

CSN Care Group Limited

Carewatch (Ipswich)

Inspection report

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Date of inspection visit:
03 November 2020

Date of publication:
26 November 2020

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

Carewatch (Ipswich) is a domiciliary care agency providing personal care to people living in their own homes. Not everyone who used the service received personal care. CQC only inspects where people receive a regulated activity of personal care. This is help with tasks related to personal hygiene and eating. Where they do, we also consider any wider social care provided. At the time of our visit 71 people were receiving personal care from the service.

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

People were positive about the care and support they received. People liked having the same care staff to support them. They said that staff turned up and did not miss visits, were frequently on time and rarely late. People were provided with a roster of staff who would visit them and therefore they could prepare and plan for visits.

People had benefitted from the considerable work done to revise the routes that staff completed. Staff were able to get from one person to another and arrive at their allocated calls on time as people were expecting and needing them at the scheduled time. People had consistent staff so that they were able to form relationships and develop trust.

People said that they trusted staff and felt safe in their care; staff had received the correct training to keep people safe. One person told us, "Yes I feel safe, they are lovely people and we have a bit of a laugh."

We found considerable improvement in the delivery of service since our last inspection. Managers had responded well to our concerns and had rectified all breaches of regulation. Management and office staff had changed since our last visit. A new manager had been appointed and registered. We had been regularly updated about improvements made.

Medicines were managed safely. One person told us, "They deal with my medication. They have a cupboard. They never forget to give it to me." Records were completed and were regularly monitored by managers. Individual risk assessments were in place for people, this included infection prevention and control. People told us that staff always wore aprons, gloves and a mask to prevent the spread COVID-19. This was part of the overall risk assessment completed by the agency in relation to COVID-19.

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 inadequate in Safe and Well Led. (published 24 April 2020).

The provider completed an action plan after the last focused inspection to show what they would do and by when to improve. At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

Why we inspected

We undertook this focused inspection to check the service had followed their action plan and to confirm they now met legal requirements. This report only covers our findings in relation to the Key Questions Safe and Well-led which contain those requirements.

The ratings from the previous comprehensive inspection for those key questions not looked at on this occasion were used in calculating the overall rating at this inspection. The overall rating for the service has changed from Inadequate 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 Carewatch (Ipswich) 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 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?

The service was safe.

Details are in our safe findings below.

Good ●

Is the service well-led?

The service was well-led.

Details are in our well-Led findings below.

Good ●

Carewatch (Ipswich)

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 one inspector.

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 registered manager in place.

Notice of inspection

We gave a short notice announcement of this inspection on the morning of our visit. This was to ensure someone would be available in the office to assist the inspection and assess for COVID-19 risks.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service.

During the inspection

Inspection activity began on 3 November 2020 and ended on 10 November 2020.

We spoke with seven people who use the service.

We communicated with seven staff members and four of them provided feedback. We met and spoke with the registered manager and a senior manager supporting them.

We looked at the care records for four people using the service. We looked at a sample of staff recruitment files and records relating to the management of the service.

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 inadequate. At this inspection this key question has now improved to good.

This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management and systems and processes to safeguard people from the risk of abuse and learning lessons when things go wrong

At our previous inspection the provider had failed to robustly assess the risks relating to the health safety and welfare of people. This was a breach of regulation 12: Safe Care and Treatment of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 12.

- The service was acting to safeguard people. Staff spoken with confirmed they had received training. We saw that the office had up to date policies and procedures. Where staff had come forward with concerns, this had been appropriately referred to the local authority safeguarding department, and the person was protected. One person told us, "I feel safe and trust the carers. I have a regular one and they're a decent bloke. He would do anything for me."
- Previously a person had been placed at risk due to not receiving a visit for 10 days. There had been one missed visit since our last inspection. This was promptly found, investigated and lessons learnt to minimise any repetition. A new digital on-line care plan and log of visits and tasks now immediately notified managers if a visit has been missed or was late. Timely action could then be taken to minimise further risk to the person. People we spoke with did not have any missed or late calls. One person said, "Yes they are reliable. Spot on time every morning."
- Previously we were aware of an identified fire risk in a person's own home that had not been escalated to other agencies. This time we found that environmental risk assessments were completed. One identified a person's home as a potential fire risk and a referral had been made to the Suffolk fire service for advice.
- Feedback from social care professionals involved with the service was positive. Communication had improved and matters raised were resolved.

Staffing and recruitment

At our previous inspection we found evidence of a breach of regulation 18: Staffing of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 18.

- At our last inspection concerning feedback was received from people, staff and the local authority relating to consistent, reliable care support that arrived on time. Much improvements had been made that all feedback received was now positive. This feedback was supported by our inspection findings.

