring.

Details are in our caring findings below.

### Is the service responsive?

Good ●

The service was responsive.

Details are in our responsive findings below.

### Is the service well-led?

Good ●

The service was well-led.

Details are in our well-Led findings below.

# Merit Care Ltd

## 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

This inspection was carried out by one inspector.

#### Service and service type

Merit Care Ltd 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 prior notice of the inspection. This was because it is a small service and we needed to be sure that the registered manager would be in the office to support the inspection.

Inspection activity started and ended on 30 September 2019 when we visited the office location.

#### What we did before inspection

We reviewed information we had received about the service. This information helps support our inspections. 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 the registered manager and reviewed a range of records. This included three people's care records and medication records. We looked at three 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 spoke with two people using the service, two relatives and three members of staff by telephone. We contacted three social care professionals to gain their views about the service but we were unable to gain any feedback. We continued to seek clarification from the provider to validate evidence found. We looked at training and quality assurance records. We spoke with two professionals who regularly visit 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 for 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

- People were protected against abuse. Staff received training on safeguarding adults and contact details for reporting a safeguarding concern were available with systems in place for reporting any concern.

Assessing risk, safety monitoring and management

- People were protected against identified risks. Risk assessments identified the potential risks to each person and described the measures in place to manage and minimise these risks.
- Environmental risk assessments had been completed for identified risks in people's homes to ensure the safety of people receiving care and the staff who supported them.
- Plans were in place for staff to follow in the event of staff being unable to gain entry to people's homes. People's care plans also included directions for staff to ensure people were safe and secure when staff finished their visit.

Staffing and recruitment

- People were supported through consistent staff support. Staff were organised into two teams based on the areas where people lived. People told us they felt assured that they would receive their care and knew the staff who visited them. One person told us, "I'm never left without care."
- People received information in advance confirming their visit times and the staff allocated.
- The provider had completed pre-employment checks to protect people against the employment of unsuitable staff. Although information had been obtained where staff had previously worked in positions providing care and support, a full employment history had not been obtained. We raised this with the registered manager who immediately put measures in place to obtain this information and ensure this practice would be followed with future applicants.

Using medicines safely

- People were satisfied with how they were supported with their medicines. The registered manager ensured people's medicines were dispensed in packaging appropriate to the support people received from staff to manage their medicines.
- Audits of people's medicine administration records were carried out to reduce the likelihood of medicine errors. Audits had been effective in checking people's medicine records included all the required information.
- The registered manager ensured appropriate management of people's medicines. One person was prescribed anti-coagulant medicines. Due to risks to the person from this type of medicine regime, the registered manager ensured that health care professionals monitored the person with managing this

medicine as opposed to the service's care staff.

#### Preventing and controlling infection

- To ensure effective infection control practices, stocks of personal protective clothing such as disposable gloves and aprons were kept in the provider's cars provided for staff use. This ensured staff had a good supply of these items. Staff had received training in infection control.

#### Learning lessons when things go wrong

- The registered manager reported there had been no accidents or incidents. If an accident was to occur, appropriate action would be taken including recording and consulting health care professionals if required.

# 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's needs were assessed to ensure their needs could be met by the service. Assessment included people's physical care needs as well as any needs relating to their religious or cultural background.
- Technology was used to monitor visit times and provide important information to staff. This supported the registered manager and staff to ensure people received their care as planned.

Staff support: induction, training, skills and experience

- People using the service were supported by staff who had received training relevant for their role such as moving and handling and first aid.
- Staff were supported in their role through regular individual meetings called supervision sessions with the registered manager.

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

- People and their relatives told us they were satisfied with how staff prepared meals.
- Staff received training in safe food handling to ensure meals were safely prepared for people.

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

- People's care plans included key contact details of relevant health care professionals. The registered manager described good working relationships with health care professionals and how this had benefited people to remain living in their homes.

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 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.

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

- Assessments had been made of people's capacity to consent to the care and support provided.
- People's support plans described if they needed any support with decision making in relation to the care and support they received.
- Staff had received MCA training.



# 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

- People were treated with respect by caring staff. Staff were described as, "Very kind and caring, polite and warm."
- People and their relatives told us when visit time allowed, staff would spend time chatting with people which was appreciated. We were told by a relative, "It's good that (the person) has somebody to chat to."
- Staff had received training in equality and diversity to enable them to support people's needs.

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

- People and their relatives told us how they had been consulted by the registered manager when people's needs were assessed.
- The registered manager was aware of the importance of the role of advocates in giving a voice to people about their care and support. At the time of our inspection no-one using the service needed the support of an advocate.

Respecting and promoting people's privacy, dignity and independence

- People's privacy and dignity was respected. People's care plans included actions for staff to preserve people's privacy and dignity when providing personal care.
- One person told us, "They look after my dignity." They told us staff would always knock the door before entering their home and their preferences for the gender of staff providing personal care was respected.
- People's independence was promoted. Care plans highlighted areas where staff should respect people's independence. One person told us "They encourage my independence." A relative described how staff respected a person's wish to be as independent as possible.

# 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

- People received care and support which was personalised and responsive to their needs. One person told us, "They adapt to my needs" and also commented the individualised care and support they received helped them to remain living in their home.
- Staff told us they had enough time during visits to ensure people received their care.
- People's support plans contained detailed information for staff to follow to provide individualised care and support. They had been reviewed when necessary so that staff continued to have relevant and up to date information about people's needs.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- People's communication needs were assessed before care was provided. At the time of our inspection visit there were no people assessed as having specific communication or information needs. The registered manager was planning to familiarise themselves with the provision of information in line with the AIS.

Improving care quality in response to complaints or concerns

- A system was in place to manage complaints appropriately but no complaints had been received.
- Information was available to people on how to raise a concern or complaint included in their care plan folders kept in their homes.
- One person told us how the registered manager had responded promptly when they raised an issue about their care. We witnessed the registered manager responding effectively to a person's query when we visited the office.

End of life care and support

- As a new service, Merit Care had not been involved in providing end of life care to people. Staff had received training should the need arise.

# 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

- The values of the service were outlined in information given to people using the service. These described the importance of "Rights, respect, privacy, dignity, independence, choice and fulfilment." Throughout our inspection we found examples of the service supporting people in accordance with this approach.
- Staff were positive about their roles and how the service was managed.

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 was aware of the requirement to submit notifications to CQC when certain events occurred.
- Staff meetings and supervision sessions ensured staff delivered care and support in line with the aims of the service.
- The provider was aware of and had systems to ensure compliance with the requirements of the duty of candour. (The duty of candour is a set of specific legal requirements that providers of services must follow when things go wrong with care and treatment).

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

- There were effective audit systems in place to monitor the quality of services and care provided. A service improvement plan was in place which gave areas for monitoring for improvement such as medicine records and staff training.
- The registered manager visited each person receiving the service on a monthly basis to check on their level of satisfaction with the service provided.
- The registered manager described plans for the service to continue to grow although acknowledged this depended on solutions to the current challenge of recruiting enough suitable staff to do this.
- The results of quality monitoring telephone calls made by the provider to people had been recorded and were positive such as "Very happy with the care I have received, the team are professional yet friendly."