

# Care 24 (UK) Limited

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### **Inspection report**

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Date of inspection visit:

11 August 2020

12 August 2020

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01 September 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

Care 24 (UK) Limited is a domiciliary care agency registered to provide personal care and support to people in their own homes. At the time of our inspection 54 people received personal care.

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

Improvements had been made following the previous inspection in April 2019. Safe medicine practices had been introduced to help ensure people received their medicines safely. The provider implemented a new recruitment procedure to ensure staff had been safely recruited.

The registered manager monitored the quality of the service to make sure they delivered a high standard of care. People and family members spoke positively about the quality of the service. Staff said they were comfortable raising any concerns and the management team were approachable. People and their relatives were able to feedback on the quality of the service.

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 requires improvement (published 18 April 2019). The provider completed an action plan after the last inspection to show what they would do and by when to improve.

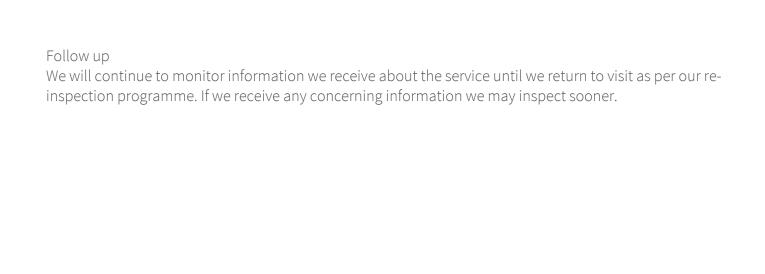
At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

#### Why we inspected

We carried out an announced comprehensive inspection of this service in April 2019. Breaches of legal requirements were found and we served requirement notices for Regulations 12, 17 and 19. We undertook this focused inspection to confirm they now met legal requirements. This report only covers our findings in relation to the Key Questions of 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 requires improvement 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 Care 24 (UK) Limited on our website at www.cqc.org.uk.



# 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 well-led?	Good •
Is the service well-led?  The service was well-led.	Good •



# Care 24 (UK) Limited

**Detailed findings** 

### Background to this inspection

#### The inspection

This was a focused inspection to check whether the provider had met legal requirements following the inspection in April 2019 where breaches of the Health and Social Care Act 2008 (Regulated Activities) 2014 Regulations were identified relating to Safe Care and Treatment, Need for Consent and Good Governance. Two key questions were inspected; 'Is the Service Safe?' and 'Is the Service Well-Led?'

#### Inspection team

The inspection was carried out by one inspector.

#### Service and service type

Care 24 (UK) Limited is a domiciliary care agency that provides personal care to people in their homes. CQC regulates the care provided by the agency. 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 48 hours' notice of the inspection. Due to the COVID-19 pandemic we wanted to review documentation remotely and make arrangements to speak with people and staff prior to our site visit. This helped minimise the time we spent in face to face contact with the management team.

#### 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 authorities with whom the service works. We reviewed the information the provider had sent us in their provider information return (PIR). The PIR gives some key information about the service, what the service does well and improvements they plan to make. We used all this information to plan our inspection.

#### During the inspection

During the inspection, we visited the office location on 11 August 2020 to see the registered manager and to review medication records and care records. We reviewed three people's care records and two staff files around staff recruitment. Records relating to the management of the service and a variety of policies and

procedures developed and implemented by the provider were also reviewed. Via telephone calls on the 11 August we spoke with five staff members and on the 12 August 2020 we spoke with 10 people and one person's relative.

We reviewed a range of records. This included three people's care records and multiple health and safety records. We looked at two staff records in relation to recruitment. A variety of records relating to the management of the service, including policies and procedures were reviewed.

#### After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at quality assurance records.



### 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 requires improvement. At this inspection this key question has now improved to good.

#### Using medicines safely

At the last inspection medicines had not managed in a safe or proper way. We found that medicines were not always managed safely because records were not always correct or audited. This was a breach of Regulation 12 (Safe care and treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014).

At this inspection improvements had been made and the service was no longer in breach of regulation.

- Medicines systems were well-organised, and medicines administration records (MAR) were appropriately maintained by staff and we found no gaps or omissions in recording.
- Clear information was recorded within risk assessments and medication plans as to the support people required.
- Staff received training in medicines management and had their competency to give medicines regularly assessed.

#### Staffing and recruitment

At the last inspection we found safe recruitment checks had not been carried out safely. This was a breach of Regulation 19 (Fit and proper persons employed) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014).