- One person told us, "They have improved I would say. Previously I didn't know who was coming. they are reliable now. More like family. You get to know them. I have a copy of the roster that they send me."
- Managers had reviewed all the routes staff worked. These were revised to meet people's preferences and needs. Staff now had time to travel between different addresses and arrive in a timely way. One staff member said, "Majority of the time your route, travel time and the service user is thought of, it's definitely improved since having new members off staff in the office. You definitely have enough time in everyone's houses to complete each task." People had small groups of care staff that were known to them and no strangers called to deliver care and support. One person told us, "I have regular staff - some new ones. If I get someone that is new, they always have someone I know with them that I know. 90% of the time I have the same staff."
- Staff were recruited safely and in line with regulations. Staff also had an induction, training and shadow shifts before they were deemed as competent to work alone.

Using medicines safely

- Medicine management had improved. We examined medicine administration charts that had been returned to the office. These consistently showed that people had received their medicines as prescribed. In addition, managers had audited these records to identify any anomalies. Medicine charts used the codes appropriately and there were good instructions for staff especially relating to the administration of creams for example, "Pea sized amount to be applied to each foot and leg."
- One person spoke to us about their warfarin. This medication has higher risks associated as the total dosage can alter on certain days and therefore takes knowledge and skill to administer as prescribed. This was monitored regularly by health care professionals and was more likely to be a differing dosage. They confirmed that they felt safe with staff administering this medicine. Staff if unsure would ask to see the latest outcome of their blood test that showed the most up to date dosage. The person told us, "They manage my warfarin well. They also ask me morning and night if I'm in pain and if I want any pain killers."
- Going forward with the introduction of the new digital care planning system the registered manager had oversight of timely medicines administration. The system alerted the registered manager to any anomalies and then they could access the daily notes to understand the situation better and resolve matters.

Preventing and controlling infection

- We were assured that the provider was using personal protective equipment (PPE). effectively and safely in line with government guidance.
- People told us that staff always wore PPE. One person told us, "They wear a mask, pinny and gloves and shoe covers sometimes." Another person said, "They are properly kitted out. Even have over shoes."
- We were assured that the provider's infection prevention and control policy was up to date. Staff confirmed that they had the correct training and information along with an uninterrupted supply of PPE. One staff member told us, "I never had any problems with access to full PPE. I personally feel safe and well informed about any risks within my role." Another staff member said, "During this awful time (covid) I feel that I have been very supported throughout the long months and I feel they have taken every measure to make us care workers and service users safe during this time, this makes me so happy."

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 inadequate. 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.

At our previous inspection we found evidence of a breach of regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 17.

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 and managers, staff being clear about their roles, and understanding quality performance, risks and regulatory requirements and promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- At the previous inspection people said that they lacked confidence in the management team and the office staff and that complaints were left unresolved with no replies. At this inspection feedback was overwhelmingly positive about how the service was being managed. People felt no need to complain as the service was reliable and gave people what they needed and wanted. A relative said, "We are more than happy with the care provided. I have no complaints and the staff are so friendly." Another person said, "No complaints about them. They are brilliant with what they do and that is everything I want." Staff feedback was positive about the new registered manager in place. One staff member told us, "I believe Carewatch has made a massive change, even over the last three to four months and I'm preferring it now! I've been with other care companies before and I haven't felt as supported as I do now!" Staff were more connected with newsletters and meetings in place.

- At the previous inspection we reported that senior staff in the organisation were not always responsive to our correspondence or correspondence from other stakeholders. Since the changes made to the management team, communication has been effective. The managers in place have been very responsive to us and other professionals involved. Action plans set out by the registered manager have been achieved.

- We have received assurances that senior managers have reflected on how events unfolded since the last inspection, and what led to the agency getting an inadequate rating. Going forward we have been told that verbal assurances from the managers at the location to the provider will be fact checked from time to time, thus ensuring provider oversight of Carewatch Ipswich. People and staff were surveyed at the point the service became inadequate and were at the point of being surveyed now to measure progress. These results were not collated but showed promise.

- At the previous inspection we were hindered by delays and repeated requests needing to be made for information. On this inspection we found the managers were open and honest with timely provision of

information and provided records as appropriate. We believe the culture within this agency has changed. One staff member said, "I believe that the management do promote an open culture and involve everyone, no one is put out or forgotten about, we have a range of different service users and care workers with different cultures and backgrounds however everyone gets on and no one is treated differently, thank goodness."

Continuous learning and improving care

- There were a number of audits in place to monitor and improve care and learning. Specifically, we looked at missed and late visits, medicines, safeguarding and complaints. Actions had been completed and this included ensuring staff training was up to date and that they were competent to give people their medicines safely.
- The registered manager had taken time to analyse and make themselves aware of the history of the service and had reviewed complaints made to the agency. There had been a marked reduction in complaints received since the new manager had been in post. When complaints were received, these were looked into, resolved, and lessons learnt. An apology letter was also sent.
- The area manager and head of quality and compliance visited the office regularly. We examined their recent report and found they had oversight of the service being delivered. We could see where action was being taken to address any shortfalls identified from the quality checks they completed.
- A number of policies and procedures had been reviewed and updated.

Working in partnership with others

- We received positive feedback from one health and social care professional who told us, "The service has been really engaged in making the improvements necessary, resolving concerns raised and [name of two managers] have been open and honest throughout. The local authority was pleased that the action plans developed were completed."