

Helena McNally

Old Friends Care

Inspection report

5 Regents Court
Far Moor Lane Winyates Green
Redditch
Worcestershire
B98 0SD

Tel: 01527525583
Website: www.olfriendscare.co.uk

Date of inspection visit:
11 July 2017

Date of publication:
10 August 2017

Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

We undertook a comprehensive inspection of this service on 17 and 18 May 2016. After this inspection we received concerns in relation to staffing levels and how people's care was managed. As a result we undertook a focused inspection to look into those concerns on 11 July 2017. This report only covers our findings in relation to these topics.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Old Friends Care on our website at www.cqc.org.uk

The inspection took place on 11 July 2017 and was announced. We gave the provider 48 hours' of our intention to undertake the inspection. This was because the service provides domiciliary care to people in their own homes and we needed to make sure someone would be available at the office.

Old Friends Care is a domiciliary care agency registered to provide personal care to people living in their own homes. A registered provider was in charge when we inspected the service. Registered providers are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act and associated Regulations about how the service is run. At the time of our inspection 105 people received care and support services.

A registered provider was in charge when we inspected the service. Registered providers are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act and associated Regulations about how the service is run.

People we spoke with told us they felt safe with staff supporting them. Staff were able to tell us of the needs of the people they provided care for and their roles and responsibilities in keeping people safe. Staff understood how to protect people from abuse and were clear about the steps they would need to take if they suspected someone was unsafe.

Staff had been recruited following appropriate checks and the provider had arrangements in place to make sure that there were sufficient care staff to provide support to people. People had their individual risks assessed and had plans in place to manage them, these had been updated to reflect any changes in a person's wellbeing. Medicines were administered by staff that had received training. The provider had procedures in place to monitor that people received their medicines to safely.

People said the service was well managed and the management team were approachable. Staff felt supported by the management team and knew what was expected of them to provide good care. The provider ensured regular checks were completed to monitor the quality of the care that people received and action had been taken where areas were identified for improvement. The provider looked for ways to continually develop and further improve the service.

People and their relative's spoke positively about provider and the care and support they received.

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.

People received care and support from staff that understood how to keep them safe and free from the risk of potential abuse. People told us they felt there were enough staff to meet their care needs, provide support with medicines and manage risks. People received care from staff that had been effectively recruited.

Is the service well-led?

Good ●

The service was well led.

People and staff were complimentary about the service and the way it was managed. Staff felt supported by the management team. People benefited from a service which was regularly monitored because the provider had systems in place to check, improve and develop the quality of the service provided.

Old Friends Care

Detailed findings

Background to this inspection

We previously undertook an unannounced comprehensive inspection of this service on 17 and 18 May 2016, when we rated it as Good. We undertook an unannounced focused inspection of Old Friends Care on 11 July 2017. This was because we had received concerns about staffing levels and how people's care was managed. The service was inspected against two of the five questions we ask about services: Is the service Safe and is the service Well-Led?

The inspection was undertaken by one Inspector and an expert by experience. An expert by experience is a person who has had personal experience of using or caring for someone who uses this type of care service.

Before the inspection, we reviewed the information we held about the home and looked at the notifications they had sent us. A notification is information about important events which the provider is required to send us by law. We also checked information which had been sent to us by other agencies. We requested information about the home from the local authority and Healthwatch. The local authority has responsibility for funding some people who used the service and monitoring its quality. Healthwatch is an independent consumer champion, which promotes the views and experiences of people who use health and social care.

During the inspection, we spoke with 15 people by telephone. We also spoke with nine relatives of people in receipt of care. We spoke with the registered provider, compliance and quality assurance officer, two supervisors and four care staff.

We looked at a range of documents and written records including three people's care records, staff rotas which we discussed with staff and three staff recruitment files. We also looked at checks the registered provider and management team undertook to assure themselves people were receiving the care they required. This included medicine checks, staff spot checks, daily briefing reports and management meeting minutes.

Is the service safe?

Our findings

People told us they liked the staff caring for them and said this helped them to feel safe. One person said, "The carers are genuinely caring; the way they talk. ...and check if you are OK." One of the relatives told us they had no worries because, "[Family member's name] is very safe when carers are about." People and relatives we spoke with were confident if they raised any concerns about safety or care needs, staff would take action to promote people's safety.

Staff we spoke with confirmed they had received training in safeguarding people and demonstrated a good understanding of the types of abuse people could be at risk from. Staff were clear about the steps they would take if they had any concerns. Staff told us they were confident to report any concerns with people's safety or welfare to the management team and that action would be taken. One member of staff told us, "I raised a concern with the office and they responded. Action was taken to help the person and it was resolved."

People told us staff understood what care they wanted to remain safe and to experience the best well-being possible. For example, one relative told us their family member had increased risks to maintain their skin health. They told us, "They (staff) know what to look out for. They are very responsive to any changes and advise me to get the doctor in." Staff told us they ensured people were safe when they helped them with their mobility; this was confirmed by one relative who told us their family member had correct number of staff to assist them.

