

Horsham & Crawley Care Limited Carewatch (Horsham & Crawley)

Inspection report

Unit 7 Mulberry Estate, Foundry Lane Horsham West Sussex RH13 5PX Date of inspection visit: 30 October 2020 03 November 2020

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Good

Tel: 01403252542

Ratings

Overall rating for this service

Is the service safe?	Good	
Is the service well-led?	Good	

Summary of findings

Overall summary

About the service

Carewatch (Horsham and Crawley) is a domiciliary care service providing personal care and support to people in their own home. At the time of the inspection 76 people were being supported. 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 People and their relatives told us they were happy with the service they received. They described the care workers as kind, caring, patient and said the service was reliable.

The registered manager had addressed the areas identified for improvement following the last inspection. For example, systems for safeguarding people from abuse had been reviewed and were now robust. Incidents were consistently monitored and safeguarding concerns had been appropriately identified and escalated in line with the provider's policy.

Systems for monitoring quality and managing risks had been reviewed and improved. There were robust arrangements to support governance and to provide management oversight. This meant that the registered manager could be assured that risks were consistently identified and managed.

Appropriate infection control procedures for the Covid 19 pandemic were in place to keep people safe. Staff had received additional training and used appropriate Personal Protective Equipment.

Risks to people were assessed, managed and reviewed consistently. Detailed care plans provided staff with the information they needed to provide care safely and in the way people preferred.

People were receiving their medicines safely and there were enough staff to provide the care visits that people needed.

People and staff described the service as being well managed. Staff spoke highly of the registered manager and said they were well supported in their roles. A staff member told us they were "proud of the good job" they were doing.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection and update:

The last rating for this service was Requires Improvement (published 23 September 2019) and there were two breaches of regulation. 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 on 8 and 11 July 2019. Breaches of legal requirements were found. The provider completed an action plan after the last inspection to show what they would do and by when to improve Safe and Well led. We undertook this focused inspection to check they had followed their action plan and 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 Carewatch (Horsham and Crawley) on our website at www.cqc.org.uk.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our reinspection programme. If we receive any concerning information we may inspect sooner.

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



Carewatch (Horsham & Crawley)

Detailed findings

Background to this inspection

The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Care Act 2014.

Inspection team The inspection was undertaken by two inspectors. One inspector completed a site visit.

Service and service type This service is a domiciliary care agency. It provides personal care to people living in their own houses and flats.

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

This inspection was announced. We gave the service 48 hours' notice of the inspection. This was because we needed to be sure that the provider or registered manager would be in the office to support the inspection.

Inspection activity started on 29 October 2020 and ended on 3 November 2020. We visited the office location on 30 October 2020.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We asked the provider to send us a number of documents before the inspection site visit. We sought feedback from the local

authority and professionals who work with the service. The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us 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.

During the inspection-

We spoke by telephone with five people who used the service, two relatives and one friend about their experience of the care provided. We spoke with five members of care staff, the registered manager who was also the provider, and two office-based staff.

We reviewed a range of records. This included seven people's care records, medication records and systems for planning care visits. We looked at four staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection

We looked at training data and 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. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

At our last inspection the provider had failed to raise safeguarding alerts immediately upon becoming aware of an allegation of abuse. This was a breach of Regulation 13 (Safeguarding service users from abuse and improper treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. At this inspection enough improvement had been made and the provider was no longer in breach of this regulation.

- Staff demonstrated a clear understanding of how to safeguard people from abuse and were able to tell us how they would report any concerns.
- Systems had improved to ensure that potential safeguarding incidents were identified and reported in line with the provider's safeguarding policy.
- Records confirmed that appropriate measures were put in place to protect people from risks of abuse.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- Risks to people had been identified and assessed. Risk assessments and care plans were detailed and personalised to guide staff in how to care for people safely and in the way they preferred. For example, one person with limited mobility, required support to move. A risk assessment and care plan provided detailed guidance for staff, identifying the equipment to use, the person's abilities and their preferred routine when being supported to move.
- •People told us they felt safe with the care workers and confidence in their skills and abilities. One person said, "I always feel safe, they understand me and know what help I need."
- People's needs were reviewed regularly to ensure that risk assessments and care plans remained up to date and provided staff with accurate information. One person told us, "Someone from the office came to check that everything is still ok and as it should be."
- Staff described being able to access the information they needed with ease, using an electronic system. One staff member explained how information was updated and any changes were communicated effectively, they told us, "With changes in need, as soon as you ring the office they will change the information while you are on the phone."
- Incidents and accidents were recorded and monitored. Appropriate actions had been taken to prevent a reoccurrence. One person told us, "I slipped of the bed, they've got some rails for me now so that won't happen again." Care plans reflected changes that had been made following incidents and accidents.

Staffing and recruitment

• There were enough suitable staff to provide all the care visits. The provider's electronic scheduling system showed that care workers were allocated to geographical areas and had travel time between care visits. Staff told us there were enough staff, one care worker said, "We all cover for each other if we need to, for

sickness or leave."

