

Omer Care Limited

# Omer Care Ltd

## Inspection report

Front Office, 2 Bakers Lane  
Codicote  
Hitchin  
Hertfordshire  
SG4 8XG

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Tel: 01438820999

Website: [www.omercare.co.uk](http://www.omercare.co.uk)

## 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

We undertook an announced inspection of Omer Care on 12 February 2016. We told the provider two working days before our visit that we would be coming to ensure we could access the information we needed.

Omer Care is registered to provide personal care to people who live in their own homes. At the time of our inspection 23 people received support with personal care in their own homes.

We last inspected the service on 11 August 2014 and found the service was meeting the required standards at that time.

The service had a registered manager. A registered manager is a person who has registered with the Care Quality Commission (CQC) 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.

People and their relatives felt confident that people were safe and secure when receiving care in their own homes and when they were supported to go out and about socially. Staff were knowledgeable in recognising signs of potential abuse and understood how to report concerns. Assessments were undertaken to identify any risks to people who received a service and to the staff who supported them. There were sufficient numbers of staff available to meet people's individual support and care needs. People received appropriate support from staff to enable them to take their medicines.

People received their care and support from a staff team that had a full understanding of people's care needs and the skills and knowledge to meet them. People who used the service were treated with kindness and respect and their privacy and dignity was respected.

People received care and support that was based on their individual needs and preferences. People's care and support plans were amended as necessary and in consultation with them to meet their changing needs. People and their relatives felt confident to raise any concerns and were in no doubt that they would be managed appropriately.

Staff were supported by the registered manager and received the training and supervision necessary to empower them to provide safe and effective support for people. People's views about the service provision were gathered regularly to help the registered manager assure themselves that the service they provided was safe and was meeting people's needs.

## 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's care was provided by staff who had been safely recruited.

Staff had been provided with training to meet the needs of the people who used the service.

Staff knew how to recognise and report abuse.

People's medicines were managed safely.

### Is the service effective?

Good ●

The service was effective.

People received care and support from staff who were appropriately trained and supported to perform their roles.

Staff received regular support from the registered manager.

People were supported to access health care professionals as necessary.

### Is the service caring?

Good ●

The service was caring.

People were treated with kindness, dignity and respect.

Staff demonstrated a good understanding of people's needs and wishes and responded accordingly.

People's dignity and privacy was promoted.

### Is the service responsive?

Good ●

The service was responsive.

People's care was planned and kept under regular review to help ensure their needs were consistently met.

People were supported to engage in a range of activities.

People's concerns were taken seriously and their relatives and representative felt listened to.

**Is the service well-led?**

The service was well led.

People had confidence in staff and the management team.

The provider had arrangements in place to monitor, identify and manage the quality of the service.

The atmosphere at the service was open, respectful and inclusive.

**Good** ●

# Omer 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 met 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 under the Care Act 2014.

This inspection took place on 12 February 2016 and was announced. The provider was given 48 hours notice because the location provides a domiciliary care service; we needed to be sure that someone would be available and that we could access the information we needed. The inspection was undertaken by one inspector.

Before the inspection we checked the information that we held about the service and the service provider. As part of this inspection we spoke with three people who used the service, relatives of three people who used the service, three staff members, the office manager and the registered manager.

We reviewed care records relating to three people who used the service and other documents central to people's health and well-being. These included staff training records, medication records and quality audits.

## Is the service safe?

### Our findings

People told us that they felt the care and support they received was safe and they felt secure in the knowledge that their safety was paramount. One person said, "I am very contented, I have used the services of this agency for some time now. There is a team of about six staff who support me, they are all very kind, caring and know what to do." People's relatives told us that care was planned and delivered in a way that promoted people's safety. One relative told us, "They provide us with a very safe service. We have a regular staff team so we always know who is coming to provide the care."

The registered manager had commissioned an independent satisfaction survey which had been undertaken in October 2015. The results showed that all people who used the service had reported that the service provided made them feel safe and secure in their own homes and that care staff protected them from any form of harm, abuse or discrimination.

Staff were knowledgeable in recognising signs of potential abuse and understood the relevant reporting procedures. All staff we spoke with said that they had confidence that the registered manager would take the necessary action to deal with any safeguarding concerns that were raised with them. One staff member told us that the local authority safeguarding team contact details were clearly displayed in the agency office should they need to refer to them. Staff were required to complete safeguarding training as part of their induction and undertook regular refresher training to help ensure their knowledge remained current. Team meeting minutes showed that safeguarding matters and reporting procedures were regularly discussed.

Assessments were undertaken to identify any risks to people who received a service and to the staff who supported them. These included environmental risks and risks that related to the health and support needs of the person. Risk assessments included information about action to be taken to mitigate risks as much as possible. For example, when supporting a person to move safely around their home.

Safe and effective recruitment practices were followed which helped ensure that staff were of good character, physically and mentally fit for the role and sufficiently experienced, skilled and qualified to meet the needs of people who used the service. Relatives told us that the staff employed to work with the agency were of a high calibre. One relative said, "The staff are of a very good calibre indeed, there isn't one that I wouldn't recommend to my friends." Another relative said, "I feel it is not easy for care agencies to get good staff and we feel very lucky to have had good staff come to us consistently."

