

Homecare Professionals (Essex) Limited

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Inspection report

Unit 6, Priory Works
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Tel: 01702467515

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18 March 2019

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05 June 2019

Ratings

Overall rating for this service

Requires Improvement 

Is the service safe?

Requires Improvement 

Is the service effective?

Good 

Is the service caring?

Good 

Is the service responsive?

Good 

Is the service well-led?

Requires Improvement 

Summary of findings

Overall summary

About the service: Homecare Professionals (Essex) Ltd is a domiciliary care service and is registered to provide personal care to older and younger people, people with physical, sensory and mental health needs and people with dementia in their own homes. At the time of the inspection, 40 people were using the service.

Some staff had been recruited and had started work without relevant checks being completed. The service needed to make improvements in regards recruitment practice, this being ensuring that appropriate checks were carried out and the service verified documentation with external agencies.

Systems were in place to audit the quality and delivery of care to people, however this needed to be improved.

People's experience of using this service:

People received a service which was personalised and met their needs. The care provided enabled them to remain as independent as possible and to live in their own homes.

People were cared for by a consistent team of staff who were skilled and competent in providing good quality care. Staff and the registered manager showed an interest in delivering personalised care based on people's likes, choices, wishes and preferences.

Support was planned and delivered in a structured way to ensure people's safety and wellbeing. Staff had access to up to date information about how to support people. Communication with health and social care professionals was effective in ensuring people received joined up care.

Why we inspected: This was a scheduled inspection based on the services previous rating.

Follow up: We will continue to monitor the service through the information we receive.

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

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 not always safe

Details are in our Safe findings below.

Requires Improvement ●

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 not well-led

Details are in our Well-Led findings below.

Requires Improvement ●

HomeCare Professionals (Essex) Limited

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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, 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 was carried out by one inspector.

Service and service type:

Homecare Professionals(Essex) Ltd is a domiciliary care service and is registered to provide personal care to older and younger people, people with physical, sensory and mental health needs and people with dementia in their own homes.

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:

We gave the registered manager 48 hours' notice of the inspection. This was because the service is a domiciliary care service and we needed to be sure that someone would be at the office to meet with us.

We inspected on the 18 March 2019. Activities included making telephone calls to people who used the

service and contacting staff and professionals via telephone and emails to obtain their feedback. We visited the office location on 18 March 2019 to see the registered manager and review care records and policies and procedures. We also met with two of the office staff.

What we did:

We reviewed information we had received about the service since their last inspection in April 2016 which gave us up to date information about how the service was being provided.

We spoke with seven people who used the service. We also spoke with five care staff and the registered manager.

We viewed a range of records including three people's care plans, their medicine charts and daily notes. We looked at three staff member's recruitment files and records relating to the management of the service and complaints and compliments that the service had received.

The registered manager sent us information we requested after the inspection and this included worked and planned rotas and staff training records.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm

Requires Improvement: Some aspects of the service were not always safe and there was limited assurance about safety. There was an increased risk that people could be harmed. Regulations may or may not have been met.

Staffing and recruitment

- The service had not carried out all the necessary checks on staff before commencing employment. Despite the manager informing us that they had completed all the necessary checks, we found this to not be the case. Robust checks were not undertaken on staff's right to work in the UK. Due to our concerns we shared the information we had collected with United Kingdom Visa and Immigration service, so they can carry out further investigations into the information provided.
- The provider did not follow their recruitment policy and safe recruitment practices. The provider's policy stated, "A minimum of two referees will be contacted, one of whom must be the applicant's current, or most recent, employer." We found two staff files did not have any employer references. References were not always verified by a company stamp or headed paper to confirm they were legitimate.
- We also asked the registered manager to change the current application form which only asked staff to provide a five-year work history as this did not concur with their recruitment policy, which stated full employment history.
- The manager assured us they would review and update staff files to make sure they had all appropriate recruitment checks in place to make sure people were supported by staff who were safe, skilled and of good character.

The above issues constituted a breach of regulation 19 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Systems and processes to safeguard people from the risk of abuse

- One person told us, "I have no concerns about the care or staff looking after me, I feel very safe in their hands."
- Conversations with staff showed us they had a good knowledge of how to keep people safe and protect them from any potential harm. Staff were able to indicate how people may be at risk of harm or abuse and how they would go about protecting them and ensuring their safety.
- Staff had received training in safeguarding people and understood their responsibilities to ensure that people were protected from harm.

Assessing risk, safety monitoring and management

- Support plans and risk assessments had been recently reviewed to document current knowledge of the

person, current risks and practical approaches to keep people safe when they made choices involving risk.

- There were robust systems in place to reduce the risk of people being harmed.
- Any potential risks to each person had been assessed and recorded and guidelines put in place so that the risks were minimised, with as little restriction as possible to the person's activities and independence.

Using medicines safely

- People told us all medication was safely, administered by staff.
- Medication administration records (MARS) had some unexplained gaps and it was not clear if medicines had been given. This was discussed with the manager and office staff and they were able to evidence where they had spoken to staff involved about the importance of completing (MARS) correctly.
- Staff involved in the administration of medication had received appropriate training and competency checks had been completed for them to safely support people with their medications.

Preventing and controlling infection

- Staff completed training in infection control and food hygiene to keep people safe from harm.
- One staff member told us, "The manager gives us, gloves and aprons, we are encouraged to use them when we are supporting people with personal care."

Learning lessons when things go wrong

- Incidents and accidents were recorded and reviewed by the registered manager to identify any areas where support could be improved to prevent re-occurrence. They told us of lessons they had learnt since the service began and how this learning had improved the service.

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

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

- The registered manager supported staff to provide care to people in line with best practice guidance and legislation.
- People's needs were assessed and regularly reviewed. This included the outcomes people hoped to achieve from their planned care and reablement. Some of people's protected characteristics under the Equalities Act 2010 were identified, such as age, disability, religion, and sex.

Staff support: induction, training, skills and experience

- People received effective care from staff who were supported to obtain the knowledge and skills they needed to provide continuous good care.
- Staff received on-going training in the essential elements of delivering care. The staff training files showed us that staff received reminders from the head office of training that was required or due.
- One staff told us, "I have received regular training and if I need refresher training all I have to do is speak to the manager."

Supporting people to eat and drink enough to maintain a balanced diet

- People informed us they were supported to have enough food and drink and were always given choice about what they liked to eat.
- One person informed us, "Staff always ask me what I want to eat and drink every visit and they make sure I am left with a meal of my choice."

Staff working with other agencies to provide consistent, effective, timely care

- Staff worked well with professionals to enhance and maintain people's independence and dignity.
- Staff followed the recommendations from professionals when people were discharged from hospital for reablement to help them regain their skills and confidence.

Supporting people to live healthier lives, access healthcare services and support

- Where people required health or social care services, staff made referrals and liaised with professionals to attend appointments and assessments of their care package.
- