

Quality Care (North-West) Limited

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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

Quality Care is a domiciliary care service providing care and support to people in their own homes. At the time of the inspection there were 90 people using the service. 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 and their relatives told us they felt safe. The provider had effective safeguarding procedures and staff felt confident raising concerns. We saw application forms did not request a full employment history. This was actioned immediately by the registered manager following on from inspection and we saw that CV's were being sought. Although formal 1-1 supervision meetings and staff meetings were not currently being documented due to the fact the staff team were in regular contact with the management, staff told us they felt well supported. We made a recommendation about documenting supervisions with staff and organising team meetings. We also found some policies and procedures needed updating.

People told us their medicines were being managed safely and assessments of need and care plans were undertaken. Staff told us they had appropriate training. 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 told us the staff were extremely caring. They told us they were treated with dignity and respect. We observed staff supporting an individual and it was evident they were kind, caring and considerate. We saw numerous thank you cards and compliments praising the staff team.

People and families knew who to speak to if they had a concern and felt confident raising any issues. No complaints had been received since last inspection. We saw evidence of quality assurance surveys taking place which were very thorough and covered a range of topics.

People were consulted about their care and received care that was centred on them as an individual. People felt well supported by the management. It was clear they were passionate about the care they provided as a family run agency.

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 Good (published 23 November 2016)

Why we inspected

This was a planned inspection based on the previous rating.

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 effective?

The service was effective.

Details are in our effective findings below.

Good ●

Is the service caring?

The service was caring.

Details are in our caring findings below.

Good ●

Is the service responsive?

The service was responsive.

Details are in our responsive findings below

Good ●

Is the service well-led?

The service was well-led.

Details are in our well-Led findings below.

Good ●

Quality Care (North West) 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 (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 and one Expert by Experience. An Expert by Experience is a person who has personal experience of using or caring for an older person that 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.

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 21 May 2019 and ended on 22 May 2019. We visited the office location on 21 and 22 May 2019 to see the coordinators and to review care records and policies and procedures.

What we did before the inspection

We reviewed all the information we held about the service and completed our planning tool. This included notifications the provider had sent us. A notification is information about significant events which the provider is required to send to us. We also contacted the local authority who had no concerns about the service.

We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspection. We used all of this information to plan our inspection.

During the inspection

We spoke with seven people who used the service and two relatives. We spoke with two coordinators and contacted five staff members by email. We looked at three people's care records. We also looked at a range of records relating to the running of the service, including three recruitment files, training records, medicine administration monitoring, rotas, quality monitoring records, complaints, staff recruitment and policies and procedures.

After the inspection

We spoke with the registered manager who was on leave during the inspection. Information gained on inspection was corroborated and further information was sent to us by the registered manager following the inspection.

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 good. At this inspection this key question remained good.

This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- The provider took appropriate steps to identify and manage risks to people using the service. People and their families told us they felt safe. One person told us, "I feel very safe here the staff are my friends and my regular worker is brilliant." Another person told us, "I have no worries. I'm very safe, very happy."
- The provider had effective safeguarding systems in place. Staff we contacted had a good understanding of what abuse was, how they would identify signs and what action they would take if they had concerns about people's well-being. Records showed staff had received appropriate safeguarding training and safeguarding's were raised appropriately with the local authority

Assessing risk, safety monitoring and management; Preventing and controlling infection

- The service managed risk effectively. Staff used risk assessments to help manage risk. We saw risk assessments around environmental risks as well as risks in relation to mobility, medicines and behaviours that may challenge the service.
- The provider had contingency plans in place to ensure people were supported in the event of emergencies. Staff received appropriate training in moving and handling. The service had a policy in place around keeping staff safe.
- Infection control was managed safely. Staff had received training and were aware of their responsibilities regarding infection control.

Staffing and recruitment

- We looked at recruitment and saw the service ensured appropriate recruitment checks and references were undertaken. We saw that CV's were on record detailing dates of employment but application forms did not request a full employment history. We raised this with the provider and they ensured the necessary changes were made to the application forms, so all the required information could be captured.
- People who used the service and their families told us they were happy with the staffing levels. People told us, "They are always on time," and "They always explain if they are late." Another person said, "Staff always stay for the appropriate time, sometimes a bit longer if I need anything." People told us they had consistency of staffing. One person said, "It's usually the same girls that come which is good as I get to know them."

Using medicines safely

- Medicines were managed safely. One person told us, "The staff are very good. They look after me and make sure I get my medication on time." The medicines policy was in the process of being updated at the time of inspection. Following on from inspection we received the updated version.

- Staff had received appropriate training in medicines and competency checks were carried out. People were supported to take their medicines in a safe manner and we saw that medicine audits were taking place.

Learning lessons when things go wrong.

- Although accidents and incidents were being documented in the day book and on the individual's care record, these were not always being collated and analysed for trends and patterns. We raised this with the provider who agreed to implement this.
- We saw evidence of the provider responding appropriately when people raised issues about times of visits.

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.

At the last inspection this key question was rated as good. At this inspection this key question has now remained the same 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 effectively. Management carried out assessments of people's needs prior to receiving a service.
- Care plans were in place and staff regularly reviewed and evaluated them.
- Staff were aware of good practice guidelines and used them to support the delivery of care.