• People told us they usually had regular care workers who they had got to know. One person said, "It's usually the same ones, there is a small team who come to me because I have a lot of visits." Another person described having confidence in the service, they said, "They are reliable, they never let you down, they can be late occasionally, but they always turn up."

• Staff were consistently recruited through an effective recruitment process that ensured they were safe to work with people. Appropriate checks had been completed prior to staff starting work which included checks through the Disclosure and Barring Service (DBS). These checks identify if prospective staff had a criminal record or were barred from working with children or vulnerable people. Staff had obtained proof of identity, employment references and employment histories. We saw evidence that staff had been interviewed following the submission of a completed application form.

Using medicines safely

- Some people needed support with their medicines. Staff had received training in how to administer medicines safely and their competency was checked regularly. We do not inspect how medicines are stored in people's homes.
- Some people needed to have their medicines within a specific timeframe. The provider's electronic call monitoring system confirmed that this had happened, and people told us that they had received their medicines at the time they needed them.
- The provider had systems in place to check that people had received their medicines as prescribed.

Preventing and controlling infection

- We were assured that the provider was using Personal Protective Equipment (PPE) effectively and safely. People told us staff were using PPE during their visits. One person told us they had been shielding throughout the pandemic and had been initially worried about care workers coming into their home. They said, "They have been absolutely marvellous, they always have gloves, aprons and masks on. They are all very careful and that gives me a lot of confidence in them."
- We were assured that the provider was accessing testing for people using the service and staff.
- Staff told us they had electronic thermometers to check people's temperatures and knew how to report any concerns about symptoms they noticed in people or themselves.
- We were assured that the provider's infection prevention and control policy was up to date. Risk assessments were completed for all staff members to identify anyone who might be at increased risk if they were exposed to Covid 19. Staff told us they had received additional training in infection control procedures and described having access to all the equipment they needed.

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

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

At the last inspection systems and processes had not been operating effectively to ensure that risks to the safety and welfare of service users were mitigated. This was a breach of Regulation 17 (Good Governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. At this inspection enough improvement had been made and there was no longer a breach of Regulation 17.

- Systems and processes had been changed to improve governance and management oversight. Following the last inspection, the provider sent us an action plan detailing how they would make improvements to their systems to ensure better oversight. The provider had followed their action plan and new systems had been introduced and embedded within practice.
- Quality monitoring systems were effective in identifying trends and patterns following incidents, accidents and complaints. Records showed what actions were taken, the outcomes for people and who had been informed. When things went wrong, the lessons learned were communicated across the staff team.
- The registered manager understood their regulatory responsibilities and had informed the relevant people when incidents occurred.
- People said they knew who the registered manager was. They told us they would feel confident to raise any concerns with them.
- Staff were confident in their roles and told us they received the support and training they needed. They spoke positively about the registered manager and described feeling proud to work for the provider. One staff member said, "It's a lovely company to work for."

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

- There was a culture of openness and continuous learning. Staff told us how they were encouraged to report mistakes and to reflect upon their practice. One staff member said, "I say, how can I learn from this? If I can figure it out myself, I go into the office and discuss what I can do differently."
- Another staff member described how good practice was rewarded saying, "The recognition is very good."
- Staff described how a focus on providing personalised care was embedded within practice. People spoke positively about the care and support they received and the positive outcomes they had achieved. One person told us how staff had supported them to improve their independence, saying, "They (care workers) are always kind and patient and encourage me to do things for myself. I am much more confident now and more independent."

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

• Staff described feeling included and involved with developments at the service. One staff member told us about the introduction of electric bikes for care workers and the improvement this had made to completing their care visits. They told us, "It's brilliant, it's taken me far less time so it's made a big difference."

• All the staff we spoke with were positive about the introduction of the electronic monitoring system and described the benefits of the system. Staff told us the system was easy to use and made information more accessible to them.

• Staff described how the provider worked hard to ensure people and their families were included, involved and remained engaged during the pandemic. Regular newsletters were provided to keep people updated on any changes and provided reassurance about arrangements for people's support. One person told us, "They are very well organised."

• The provider sought people's feedback on the quality of the service with regular monitoring visits and with questionnaires. People said they benefitted from having regular care workers who had got to know them. A family member described how this had aided feedback saying," We know them well enough to tell them if we are not happy about something, having a good relationship with the carers is very important, you build up trust and understanding."

• People described feeling connected with the community through their care visits. One person told us about events that the provider had arranged to help combat loneliness and isolation. They said, "We would have been having outings, but because of lockdown they provided a picnic at home instead which was lovely. We are all having a special meal delivered on Remembrance Day too." The registered manager told us, "Promoting well-being and fun, even for only a few hours can make a huge difference."

• Staff described how they had encouraged support for people's well being during the pandemic, including assisting people to stay connected with family and friends on-line, support with accessing emails and internet shopping.

• Staff had developed positive relationships with health and social care professionals and worked in partnership to achieve good outcomes for people. For example, a person needed a planned admission to hospital. The provider arranged all the person's care visits with only one care worker, over a prolonged period. This reduced the risk of infection both before and after the hospital admission.