

Artemis Domiciliary Care 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

The inspection took place on 13 November 2018. The inspection was announced because we needed to be sure someone would be available at the offices.

Artemis Domiciliary Care Limited is a domiciliary care service. The service operates throughout North Cumbria and provides care and support services to people living in their own home. Domiciliary services are available on a 24-hour basis throughout the year. The services provided by the agency include assistance with personal care, social support, help with meals and domestic tasks. In addition, they provide a rapid response service to assist people in low level emergency situations that do not require a 999 emergency services response.

Not everyone using the service receives 'personal care'; CQC only inspects the service being received by people provided with 'personal care'; help with tasks related to personal hygiene and eating.

At the time of our inspection the service was providing personal care support to 72 people living in and around the city of Carlisle.

At our last inspection we rated the service good. At this inspection we found the evidence continued to support the rating of good and there was no evidence or information from our inspection and ongoing monitoring that demonstrated serious risks or concerns. This inspection report is written in a shorter format because our overall rating of the service has not changed since our last inspection.

At this inspection we found the service remained Good.

The service had a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

Information at the service was not available in various formats. However, it met the communication needs of the current people who used the service.

We have made a recommendation about the implementation of the Accessible Information Standard.

People using the service were safe and protected from the risks of harm or abuse. There were systems in place and staff were familiar with the safeguarding adults process.

Medicines were managed in a safely. The systems and checks that were in place alerted the management team straight away if medicines had not been administered as required.

People using the service were involved in the decisions and planning of their care and support needs.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service supported this practice.

There were sufficient numbers of skilled and trained staff working at the service.

People who used the service told us that the service had good carers that were well-trained and generally arrived on time.

People could comment or raise issues about the service in several ways including formally via a complaints process.

There was a quality assurance system in place at the service. The provider was open to feedback and had developed an action plan to help monitor the service and address aspects of the service that required improving.

There were no breaches of the regulations. The service was meeting all of the relevant fundamental standards.

Further information is in the detailed findings below.

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 remains Good.

Is the service effective?

Good ●

The service remains Good.

Is the service caring?

Good ●

The service remains Good.

Is the service responsive?

Good ●

The service remains Good.

Is the service well-led?

Good ●

The service remains Good.

Artemis Domiciliary Care Ltd

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 was planned to check 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.

This was a comprehensive inspection which took place on 13 November 2018. We carried out telephone interviews with people using the service on 14 November with staff on 20 November 2018.

The inspection was announced. We gave the service 24 hours' notice of the inspection visit because the location provides a domiciliary care service. We needed to be sure that someone would be available at the service.

We visited the office location to meet the registered manager, office staff and to review care records, staff records, policies and procedures.

The inspection team consisted of one adult social care inspector and an expert-by-experience. An expert-by-experience is a person who has personal experience of using or caring for someone who uses this type of care service. Their area of expertise included community services for older people and people with learning disabilities.

Prior to our inspection visit we reviewed the information we held about the service, for example notifications. A notification is information about important events which the service is required to send us by law. The provider also completed a Provider Information Return. This is information we require providers to send us at least once annually 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.

We asked commissioners and health and social care professionals about their views and experience of the service. We received comments from three of the people we contacted.

As part of the inspection we spoke with three people who used the service and the relatives of five other people who used the service, via telephone calls. We spoke with five members of staff employed at the service including the registered manager and the office manager.

We looked at the personnel records for two members of staff and reviewed the support plans of seven people. We looked at a sample of the policies, procedures and records relating to the operation of the service.

We asked the registered manager to provide us with copies of policies and procedures, the business plan and information relating to the management and support of staff at the service. The registered manager sent us the information we asked for.

Is the service safe?

Our findings

At the last comprehensive inspection, we found the service was safe and awarded a rating of good. At this inspection, we found the service continued to be safe.

Everyone we spoke with told us that they felt safe. One person said, "I think my relative is very safe with them (staff). They are really good carers." Another person told us, "I trust them implicitly. They are like friends." A third person commented, "I have no concerns at all about them. They are excellent carers and I feel absolutely safe with them all."

There were systems in place to help ensure people were protected from the risks of harm or abuse. Records showed staff received training to help them identify, understand and report concerns about abuse or people's safety. Staff confirmed they had received this type of training. They could explain the safeguarding processes and they told us the management team would listen and take concerns seriously.

There were risk assessments in place to help staff support people safely. The assessments included detailed information and instructions for staff, particularly around the use of mobility equipment and medication management.

