

Best Care JS Limited

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## Inspection report

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## Ratings

Overall rating for this service	Inspected but not rated
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Is the service safe?	Inspected but not rated
Is the service effective?	Inspected but not rated
Is the service well-led?	Inspected but not rated

# Summary of findings

## Overall summary

### About the service

Best Care JS Limited is a domiciliary care agency providing support with personal care to people living in their own homes. Four people were using the service at the time of inspection.

### People's experience of using this service and what we found

Risk assessments were in place, which included information about how to support people safely. Robust checks were carried out on prospective staff to help ensure only suitable people were employed to work at the service. There were enough staff to meet people's needs and people told us staff were punctual.

Assessments were carried out of people's needs prior to the provision of care to determine what they wanted support with. People and their relatives were involved in these assessments.

Effective systems were in place to monitor and improve the quality and safety of support provided to people.

For more details, please see the full report which is on the Care Quality Commission (CQC) website at [www.cqc.org.uk](http://www.cqc.org.uk)

### Rating at last inspection

The last rating for this service was requires improvement (published 20 March 2020) and there were multiple 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 undertook this inspection to check whether the provider had met the requirements in relation to Regulation 9 (Person-centred care), Regulation 12 (Safe care and treatment), Regulation 17 (Good governance) and Regulation 19 (Fit and proper persons) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. The overall rating for the service has not changed following this targeted inspection and remains requires improvement.

Targeted inspections do not look at an entire key question, only the part of the key question we are specifically concerned about. Targeted inspections do not change the rating from the previous inspection. This is because they do not assess all areas of a key question.

### Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection 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?

At our last inspection we rated this key question required improvement. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about.

**Inspected but not rated**

### Is the service effective?

At our last inspection we rated this key question required improvement. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about.

**Inspected but not rated**

### Is the service well-led?

At our last inspection we rated this key question required improvement. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about.

**Inspected but not rated**

# Best Care JS Limited

## Detailed findings

### Background to this inspection

This was a targeted inspection to check whether the provider had met the requirements in relation to Regulation 9 (Person-centred care), Regulation 12 (Safe care and treatment), Regulation 17 (Good governance) and Regulation 19 (Fit and proper persons) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

#### Inspection team

The inspection was carried out by one inspector.

#### 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 CQC. 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 the service 48 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the provider or registered manager would be in the office to support the inspection.

#### What we did before the inspection

We reviewed the information we already held about this service. This included details of its registration, previous inspection reports and any notifications of serious incidents the provider had sent us. We contacted the host local authority to seek their views about 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. We used all of this information to plan our inspection.

#### During the inspection

We spoke with the registered manager and reviewed a variety of records relating to the management of the

service. We reviewed a range of records which included four people's care records. We looked at six staff files in relation to recruitment and staff supervision.

After the inspection

We spoke with a relative of one person who used the service about their experience of the care provided.

# 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. We have not changed the rating of this key question, as we have only looked at the part of the key question we had specific concerns about.

The purpose of this inspection was to check if the provider had met the requirements we previously served. We will assess all of the key question at the next comprehensive inspection of the service.

### Assessing risk, safety monitoring and management

At our last inspection the provider had failed to robustly assess the risks relating to the health safety and welfare of people. This was a breach of regulation 12 (Safe Care and Treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 12.

- Records showed risk assessments were in place for all of the people using the service. Since the previous inspection the registered manager had put measures in place to ensure that everyone had an up to date risk assessment. They told us, "We review (risk assessment) after six months, but if there are any changes we would review then."
- Assessments included information about the risks people faced and how to mitigate risks. They covered risks associated with moving and handling, falls, medicines and the physical environment. They had all been subject to review within the past six months.
- People told us they felt safe using the service. A relative said, "Yes, they (staff) do understand the risks (to people)." This meant steps had been taken to help keep people safe.

### Staffing and recruitment

At our last inspection the provider had failed to carry out robust pre-employment checks on staff to check their suitability. This was a breach of regulation 19 (Fit and proper persons employed) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 19.

- The provider had taken steps to help ensure suitable staff were employed. The registered manager had carried out the required checks on staff before they commenced working at the service.
- These checks included criminal records checks, proof of identity, proof of the right to work in the UK and employment references.

- Staff punctuality was of a good standard and people confirmed they were happy with this. A relative said, "Very punctual, it's excellent, we don't have any complaints." They also told us staff always stayed for the full amount of time allocated for each visit.

# Is the service effective?

## Our findings

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

At the last inspection this key question was rated as requires improvement. We have not changed the rating of this key question, as we have only looked at the part of the key question we have specific concerns about.

The purpose of this inspection was to check if the provider had met the requirements we previously served. We will assess all of the key question at the next comprehensive inspection of the service.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

At our last inspection the provider had failed to carry out assessments of people's needs prior to the provision of care. This was a breach of regulation 9 (Person-centred care) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 9.

- The registered manager had carried out a pre-care assessment for all people who had started using the service since the last inspection. They told us, "We look at what they want us to do for them and how we can supply their needs." A relative told us, "Yes, [Registered manager] did do an assessment. We met in [Name of person's] property."
- Assessments had either been completed either in person or by telephone if there were concerns related to the transmission of COVID-19 through meeting face to face. Assessments covered ethnicity, language, religion, details of the person's next of kin and GP, their medical history, mental state, sight, hearing, mouth care, toileting, moving and handling, falls, hobbies, interests, likes and dislikes.



# 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. We have not changed the rating of this key question, as we have only looked at the part of the key question we have specific concerns about.

The purpose of this inspection was to check if the provider had met the requirements we previously served. We will assess all of the key question at the next comprehensive inspection of the service.

### Continuous learning and improving care

At our last inspection the provider had failed to implement effective systems for monitoring the quality and safety of care and support provided. This was a breach of regulation 17 (Good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 17.

- Systems were in place for monitoring the quality and safety of the support provided. For example, risk assessments were subject to six-monthly reviews to ensure they remained up to date and reflected any changes to people's needs. Staff recruitment records had been audited to ensure all required documentation was in place. Systems had been established to ensure pre-care assessments were carried out to determine people's needs.
- The registered manager was in regular contact with relatives of people using the service. A relative said, "I've met (registered manager) a few times and they normally call to find our views and to ask if we have any complaints. I would say they have been very proactive."