

Support Carers Limited

Support Carers Ltd

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

What life is like for people using this service:

People told us they felt safe receiving support from the service. The provider ensured that risks were assessed and minimised to ensure that people received safe care and support. People received safe support with their medicines from appropriately trained staff. Staff could recognise signs and symptoms of different types of abuse and would not hesitate to report concerns to the registered manager.

People's needs were assessed before their care commenced and care plans were regularly reviewed to reflect appropriate and chosen person-centred care. Staff received supervision from the registered manager and team meetings were held and documented for staff who were unable to attend. Staff received regular training updates following a comprehensive induction. Staff were aware of the Mental Capacity Act 2005 and assumed people had capacity unless assessed as not.

Staff spoke of people they supported with respect and affection and people told us they felt cared for and respected. People were supported to maintain their independence and staff supported them to complete tasks they were unable to complete themselves. Care plans considered how best to communicate with people, especially those who were non-verbal. Staff ensured they obtained consent before providing support to people.

The service had received no formal complaints however people told us they would either speak to their support worker or phone the registered manager and any concerns would be addressed immediately. Staff told us they felt comfortable when supporting someone at the end of their life and that they were supported by the registered manager when they did so.

We received positive feedback about the registered manager and their team of support workers. There was an audit system in place and the provider ensured they remained current in their knowledge of social care. People told us they would recommend the service to friends and relatives.

Support Carers Limited met the characteristics of Good in all areas, more information is in the full report.

Rating at last inspection: Support Carers Ltd were rated Good at their last inspection, (published 30 December 2015). In August 2017 The Care Quality Commission (CQC) re-registered the provider at their new business address. There has not been any change in ownership of Support Carers Limited, just an adjustment to the business address. As there has not been any change of ownership or leadership, this report references the last report published about the service. When we published the last inspection report we found the provider to be in breach of one of the regulations. We checked to see if improvements had been met and found the provider was no longer in breach of regulations.

About the service: Support Carers Ltd is a domiciliary care agency that provides personal care to people living in their own homes in the community. When we inspected they were providing support to 55 people.

Why we inspected: This is a scheduled/planned inspection based on the service being registered at their current address for one year.

Follow up: We will follow up on this inspection as per our re-inspection programme, and through ongoing monitoring of information received about the service.

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 ●

Support Carers Ltd

Detailed findings

Background to this inspection

The 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.

Inspection team: 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 service.

Service and service type: Support Carers Ltd. is a domiciliary care service. Staff deliver personal care support to people living in their own homes. Services are provided to people who have learning or physical disabilities, who are living with dementia, have sensory impairments, mental health conditions and to both younger and older people.

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. The registered manager of Support Carers Ltd was also the nominated individual.

Notice of inspection: We gave the service 48 hours' notice of the inspection visit because it is a small service and the manager was often out of the office supporting staff or providing care. We needed to be sure that they would be available. We also needed to give the provider time to contact people using the service to let them know we would be contacting them for feedback about the service they receive. Inspection site visit activity started was on 11 December 2018. We visited the office location to see the registered manager and to review care records and policies and procedures.

What we did: Before we inspected we looked at information we already had about the provider. We reviewed notifications we had received from the service. Notifications are reports about specific events that the provider must tell us about by law. We reviewed the provider information return, (PIR). This contains evidence about the service and is submitted annually. The information in the PIR helps us in planning our

inspection.

During the inspection we looked at five staff recruitment files, five peoples care records and health documents relating to health and safety, risk assessment and other aspects of the service. We spoke with 13 people who used the service and three care staff, the care coordinator and the registered manager.

We contacted five health and social care professionals for feedback about the provider and received one response.

Is the service safe?

Our findings

Safe – this means people were protected from abuse and avoidable harm

Good: People were safe and protected from avoidable harm. Legal requirements were met.

Assessing risk, safety monitoring and management

- People told us they felt safe with the support provided by the service and were happy to have the care workers in their homes. One person told us, "They take care to make sure I'm safe, when I walk in to a room they follow behind me in case I stumble. I'm nervous after a fall in the shower; they stay by my side and talk to me to reassure me, I'm getting better now." Another person said, "I need hoisting from the bed to the chair and always feel quite relaxed; they know what they are doing."
- Risks associated with providing care to people and environmental risks had been assessed and actions were in place to minimise risks. Risks assessments were updated regularly and any additional risks noted by care staff were passed on to the registered manager and care coordinator who would update the assessments.