People were supported with their medicines where this formed part of their care plan. Staff had received training and their practice checked to help make sure people were supported safely with their medicines. The electronic recording systems in use at the service meant that records were updated as soon as people had taken their medicines. If staff 'forgot' to sign or had forgotten to administer medicines, staff at the office were alerted straight away so that action could be taken to correct any oversight. The registered manager carried out a daily audit of the medicine recording systems.

The service operated 24 hours-a-day, seven days per week and had emergency and contingency plans in place. There was an on-call system in place to help ensure the service ran smoothly and safely at all times. Staff told us about the process for reporting accidents or incidents to the registered manager. Records of such events were maintained and reviewed by the provider.

There were enough staff employed at the service to help make sure the service was provided as planned. Staff worked in small teams, helping to ensure people received consistent personal support from staff that knew them well. The staff we spoke to thought the staffing levels were "right" and that there was "A good staff team now."

Most of the people we spoke to told us they had a regular team of staff supporting them. Except for one person, people said staff arrived when expected and always let them know if they were going to be late. One person said, "The staff are generally on time. They have never let us down at all." Another person told us, "They (staff) are within a few minutes of the agreed times. They are very reliable."

The provider had a robust staff recruitment system. Checks, including criminal records and employment

histories, had been carried out, helping to ensure people were protected from inappropriate workers.

Is the service effective?

Our findings

At the last comprehensive inspection, we found the service was effective and awarded a rating of good. At this inspection, we found the service continued to be effective.

People had been consulted about their care and support needs and told us that they generally felt their choices were respected. One relative said, "They chat to (name) all the time they are here. They just get on with it now." Another person told us, "They just get on with it now, they know what they are doing."

The service used Smart phone technology, providing staff with up to date (live) information about changes in people's needs, personal safety warnings or medical information. The system also enabled staff to submit reports and updates to the office staff, in a timely manner. Office staff could monitor exactly where staff were and when calls had been completed. One care worker told us, "It took some getting used to but it is really good. I can read about the people I visit before I go on shift. I can check what has been going on and if there are any problems."

The service worked with other health and social care professionals. One social worker told us, "One of my clients had special needs. They had great difficulty in understanding the need for assistance with their personal care and daily living activities. Artemis staff worked with them and eventually through their hard work, soft approach and understanding the person allowed Artemis to assist in most aspects of their care."

Staff said they were provided with training to help them carry out their role safely. Staff records helped to confirm that training took place. The staff we spoke with told us that there was always training available and that this was discussed during supervision and at staff meetings. Staff supervision included face-to-face meetings and observations of staff practices to help managers identify staff training needs and to check they worked safely and in line with the expectations of the service.

People told us they thought the staff were mostly well trained. One person said, "Most of them are well trained and excellent. We get the odd one who is not as good, but no problems with them at all." Another person told us, "They (staff) are excellent. They use the equipment safely and carry out complex care needs, once they have been trained and signed off."

We checked whether the service was working within the principles of the MCA, whether any restrictions on people's liberty had been authorised and whether any conditions on such authorisations were being met.

The service provided support with nutrition, where this had been identified in people's care plans.

Is the service caring?

Our findings

At the last comprehensive inspection, we found the service was caring and awarded a rating of good. At this inspection, we found the service continued to be caring.

One of the social workers we contacted said, "I have the greatest respect for both their home care staff and their Careline staff. Nothing seems to be an issue for them, where my clients are concerned. The home care staff are so compassionate, caring, empathic, and do probably more than they should to give people the best experience of being in their care. Artemis staff are so caring and dedicated I could not have had a better agency to look after one of my clients in particular."

Most of the people we spoke with gave positive feedback about the service. They said they were good carers, generally on time, well-trained and the management were helpful. One relative told us, "They are all very respectful and considerate. When they are helping with personal care they ensure privacy and the door is shut." One of the people using the service said, "The staff let me do as much as possible for myself, then help me when I get stuck." Another person told us, "The staff are very kind and caring. They do everything I need and make sure I am ok before they leave." One of the people we spoke with was not always happy with the care they received. We spoke with the registered manager about this, so that they could investigate further.

The staff we spoke with were mindful of the importance of maintaining people's privacy, dignity and independence. They knew people's needs very well and spoke about them with kindness and respect. One member of staff said, "I think we give a good standard of care. Personally, I don't leave someone's home until I am satisfied that I have done everything they need help with." Another member of staff told us, "People usually get the same team of carers. This helps to build good and trusting relationships."

Care records reflected that people had been involved in the decision-making process and development of their support plans. The plans described people's individual care and support needs and were mindful of the importance of privacy, dignity and people's sexuality.

