

Gemcare South West Limited

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Inspection report

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Ratings

Overall rating for this service

Good ●

Is the service responsive?

Good ●

Summary of findings

Overall summary

Gemcare South West Limited provides domiciliary care services to older and younger adults within Plymouth. On the days of the inspection the service was providing personal care to 400 people, including those with physical disabilities, sensory impairments, mental health needs, and people living with dementia. The service also provided palliative care to people who were at the end of life.

We carried out an unannounced comprehensive inspection of this service on 02 and 03 February 2016. A breach of a legal requirement was found so we issued a requirement notice. This was because the provider had not ensured people's care plans were effectively reviewed, meet their needs and preferences and were reflective of the care being delivered. We also asked the provider to make improvements to how people's complaints were recorded. After the comprehensive inspection the provider submitted an action plan to tell us what they would do to meet the legal requirement in relation to the breach.

We undertook this focused inspection on 21 July 2017, 01 and 02 August 2017 to check that they had followed their plan and to confirm that they now met legal requirements. 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 Gemcare South West Limited on our website at www.cqc.org.uk

The service had a registered manager. A registered manager is a person who has registered with the Care Quality Commission 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 had care plans in place which were reflective of their needs. People's care plans were reviewed with them to ensure they reflected their needs and preferences. People told us they felt that their care plans were effective and provided good, current information about their care needs and that staff referred to them when they visited to provide care and support.

People's complaints were effectively recorded. Records detailed whether people had been satisfied with how their complaint had been resolved. People's complaints were listened to and used to help facilitate ongoing change. People told us they knew who to complain to and that when they contacted the agency, they felt that they were listened to and that proactive action was taken to resolve their unhappiness.

This meant that the provider had met the legal requirement notice as issued at the last inspection.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service responsive?

Good ●

We found that action had been taken to improve people's care plans and the recording of people's complaints.

People had care plans in place which were reflective of their needs, wishes and preferences.

People's complaints were recorded effectively and used to improve the quality of the service.

We have improved the rating for responsive from requires improvement to good.

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Detailed findings

Background to this inspection

We undertook an announced focused inspection of Gemcare South West on 21 July 2017. This inspection was carried out to check that improvements to meet legal requirements planned by the provider after our comprehensive inspection on 02 and 03 February 2016 had been made. The team inspected the service against one of the five questions we ask about services: is the service responsive. This is because the service was not meeting a legal requirement relating to this area.

The inspection team consisted of one 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 care service.

We gave the service 48 hours' notice of the inspection to ensure the registered manager and/or provider would be in the office and not out supporting people.

Before our inspection we reviewed the information we held about the service. We reviewed notifications of incidents the provider had sent us since the last inspection. A notification is information about important events, which the service is required to send us by law. We also contacted Healthwatch Plymouth, the local authority service improvement team and commissioners responsible for purchasing services on behalf of people.

During our inspection we spoke with 20 people who used the service and two relatives. We spoke with two receptionists, the deputy manager, the registered manager and provider.

We looked at five records which related to how people's individual care needs were met. We also looked at the system used to record and manage people's complaints.

Is the service responsive?

Our findings

At our last inspection on 02 and 03 July 2016 we asked the provider to make sure people's care plans were effectively reviewed, to help ensure they were reflective of their needs, wishes and preferences. We also asked the provider to make improvements to how people's complaints were recorded. During this inspection we looked to see if improvements had been made and found that action had been taken.

People knew about their care plans and described how care staff referred to them and made records in them when they visited. People had been involved in the review of their care plans helping to ensure they reflected how they wanted their care and support needs to be met. The provider told us people's care plans were reviewed annually, or as required. If changes were necessary people's care plans were updated and a new care plan was issued to the person, so as staff had the most up to date information. For example, one person told us how their care plan had been recently updated because they wanted a wash rather than a shower or a bath. Another person explained how their care plan had been updated to reflect that they had been prescribed oxygen.

Since our last inspection people's care plans had been re-designed to help ensure they provided staff with clear and concise information to help enable them to correctly meet people's needs. When people required support with their mobility, personal care or nutrition, care plans detailed step by step actions required of staff. When people required medical creams to be applied to their skin the information about the creams was detailed to support staff to provide the right care. Consideration had also been given to obtaining information about people's personal history, so as to support staff to meaningful conversations when they visited.

When a person first enquired about using the service, a pre-assessment of their care needs was carried out. This was to ensure the service could meet their individual needs. The provider also received referrals directly from the local authority. The provider ensured as much information was obtained before deciding whether they could meet the person's needs, by asking additional questions and by working in partnership with the person's social worker. The provider's pre-assessment process was also an opportunity to discuss visit times. Making sure people were informed of their allocated time, and ensuring the chosen times were realistic to be able to meet their health and social care needs.

People received individualised care telling us, "They are kind, respectful and all really nice people", "I hear him having a giggle with them when he's in the shower and it does my heart good. They are so professional but also chatty and funny" and "Gemcare is the 5th company I've been with and they are without doubt by far the best".

People told us how staff, were responsive to their changing care needs commenting, "I really want to mention [a member of care staff]. He is so talented at his job. He spotted when something wasn't quite right with me and got in touch with the surgery" and "He has extremely good judgement. He monitors my condition".

People told us they knew who to complain to, and people who had rung the office said the phone was usually answered quickly by someone who listened and took action. Overall, people told us they felt the agency was doing a very good job. Some people told us they had complained recently about early bedtime visits, staff who occasionally did not stay for the full allotted time, and not being able to have exclusively male carers. However, they explained action was being taken to address their concerns, but at the same time, people praised the dedication of the carers and recognised that 'the office' tried to accommodate their wishes.

The provider had a complaints policy which they followed to make sure people's complaints were investigated robustly. The provider also told us people were welcome to visit the office for a coffee and to speak with staff should they have any concerns.

People's complaints were positively received and were used to develop and drive improvements to the service. For example, some people had raised concerns with the provider that when they had complained, communication within the office had not always been effective or timely. So, action had been taken to review which staff members handled complaints so people's complaints were now managed overall by the deputy manager to help with efficiency and continuity. Other complaints received by the provider had been in respect of when changes had been made to people's care staff rota, but people had not been told. A new call log sheet had been designed to be used as a prompt for staff to make sure people were informed. This showed, complaints were taken seriously and the appropriate actions taken to ensure people received good care.