Staff told us how the training around maintaining people's safety helped them to support people in a way which kept them safe. For example, one member of staff said manual handling training was, "Very good," and ensured they were confident in providing the right support to people. Staff also told us they looked to ensure the environment was kept safe and secure for people. For example, they checked areas were hazard free before they left people and they locked the external doors if that's what the person wanted. This was confirmed by people we spoke with.

Staff confirmed they found out about risks to people's safety by checking their care plans and through regular opportunities to communicate information about people's changing safety needs. Staff said the care plans gave them the correct level of information to provide care and support and were kept up-to-date to ensure they were aware of any changes to people's care needs. One relative told us, "My [family member's] record is up-to-date; we sat down (with staff) and discussed their specific needs."

People told us they felt safe because they knew who to expect as they had regular carers. One relative told us their family member received a rota each week telling them who would be supporting them. They told us it was important to their family member and reassured them as they knew who to expect.

People told us there were enough staff to cover the care calls. One person said, "There's enough staff to meet our needs." Another person told us they had multiple calls each day and commented, "They have never missed a call." People we spoke with told us staff arrived at the expected time or they were contacted

if they staff were running late. One person told us, "If they are late there's a good reason, that's because they are helping another person." People told us the staff did not rush them and ensured all care had been completed before leaving. One person said, "They (staff) never rush," and another person commented, "They (staff) don't rush visits." Staff told us they covered calls for each other when team members were off work, for example on annual leave. Staff also told us additional cover could be provided by the office staff.

The registered provider ensured staff were available to cover people's requested calls times and people's time preferences were discussed when starting a new package of care. One relative told us that extra calls could be arranged and said, "When we first started it became apparent more calls were needed, they have been very flexible in supporting us and making the required changes". Staff we spoke with told us they got to see people regularly and worked as a team to cover the calls. One member of staff said, "Consistency of staff is what works well."

We saw records of employment checks for three staff completed by the provider to ensure staff were suitable to deliver care and support before they started work. The provider had made reference checks with previous employers and with the Disclosure and Barring Service (DBS). The DBS is a national service that keeps records of criminal convictions. Two staff we spoke with also confirmed they did not start work until their DBS check had been completed. One member of staff said, "They had to have all the paperwork (DBS) in place before I went out to support people."

People told us they were able to choose the amount of support they received with their medicines which varied from a reminder to take a medicine or staff administering all their medicines. Two people said they were supported by staff. One person said, "I get mine on time and they always write it down." Another person told us they were assured that when their regular member of staff, "Was not able to come, someone else came from the office to give me my medication. That was good."

All staff we spoke with told us they had received training in supporting people to take their medicines and further checks were made by the management team to ensure staff had the right level of knowledge to support people. Checks of the medicine record sheets were made by the management team to ensure staff had correctly recorded the medicines they had given to people. We saw that action had been taken where gaps in medicine records had been identified.

Is the service well-led?

Our findings

People and relatives we spoke with were positive about the service they received. One person told us, "This agency was recommended to me and I must say I'm more than satisfied." People told us they knew the management team and they were, 'flexible' and 'responsive'. One person told us, "It's all well managed; whenever I ring the office there is always someone to answer the question I'm raising. They answer it there and then." Three people commented they were happy to raise concerns but they had no reason to complain. One person said, "I don't phone the office, there is no need."

A registered provider was in charge when we inspected the service. Registered providers are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act and associated Regulations about how the service is run.

To assist the registered provider a care manager was also in place. There had been recent changes in the management team, at the time of our inspection a new supervisor had been appointed and a new post created, a compliance and quality assurance officer; who had been in post for one week when we inspected. They were responsible for ensuring reviews were completed and to promote staff welfare. They advised they were in the process of reviewing the electronic call monitoring system and ensuring it provided the management information they required, for example, automated alerts for any late calls, to ensure timely action could be taken.

The management changes had been communicated to people, who confirmed they were aware of the changes. One relative said, "I know there have been changes. I know who to call if I need to." Staff acknowledged there had been a period of change within the management team. They said the changes had been positive, well communicated and they felt supported by the new management team. One member of staff said, "New faces bring new ideas and new ways of looking at things. Things are improving all the time."

The provider had an 'interactive rota day' in place, where staff attended the office to collect their rota and agree any changes and amendments. Staff said this was a good way to share information. One member of staff said, "The interactive rota day is good, you go to the office and can raise any issues. There is also a board giving updates and information. There is no excuse for staff not knowing." In addition staff told there were staff meetings where they felt able to tell management their views and opinions. One staff member said, "We can share ideas for improvements."

The registered provider told us of some of the improvements made, for example they had worked to review the rota. They told us this had given them opportunity to ensure people's preferences, for example, calls times were revisited. Paperwork had also been reviewed, one member of staff told us this had led to improvements with additional guidance available to staff, for example diabetes guidance and also any changes in care plans were now highlighted for easy identification by staff.

The provider completed a number of monthly checks to assure themselves of the quality of care being delivered. For example, we saw monthly checks of medicine administration records and spot checks were

completed to observe staff practice. We saw that action had been taken where areas for improvement had been identified and feedback given to staff of improvement required. The compliance and quality assurance officer would also be completing monthly checks of rotas going forward. In addition, a daily briefing was held, looking at things that had worked well and any issues from the previous day. A record was also completed giving outcomes and actions where required.