People using the service had been encouraged to comment about their satisfaction with the service. The provider carried out satisfaction surveys every six months. People had completed and made comments about the service, which the registered manager had reviewed and analysed.

The registered manager told us that people were able to access advocacy services via a referral to the social work team.

Is the service responsive?

Our findings

At the last comprehensive inspection, we found the service was responsive and awarded a rating of good. At this inspection, we found the service continued to be responsive.

The documents we reviewed were available in one written format which suited the needs of most of the current service users. The registered manager told us that the service could access information for people with sight or hearing disabilities, if needed. We discussed the Accessible Information Standard (AIS) with the provider as further work was necessary. The Accessible Information Standard (AIS) was introduced by the government in 2016 to make sure that people with a disability or sensory loss are given information in a way they can understand.

We recommend that the service seek advice and guidance from a reputable source, about communication needs and the implementation of the Accessible Information Standard.

People had received an assessment of their care and support needs prior to using the service. Care plans were based on people's individual needs assessments and had been frequently updated so that their changing needs could be met. Staff that we spoke to told us that they could easily keep up to date, on a daily basis, with any changes via the Smart phone technology used by the service.

One of the people we spoke with was "unsure" whether they had a care plan or not. Everyone else was aware of their care plans and assessments. People told us that they were reviewed regularly as their needs changed.

People could raise issues with the service in several ways including formally via a complaints process. Two of the people we spoke with told us that they had made complaints to the service. One was awaiting a response and the other said, "I ring the office all the time, nothing changes." However, none of the other people we spoke with had ever had to complain about the service. They were confident that should they need to complain, the provider would listen and take their concerns seriously.

There was a complaints procedure in place at the service. This document required minor update and the registered manager attended to this. We found that complaints and compliments had been recorded. There was evidence to demonstrate complaints were taken seriously. There was one recorded complaint. It was clear to see that the provider had investigated the problems, taken appropriate actions and sent a letter of apology and explanation to the complainant.

Staff had received training to help the support people who were coming to the end of their life. One member of staff told us, "We have quite a few people at this stage in their life at the moment. I had training from the Hospice staff. It made me think about people's needs at this time." The member of staff was very clear about the support they could offer and their limitations. A social worker commented on this subject. They said, "I find them responsive in trying to facilitate people wanting to go home for end of life care, if they have the capacity to do so."

Support was available for people wanting to get out into the community for social and leisure activities. However, most of the support provided was in relation to personal care at home.

Is the service well-led?

Our findings

At the last comprehensive inspection, we found the service was well-led and awarded a rating of good. At this inspection, we found the service continued to be well-led.

There was a registered manager at the service and they attended the office on the day of our inspection.

People using the service thought the service was well-led. One person said, "I think it is well managed. It seems to run very smoothly." Another person told us, "It is well managed, the girls are all dedicated to their work and are well supported." A third person said, "They keep in touch to make sure we are ok. They have made a huge difference to my life."

Policies and procedures were in place to help make sure the service operated in a safe way. We reviewed a sample of the policies and found that the information was relevant and helped to keep people safe.

There were quality assurance systems in place. A business plan and an up-to-date action plan had been developed to help keep the service on track. Regular audits took place, some on a daily basis. These helped to monitor and manage the quality and reliability of the service delivered.

Before our inspection the provider completed and returned, the Provider Information Return. This included information about the service, which we checked out and discussed with the registered manager during our inspection visit to the office.

Staff and management meetings were used effectively to exchange information and feedback about the service. The staff told us they felt the management team listened and acted on what was said at staff meetings. One member of staff commented, "We are able to speak out at the staff meetings, say what we think and make suggestions about the service. We are not judged and it is a safe environment for these kinds of discussions." Another staff member said, "The managers keep us up to date with what is going on in the company. They give us praise where praise is due. I like working for this company. We get lots of support and I know the managers are always there for us if needed."

The registered manager told us about other support they provided for staff. This included access to counselling services following traumatic or upsetting incidents that involved staff. They also said, "We lead by example and would never ask anyone to do something that we wouldn't do ourselves." A member of staff that we spoke to commented positively on the fact that the management team covered some of the care calls. They said, "It's good to see that the managers get out there, speak to service users and see what's going on."

The service worked in partnership with the local hospitals, and the local authority. One social worker said, "Artemis phone me with appropriate questions should they have concerns or need advice. they always follow my advice." Another social worker told us, "Artemis are responsive and reliable. They supply community alarms, very often for fast track hospital discharges, helping prevent people staying in hospital

longer than necessary."