At this inspection improvements had been made and the service was no longer in breach of regulation.

- Safe recruitment procedures were now in place. Oversight of the recruitment process had improved with auditing processes introduced to ensure all necessary safe employment checks had been completed.
- We reviewed two staff files and found the staff members received the appropriate pre-employment checks prior to commencing employment
- Staffing levels at the agency continued to be stable to ensure people received all their care calls at the times agreed. We received positive comments from the people receiving a service, "Considering the world is a mess right now with this pandemic, not once have I been let down by the staff" and "The staff are superb, they turn up on time and I can rely on them."
- Staff told us they had sufficient travel time between calls and did not feel rushed. One staff member said, "I love my job, it's a great agency to work for. I never have to rush my job."

Assessing risk, safety monitoring and management

• People's needs continued to be assessed at the start of the service. This identified any potential risks to

providing their care and support.

- Staff showed a good understanding of each person's risks and how to support them to maintain their independence and keep them safe. One staff member explained how they raised the alarm with the service when they identified one person being very unsteady on their feet.
- Emergency contingency plans were in place to ensure people continued to receive a service in the event of an adverse incident such as loss of power to the office building.

Systems and processes to safeguard people from the risk of abuse

- Safeguarding and whistleblowing policies were in place and staff had training on these. Staff had a good awareness of safeguarding procedures. They knew who to contact if they had any concerns.
- The registered manager knew the procedure for reporting concerns to the local authority and to us (CQC). They had shared information, when required to ensure any allegations or suspected abuse were investigated.

#### Preventing and controlling infection

- •Staff and management had a good understanding of the required COVID-19 infection control precautions and we found there was enough personal protective equipment (PPE) in stock. Staff told us they always wore the required PPE when they completed their home visits and the people, we spoke with confirmed this was the case.
- Contingency plans were in place detailing measures to be taken to help reduce the risk and impact of the COVID-19 pandemic.
- People told us they had confidence in staff to manage the risks of infection. Staff had kept people and their relatives up to date with latest guidance. One person told us, "The service has been great, the staff turn up with all the appropriate equipment and yes I do feel safe."

#### Learning lessons when things go wrong

- Staff understood the importance of reporting and recording accidents and incidents so planned care could be adjusted and people remained safe.
- The registered manager reviewed accidents and incidents to prevent reoccurrence and to identify any learning.



### 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 requires improvement. At this inspection this key question has now improved to good.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

At the last inspection, there was a lack of proper oversight of the service, policies were not followed and auditing and checking processes were not sufficiently robust. This was a breach of Regulation 17 (Good Governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

At this inspection improvements had been made and the service was no longer in breach of regulation.

- Overall performance at the service had improved. Key improvements to auditing systems ensured there was better oversight regarding people's medicines and safe staff recruitment.
- Greater scrutiny of MARs was completed by the coordinators and registered manager when they were returned to the office. Where issues were identified we saw action was taken to address. For example, formal 1:1 meeting with staff took place to help raise performance.
- Staff we spoke with felt well supported. Comments received from staff included, "It's a great agency to work for", "I feel supported. I have had a tough year, but the service has been very understanding" and "We are a reliable agency and we have a good manager."

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- People and relatives were complimentary about the quality of care they received from the service. Comments included, "[Care workers name] is superb, she goes above and beyond for me", "I have had other agencies in the past, but this one is faultless" and "I have no complaints, it's a great service."
- Staff told us they were confident raising any concerns and the management team were approachable. Comments included, "I can pick the phone up if I have a problem. The manager is always on hand to advise" and "We are a good team, we always do our best to help each other. This is led by the owners."

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

- People and relatives spoke positively about the management team. They told us they were able to speak with them and observations showed people approached the registered manager without hesitation if they wanted to speak with her.
- The provider had fulfilled their legal obligations in relation to notifying CQC of important events, and action they had taken to resolve or improve things. The provider had displayed their inspection rating clearly in the

office of the service.

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

- People and their relatives were able to feedback on the quality of the service. This was via regular questionnaires, reviews and telephone calls. Feedback was analysed and actions put in place for any identified issues.
- Staff told us they continue to feel involved in the provision of care people received and staff commented that they tended to work with the same people which helped promote continuity of care.

Working in partnership with others

•The service worked effectively with partner agencies. We spoke with a commissioning organisation who told us the service had been improving and working with them effectively.