There were sufficient numbers of staff available to meet people's individual support and care needs at all times, which included during the night and at weekends. People and their relatives told us that staff members were punctual and that the manager often covered care calls when staff were sick and alternative cover could not be found. There was a policy in place where staff contacted the office or out of hour's service if they were running over 15 minutes late. The office, in turn contacted the next person to advise them of the delay and assure them that someone would attend so that no-one was left worrying. There was a comprehensive tracking system in place which monitored people's calls and the registered manager told us that where sickness or high volumes of traffic caused disruption they, or the service co-ordinator covered the

calls themselves. The registered manager told us, "We have never left a vulnerable person without a call." A staff member told us "I think there are enough staff at the moment but it is a fine line. We are actively trying to recruit the right people to join the agency."

People and their relatives told us that they were happy with the support that people received with their medicines. A person who used the service said, "They provide my medicines from a special pack from the pharmacy and are also giving me eye drops. It is always done properly and signed for as they should be." There were up to date policies and procedures available to support staff and to help ensure that medicines were managed in accordance with current regulations and guidance. Staff members were able to describe to us how they supported people with their medicines. Records and discussions with staff showed us that they had received training in the administration of medicines and had their competency assessed.

## Is the service effective?

### Our findings

People and their relatives told us that staff were very well trained and were very competent in their work. A person who used the service told us, "I can thoroughly recommend them, the staff are a very good calibre and they all understand what is needed from them." A relative told us, "We are very content with the care, [Person] is better now than they were a year ago. That is down to having good care from regular experienced staff that [Person] knows and trusts, it makes a huge difference."

People were supported by staff who had the knowledge and skills required to meet their needs. All staff that we spoke with said that they were fully supported by the registered manager. One staff member told us, "We can have support and supervision whenever we want, we only have to ask. We have 1:1 supervision with a line manager, regular team meetings and we can drop into the office at any time for a chat or support." All staff we spoke with told us the management team were supportive and that there was always someone to call for advice or guidance. Records and discussion with staff members confirmed that they had received training in areas that included safe administration of medicines, moving and handling, first aid, health and safety, dementia awareness, food hygiene and fire safety.

All new care staff completed an induction programme at the start of their employment that followed nationally recognised standards. The induction process included shadowing established staff before working with people independently. The registered manager told us, "New staff shadow established and experienced staff for as long as needed until the new staff member feels confident. Some take longer than others but it is important that they are confident and competent." Newly recruited staff members were allocated a 'buddy' to access additional support as needed. Training was provided during induction and then on an on-going basis.

The Mental Capacity Act (2005) provides a legal framework for making particular decisions on behalf of people who may lack 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. Where 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. We checked whether the service was working in line with the principles of the MCA. Some of the people who received support from the agency had limited capacity to make their own decisions about their care and support. In this instance people's relatives supported them to make sure their care was provided in accordance with their wishes. One relative told us that staff always involved them in discussions about the person's care and took any suggestions they made very seriously.

Some people who used the service told us that staff prepared and cooked meals for them. One person said, "They cook meals for me and very nice they are too." The registered manager told us of examples where care staff ate lunch with people which encouraged them to eat their own food. It was policy to always leave a drink accessible for people when care staff completed and left a call. The registered manager told us, "We do what we can, our staff are aware of the need to encourage people with fluid intake."

Staff supported people to access healthcare appointments as needed and liaised with health and social



care professionals involved in their care if their health or support needs changed. The registered manager told us of an instance where a care staff member had noted that a person was in pain and had reported this to the office. The concern had then been escalated to the person's relative and GP. Relatives told us that staff shared any concerns about people's health needs with them and worked as a team to provide the support that people needed. People who used the service told us that staff accompanied them to attend health appointments where possible.

## Is the service caring?

### Our findings

Everyone we spoke with told us that people were treated with kindness and compassion by the staff who supported them and that positive and caring relationships had been developed. A person who used the service said, "The girls are always so cheerful and they always do their best to do everything I need them to do and more." A relative told us, "They give such a good service, the girls are always punctual and they are so caring. I don't think they could care for [Relative] any better than they do." Another relative said, "The staff are all very caring, we have a good relationship with them all and they always say they like coming to care for [Person] because they like them so much too. They do everything we ask them to do."

Everyone we spoke with confirmed that people had regular staff to provide their care and that staff were respectful of people's privacy and maintained their dignity as much as possible. A person who used the service told us that they had been a touch apprehensive initially but the staff had treated them with such respect and considered their dignity during all aspects of personal care delivery so that they were now really at ease with the whole process. Another person said, "Over the years I have surrendered most of my dignity in various care settings but this is different, we respect each other. There is no nonsense, we treat each other with respect." A relative told us, "It is so helpful to have a team of care staff who know [Relative] and understand their needs so well."

A staff member said, "Each person is treated as an individual and basic common sense prevails when considering someone's dignity. Such as closing bedroom curtains when providing personal care."