Systems and processes

- The provider had effective safeguarding policies and procedures that were readily available to staff. The provider subscribed to a social care compliance company that ensured all policies and procedures were current and reflected relevant legislation and best practice.
- Staff members we spoke with had a clear understanding of safeguarding and the signs and symptoms of possible abuse. All staff told us they would immediately inform the registered manager if they were concerned someone was at risk of harm.
- The registered manager was aware who to refer to in the event of suspected abuse and when to notify Care Quality Commission (CQC) of referrals.

Staffing levels

- The provider had built the services customer base in line with staff recruitment. When the provider received requests to provide care to people from either the local authority or people themselves, the registered manager would only provide care if they had sufficient numbers of staff available to provide such care
- Staff told us they did not feel rushed when attending care calls and had sufficient time to travel between visits.
- There was a clear recruitment procedure and the relevant pre-employment checks were mainly completed. These included completing application forms, obtaining full work histories, and obtaining references from previous employers. However, one person did not have any references and had been working with the company for several weeks. The registered manager had repeatedly attempted to obtain the references and had not received a response from the contacts provided by the staff member. The staff member had been asked to provide additional references.
- All staff working at Support Carers Ltd had a Disclosure and Barring Service (DBS) check. The DBS check helps employers make safer recruitment decisions and prevent unsuitable people from working with vulnerable groups.

Using medicines safely

- The service supported people with their medicines. The registered manager told us that though staff were trained in administering medicines they would only prompt people to take medicines and support them to find the correct dose in their blister packs.
- Staff knew what actions to take if they noted that medicines had been taken in error by people, they would inform the registered manager of the service and seek medical advice.

Preventing and controlling infection

Staff were trained in infection prevention and control. One staff member told us, "They taught us all about cross contamination and how germs can enter and exit the body". They went on to tell us that the provider ensured they had sufficient supplies of gloves, aprons, hand cleaning gel, face masks and protective overshoes. They were clear when they would wear each type of personal protective equipment (PPE) and how often and when they should change it.

Learning lessons when things go wrong

- Accidents and incidents were recorded on a central log to enable the registered manager to review concerns and establish if there are patterns or actions that would help in reducing future incidents. When we inspected there was only one incident recorded.
- The registered manager was in regular contact with people and their relatives and had ensured that there had been no missed calls.
- The registered manager was aware of the importance of reflecting on incidents and reviewing care plans and risk assessments to minimise future incidents.

Is the service effective?

Our findings

Effective – this means that people's care, treatment, and support achieved good outcomes and promoted a good quality of life, based on best available evidence

Good: 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

- Before agreeing to provide care to people, the provider completed an assessment of each person's needs and considered if they had capacity to support them and meet their needs.
- An initial care plan was devised following assessment and the registered manager and care coordinator supported the individual several times to ensure their needs were as expected. Care plans were reviewed at least six monthly or as necessary.
- Care plans were person centred and reflected people's preferences as to how their care should be delivered.

Staff skills, knowledge and experience

- Staff participated in two supervision meetings per year. One staff member told us, "We have one to one meetings a couple of times a year. We write goals and get feedback about how we are working and any concerns are sorted or a work around is arranged".
- The registered manager told us that if staff wanted additional supervision meetings they could be arranged. The registered manager and care coordinator worked alongside care staff as a means of staying familiar with people's needs and to check that staff have the skills to effectively support people.
- The registered manager has arranged for several care staff to complete 'train the trainer' courses in a number of relevant areas. They will then be able to cascade training and will be a resource for colleagues to access for help and advice. Staff involved in the training will receive additional supervisions with the registered manager to support them in their roles.

Supporting people to eat and drink enough with choice in a balanced diet

- Staff supported people to prepare and eat a balanced diet. Most people had pre-prepared meals heated in a microwave or oven and served, however some people liked home cooked foods. One person told us, "I do the lot, pies, steak, casseroles. I can have anything, they help me by cutting things up, if it's a casserole I put it in the oven and cook it long and slow and they take it out when they come on the later visit."
- Staff received annual updates to their food safety training and people reported that they had choice over their meals, that they were well presented and drinks were hot and to their liking.

Staff providing consistent, effective, timely care

- People told us they had regular care workers and if a new care worker was recruited they would be properly introduced to them. One person told us, "There have been lots of changes of staff but I know them all now. New ones come with an experienced person, sometimes the registered manager, to show them what to do before they come on their own". Another person said, "There is a mixture of regular ones and new people, they are introduced when they first come and stay and watch so they know the routine next time".

- When considering new referrals to the service, the registered manager told us they would only take people for whom they had capacity in existing staff rounds. As staff were recruited, new customers were accepted and a new route developed.

Ensuring consent to care and treatment in line with law and guidance

- Staff were aware there were consent forms available in peoples care records however would ask before acting when providing personal care. A staff member told us, "I'd get verbal consent, the clients would signal they're OK with it. For instance, I would say, would you like to use the toilet or is it OK if we get you changed?".

- 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.

- Staff had completed training in the MCA and could tell us about the five principles of the Act.

- Staff told us that information about a person's capacity would be found in their care plan. A staff member told us, "I would research their care plan, I'd look at their likes and dislikes and speak to my colleagues".

They would use the information they found to support people with choices such as which drink or meal to have and knew that if any more significant decisions were to be made that an assessment and a best interest decision would be made.

Is the service caring?

Our findings

Caring – this means that the service involved people and treated them with compassion, kindness, dignity and respect

Good: People were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported

- Staff told us they worked with colleagues who were kind and caring to people all the time. When asked about their colleagues a staff member told us, "We have a laugh and a joke but remain professional and keep the focus on the person". People also told us that staff were caring, "Very friendly, open and humorous we have a laugh and a joke."
- Staff treated people and their homes respectfully, one person told us, "They're careful and don't barge about the place. They only go where they need to go and ask me before going into cupboards or drawers." Another person said, "They knock {the door} and wipe their feet before they come in, they're very clean".

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

- Staff had experience in working with people who did not communicate verbally. One staff member told us, "I work with a couple of people who don't speak so I listen for other sounds. ..., I look at facial expressions and body language and position, I also make sure I take plenty of time".
- Peoples care plans were constantly reviewed to ensure they contained current person-centred details about how to provide care to the individual. Staff asked people for consent before providing care and people were involved in care reviews and decisions about their care.
- When assessing people's needs and care planning people were asked if they had specific religious and cultural needs that the provider should respect when providing care. Any needs were planned for and staff were aware how to provide care to respect these needs.

Respecting and promoting people's privacy, dignity, and independence

- People told us they were supported to be independent and staff did not do for them unless necessary, "They're brilliant! I've never experienced anything like this before it's an eye opener how hard they work. The care is wonderful compared to what I've had before; it makes me feel more confident living in my own home." Another person told us, "I feel I am in control, they're there to help me do it myself and help if I can't manage".
- People told us that staff were respectful when providing personal care, one person told us, "At first I was a bit anxious about it. They said that's what we're here for, asked do you mind if I touch you here? And I say well I can't do it myself. They put me at ease I'm fine now." Another person told us that staff showed empathy when providing care saying, "They put me at ease at first, we had a laugh and a joke about it, they said we've all got the same bodies. They wait outside the bathroom and put a towel around me when I get out of the shower."

Is the service responsive?

Our findings

Responsive – this means that services met people's needs

Good: People's needs were met through good organisation and delivery.

How people's needs are met

Personalised care

- People had care plans that were written specifically to meet their care needs as they wanted them to be met. We were told by people that care packages had been both increased as their needs had increased and decreased as their health improved.
- If people needed any changes made to care plans they were made easily by contacting the registered manager. One person told us, "[Registered manager] comes and asks if there's anything more that I need, she says she can arrange it no problem. I'm ok at the moment."
- The registered manager told us that staff had supported people to take holidays by supporting them to book and accompanying them away for their break to provide care for them.

