

Mulberry Living Ltd

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Inspection report

Mulberry House
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Tel: 01483516770

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Ratings

Overall rating for this service

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

This inspection was carried out on 7 July 2017 and was announced.

Mulberry Living Limited provides personal care and support for people in their own homes. This includes people that are old and frail, some of whom have disabilities. At the time of our inspection the service provided personal care to approximately 36 people. Other people who used the service were not receiving personal care.

At the last inspection in May 2016, the service was rated Good, however there were breaches in regulations around the lack of security of how records were stored and maintained. We also needed to ensure that appropriate notifications were being sent to the CQC in relation to any incidents of alleged safeguarding concerns. At this inspection we found the service remained Good and the breaches had been met.

Staff were contacted by phone call rather than texting personal information if they were required to visit a person at late notice. The registered manager told us that they were still looking into a more secure technology system to communicate people's needs to staff.

All staff were required to complete a detailed accident and incident form at the office and the registered manager signed these off when reviewed to ensure that action had been taken.

Pen profiles for some people were kept in the office so that staff had information about the person before they visited them. However, the registered manager assured us those files that did not have the profiles would be completed soon.

There were other systems in place that were being used to improve the quality of care including audits of care notes, medicines, care plans and accident and incidents form. In addition spot checks were undertaken for each member of staff and people were asked their views of the service. However, the registered manager had not recorded how many people had been contacted. They told us that they would ensure that this was done.

People, one relative and staff were positive about the management of the service. Comments included, "I think the manager is very good and the carers are very nice indeed" and "I have raised things with (the registered manager) and I always feel she listens."

Services that provide health and social care to people are required to inform the Care Quality Commission (CQC) of important events that happen in the service. The registered manager had informed the CQC of significant events.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service well-led?

Good ●

The provider had systems in place to regularly assess and monitor the quality of the service provide.

Records were well maintained and where any gaps were identified the registered manager assured us this would be addressed.

People, relatives and staff told us the manager was supportive and listened to them.

Staff were encouraged to contribute to the improvement of the service and had regular meetings.

Staff said they felt valued.

Mulberry Living Limited

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 2014.¹ This was a focused inspection to ensure that the provider was meeting breaches identified at the previous inspection in May 2016.

This was an announced inspection which took place on 7 July 2017. We gave the service 48 hours' notice of the inspection because the registered manager is often out of the office supporting staff or providing care. We needed to be sure that they would be in. On this inspection there was one inspector.

Prior to the inspection we reviewed the information we had about the service. This included information sent to us by the provider, about the staff and the people who used the service. As this was a focused inspection to look at previous breaches we did not ask the provider to complete 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.

During our inspections we spoke with the registered manager and the business development manager. We looked at two summary care plans, minutes of staff meetings, quality assurance records and accident and incidents forms. After the inspection we conducted telephone interviews with two people that used the service, one relative and one member of staff.

The last inspection of this service was on the 27 May 2016 where we found two breaches in relation to the lack of notifications being provided to the CQC and the lack of accurate and secure records.

This was a focused inspection to follow up on these breaches.

Is the service well-led?

Our findings

At our previous inspection the service was in breach of regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Records were not always kept securely and records were not always kept up to date. On the whole this had been addressed however some small improvements were required with how records were maintained.

At the previous inspection information about people was not always shared securely between the office and staff. At this inspection the registered manager told us that they no longer sent text messages to staff's personal mobile phones with people's personal details. They told us that if a member of staff was required to visit a person at late notice they would ring the member of staff and give them the information they needed. They would also advise the member of staff to come to the office to read the person's care summary if they were able to and staff confirmed this with us. The registered manager told us that they were still looking into a more secure technology system to communicate people's needs to staff.

Incident and accident forms were not always completed in detail at the previous inspection and there were gaps in the records around what steps had been taken to reduce the risk of the incidents reoccurring. On this inspection this had improved. Staff were required to complete a detailed accident and incident form at the office and the registered manager signed these off when reviewed. We reviewed these completed forms and saw that the registered manager had ensured that actions taken had been recorded. For example, one person had been falling regularly. As a result they were referred to the Local Authority and steps were taken to increase the person's visits from staff.

At the previous inspection pen profiles for people were not always available in the office for staff to review. The registered manager told us on this inspection that although some files now had pen profiles, they had not kept a records of those that did not and that this was a working progress. We have asked the registered manager to ensure that all of the files kept in the office have a pen profile related to people so that staff have information about the person that they are supporting. They told us that this would be addressed.

On the inspection previously we identified that there were no records of when daily care notes were being audited. On this inspection this had improved. Each month the registered manager would review people's care notes and where improvements were needed they would contact the member of staff to discuss this. This was all recorded on the notes. For example, where there were numbers missing from the tops of the pages the manager contacted the member of staff to remind them to add this in future to ensure continuity of notes.

There were other systems in place that were being used to improve the quality of care. The registered manager undertook audits around care plans and medicines charts. Each member of staff received regular spot checks to ensure that they were providing good quality care. Staff we spoke with confirmed this. One told us, "I think it's important that our work is checked so we know if we are doing the job wrong." In addition to this people were contacted or visited by staff at the office to ask them if they were happy with the care. However, the registered manager had not recorded how many people had been contacted. They told

us that they would ensure that this was done.

People and the relative we spoke with confirmed that they were contacted by staff at the office to ask them if they were happy with the delivery of care. One relative said, "We have no complaints whatsoever. They do contact us and I feel listened to. They go beyond the call of duty." One person told us, "Nothing is too much trouble." Surveys were sent out each year however the surveys for this year had not been sent at the time of the inspection. Staff attended meetings at the office and these were used as a way of improving the service. Discussions included any additional training that may be useful, policies including whistleblowing. When compliments were received these were shared with the staff at the meetings.

People, the relative and staff were positive about the management of the service. Comments included, "I think the manager is very good and the carers are very nice indeed", "I have raised things with (the registered manager) and I always feel she listens", and (The registered manager) is very informative, she is very good If there is anything we need to know she will contact us", "I feel 100% supported by (the registered manager). If I have a problem I can always ring, I feel valued and they always praise us and give us positive feedback from clients."

Services that provide health and social care to people are required to inform the Care Quality Commission (CQC) of important events that happen in the service. At the previous inspection not all incidents of alleged safeguarding incidents were notified to the CQC. On this inspection we found that the registered manager had informed the CQC of significant events.