Staff support: induction, training, skills and experience

- Staff received training which gave them appropriate information to enable them to carry out their duties safely. We looked at the training matrix and saw staff had received appropriate training.
- Staff told us they received a comprehensive induction. They told us they felt supported by the management and had the appropriate skills and experience to support people effectively.

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

- We saw the service supported people's dietary needs.
- Staff made referrals to external agencies, such as speech and language therapists and dieticians for support and guidance as appropriate.

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

- People had access to appropriate healthcare and staff worked with other agencies to make sure people's healthcare needs were met.
- People told us they had access to outside professionals should they need it. We saw evidence in care files to show professionals had been involved in people's care and referrals had been made to a range of health care professionals when support was required.

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.

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA.

Where people may need to be deprived of their liberty in order to receive care and treatment in their own homes, the DoLS cannot be used. Instead, an application can be made to the Court of Protection who can authorise deprivations of liberty.

We checked whether the service was working within the principles of the MCA. The service was complying with the principles of the Mental Capacity Act 2005.

- Staff had received training in the MCA and there was an MCA champion in the service
- The service was following the principles of the MCA and records we saw confirmed this.

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.

At the last inspection this key question was rated as good. At this inspection this key question has now remained 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 well treated and respected. People felt listened to. One person told us, "They are pleasant and friendly. They sit and chat with me, keep me company."
- People told us they had good relationships with their carers. One person told us, "I am very happy with care, staff are very good especially my main regular worker." Relatives felt their family members were well cared for.
- Staff told us they enjoyed their jobs. One member of staff told us, "No two days are the same in care. I love helping people and making them smile and laugh, it's a great feeling. Quality Care are a great company to work for and they do listen."
- We looked at compliments during our inspection which informed us staff were kind and caring. We saw numerous thank you cards and compliments praising the staff team.
- The provider had policies in place to guide staff around the of the importance of treating people equally and ensuring their rights were respected.

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

- People and their families were consulted about their care. We saw annual quality assurance questionnaires which were extremely thorough. We saw one example where changes were made because of the consultation. For example, one relative had requested a later morning visit time as they were struggling due to being up providing care during the night.

Respecting and promoting people's privacy, dignity and independence

- Staff were kind, caring and considerate. They treated people with dignity and respect.
- Staff promoted people's independence. One person told us, "They try and help me be independent, they put things out for me, so I can get washed."
- All staff were aware of the need to maintain confidentiality and a confidentiality policy was in place.

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs.

At the last inspection this key question was rated as good. At this inspection this key question has now remained the same 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's care was planned to ensure their needs were met effectively. Records were very detailed, and person centred. People's care plans contained specific information about their needs. One staff member told us, "The care files are very informative and go in to detail about each client's needs and wishes." One person told us, "Yes I have a care plan, and they discuss it with me and my relative to see if I need anything."
- Staff were aware of people's diverse needs and protected characteristics such as age, disability and gender.

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.

- The service was aware of the AIS and had recruited a Polish carer specifically to be a key worker for one individual using the service for whom English was not their first language. In addition, the provider had sought feedback in their satisfaction surveys around how information could be improved, such as bold print, large print.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- People were supported to maintain relationships with families as much as possible, particularly when they lived further away.

Improving care quality in response to complaints or concerns

- The service was responsive to concerns raised. The home had a complaints policy and procedure in place and people knew how to access this. People and relatives told us they could speak to the registered manager if they had any concerns. People we spoke with had no complaints or concerns whatsoever. One person told us, "If I had any complaints I would take it to the office or tell my daughter and she would sort it out."

End of life care and support

- The service had a policy and procedure for end of life care.

- Staff had received appropriate training in end of life care. One individual was receiving end of life care at the time of the inspection and preferences had been clearly documented.

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 good. At this inspection this key question has now remained the same 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; 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

- High quality care was promoted. People were complimentary about the management and felt they were approachable.
- Staff told us they felt supported by the management. One staff told us, " On call are always available out of hours and management are very supportive and approachable." Another staff member said, "It's a great company with a real family feel to it. The management go above and beyond to provide a great service."
- The care coordinators were hands on and it was evident they had a good understanding of people's needs and they were well respected by the team. It was clear everyone concerned was passionate about the care they provided as a family run agency.
- The service understood the duty of candour and were aware of their responsibilities.

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

- We saw evidence of spot checks, observations and appraisals taking place. However formalised staff supervisions and meetings were not currently taking place. We were told this was due to small size of the service. Staff confirmed communication within the service was good.

We recommend the provider formally document staff supervisions and ensure staff meetings take place.

- Managers were clear about their role and had a good understanding of quality performance.
- We saw evidence of some audits taking place which meant that they could identify what they were doing well and what they may need to improve.
- Policies and procedures covered all areas of the service. However, we found that some required updating in line with current practice. For example, the medicines policy. This was updated following on from inspection.
- Notifications about incidents that affected people's safety or welfare were sent through to CQC as required.

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

characteristics

- The service engaged and involved people and families and worked in partnership with other agencies.
- The provider carried out regular service user and relative satisfaction surveys to gain people's views of the support being provided. People's equality characteristics were fully considered.

Continuous learning and improving care; Working in partnership with others

- The provider used continuous learning to improve care.
- We saw evidence of accidents and incidents that had been documented and appropriate actions taken. The registered manager acted to address any shortfalls following audits to improve the quality of the service delivered to people.
- The service engaged and involved people and families and worked in partnership with other agencies.