Improving care quality in response to complaints or concerns

- When we inspected Support Carers Limited there had been no complaints. People told us that they would be comfortable raising anything with the registered manager and they were confident they would deal with the matter confidentially and effectively.
- People told us, "If I had a problem I would speak to [registered manager]. There have been little hiccups in the past and I have rung her and she always comes out to see us and puts things right." Another person told us, "I'd phone [registered manager], she's a lovely and beautiful lady. She said any complaints I should phone her up, she will keep it confidential, she will sort it out".

End of life care and support

- When we inspected no-one was receiving end of life care. When we asked, staff had supported people at the end of their life and had found the experience to be a positive one. A staff member told us, "I enjoyed it, it felt good as I was making them feel comfortable. Support was available for me and for the family".
- Another staff member told us how the service managed care in people at the end of their life. They told us that staff noted down all changes to the persons condition and reported directly to the registered manager who would immediately reassess and update care plans.

Is the service well-led?

Our findings

Well-Led – this means that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture

Good: The service was consistently managed and well-led. Leaders and the culture they created promoted high quality, person-centred care.

When we inspected the service in 2015 we found the provider to be in breach of Regulation 16 (1) (b) (Notification of death of service user) of the Care Quality Commission (Registration) Regulations 2009. We reviewed the notifications we had received from the provider since we last inspected and were satisfied that they were no longer in breach of regulations and were making all required notifications.

Leadership and management

- We received only positive feedback about the registered manager from staff and people who received a service from the provider. One person told us, "They do a proper job, whatever they get paid is not enough. They love [registered manager], [staff] there's good morale. [Registered manager] does well in choosing her staff, she's a happy person and it rubs off on them. They're like a family really."
- The registered manager and care coordinator were both involved in the day to day running of the service as well as management. They frequently completed care visits and took these as opportunities to gain feedback on staff, care provided and generally about the service. "Registered manager has a shift and we fill her in. Asks have we had any problems with the staff or the care, how do staff speak to us".

Provider plans and promotes person-centred, high-quality care and support, and understands and acts on duty of candour responsibility when things go wrong

- Peoples care plans reflected the providers commitment to person-centred care.
- The registered manager was aware of their responsibility in terms of the duty of candour and there was an open and honest culture which focussed on learning rather than blame if something went wrong.
- Spot checks of staff were completed informally when senior staff supported at care calls and more formally and recorded every three to six months.

Managers and staff are clear about their roles, and understand quality performance, risks and regulatory requirements

- There was a clear structure to the service, the registered manager was supported by a care coordinator and they both supported a team of support workers. There were no senior support workers due to all the care staff being very experienced and competent.
- To provide an opportunity for support workers to develop their careers, the registered manager had arranged for several support workers to complete 'train the trainer' courses in various areas of care.
- Staff had faith in the ability of the registered manager as a leader and in the provider. One staff member said, "They are a very good company to work for. Everyone is approachable and I have no worries about coming in with concerns, anything gets sorted. I am enjoying my time working here". When asked if staff morale was good, one staff member told us, "Yes, we are a big family".
- Audits of the service were completed including care planning, task plans, skin charts and MAR charts and

actions were passed to staff either via a direct message or at a staff meeting.

Engaging and involving people using the service, the public and staff

- People told us that the registered manager was always available to them if they phoned and often came to complete their care visit. "[Registered manager is a lovely and sympathetic lady. She is always available if I ring the office. I would speak to registered manager; she would say no problem, sort it out and come back to you".
- Staff told us that they felt able to approach the registered manager if they had ideas about how they could improve aspects of the service or specific care plans. We saw staff coming to the office between visits and shifts and interacting with each other and the registered manager, all seemed to be professional and good morale was evident.

Continuous learning and improving care

- The provider had a wide range of policies and procedures. All policies and procedures were updated in line with changes to legislation and the registered manager was notified about any changes and printed all new documents for staff to see. Staff could also access the online documents.
- We saw the registered manager and care coordinator continually discussing peoples care and issues that had arisen and devising plans to minimise risks and improve care provided.

Working in partnership with others

The provider had forged positive links with local GP services and other healthcare providers. They also worked with the local authority to arrange for the prompt provision of care packages to facilitate timely discharge from hospital settings. We received feedback from a local commissioner who told us, "They are very caring and always make sure they have everything in place before committing to start. During care they let us know if any changes need to be made".