When new staff started to work at the agency they were introduced to the people who used the service and then shadowed established and experienced staff members. Staff told us that this would be for as long as was needed for them to become confident and competent in the role. The new staff members practice was assessed by a senior staff member before they were able to provide people's care and support on their own.

The results of the independent satisfaction survey undertaken in October 2015 showed that respondents had rated the agency as 100% in respect of the caring attitude of the staff and the management team.

Care plans reflected the fact people who used the service, and their relatives where appropriate, had been involved in developing the plan of support provided. Confidentiality was well maintained at the service which meant that information held about people's health, support needs and medical histories was kept secure.

## Is the service responsive?

### Our findings

People told us that they had been involved with developing their initial plans of care and then in subsequent reviews which ensured the plans continued to meet their needs. A person said, "I am involved in planning my care; I have a care plan document which the staff abide by. It is reviewed every so often, I believe it is quarterly. I have to sign to indicate my consent to the care plan." A relative told us, "They do involve me when they review [Person's] care plan, they involve me and listen to any suggestions I make."

Care plans were kept under regular three monthly reviews and the registered manager reported that additional reviews would take place if the need was identified. For example, if a care staff member reported that a person's care was taking more time than had been allocated due to their escalating needs. In this instance the registered manager told us that they would undertake the care visit with the person to assess how their needs had changed.

Staff members were knowledgeable about the people they supported. They were aware of people's preferences and interests, as well as their health and support needs, which enabled them to provide a personalised and responsive service. The registered manager told us that they tried to ensure a good 'match' between people who used the service and staff that supported them. For example, a person who enjoyed singing in a choir was matched with a like-minded staff member also involved in group singing activities.

Staff members supported people to engage in recreational activities according to their likes and preferences. For example, a person was supported to go to regular lunches connected with their past work environment to enable them to re-connect with old friends. Another person had previously enjoyed trips to the theatre with their partner, the registered manager and a staff member had made plans to support the person to attend a West End theatre production. A further person took pleasure from shopping trips and visiting National Trust houses, staff supported them to do this.

The provider's complaints process was included in information given to people when they started to use the service. The registered manager kept clear records of any concerns raised with details of any investigations undertaken and the response to the complainant. The registered manager told us, "We encourage complaints because that is how we can improve."

People who used the service and their relatives said that they felt that they were listened to and that they would be comfortable to talk with the management team if they had any concerns. One person said, "I have never thought about how to make a complaint. It has never arisen in my case. If I needed to I would contact the manager and I am extremely confident that they would sort anything out for me." A relative told us, "If I had anything to complain about the first point of contact would be [Manager]. They have always told me to get in touch if I have any concerns about anything." Another relative said, "I am not altogether sure of the formal complaints process but I know I could go to [Manager] and I am totally confident that they would do something if I was concerned."

We also saw records of compliments received praising the staff team for their kindness and excellent care.

## Is the service well-led?

### Our findings

People and their relatives told us they had confidence in the management team and in the way the agency was managed. One person told us, "The management are always available, night or day, they are very good. It is all working very satisfactorily and I would hate for anything to happen to disrupt it." Another person told us, "I think the agency is well managed, I have no complaints with the service I get. I can only speak for myself but I am more than satisfied." A relative told us, "It really is an exceptionally good service. We have had a lot of different care companies over the years and none have been as professional and caring as Omer Care."

There was a positive ethos evident at Omer Care that was open and inclusive. All staff members we spoke with praised the management team for the advice and guidance that was available to them at any time. Staff also praised the management team for their caring and supportive ethos. One staff member told us of support they had received on a personal level. They told us that this had made them feel valued and helped them as an individual as well as a member of the staff team.

A member of the management team told us, "The office is an open door and the staff can approach us at any time for a 1:1 chat about anything that is worrying them whether work related or personal." The registered manager stressed the importance of providing the staff with the support they needed so that they, in turn, could provide the care and support for the people who used the service.

The registered manager facilitated regular meetings with the staff team to discuss changes in legislation, practice issues and any matters arising with people's care. Staff told us that these meetings were positive because it meant there was a collaborative approach to providing people's care and support.

The management team monitored the quality of the service provided by visiting people who received care to assess the standard of care provided and by talking with people and their relatives to obtain their feedback. Relatives told us that the registered manager was always available and very responsive to them. A relative said, "[Manager] comes to see us, sometimes to provide the care if a staff member is not well but sometimes just to check if we are satisfied with the service we are getting."

The registered manager had commissioned an independent satisfaction survey which had been undertaken in October 2015. They told us that they intended to make this an annual event because it gave them the reassurance that the service they provided was safe and that people were happy with the care and support they received. There was a clear indication within the survey results that people felt Omer Care provided a, "Good quality service and promoted person centred care that is open and honest."

The management team had developed a quarterly newsletter in order to share interesting and useful news with the people who used the service and the staff team. The newsletter included information about such things as events taking place in the locality, the training that had been attended by staff members, book recommendations and care staff award nominations and achievements.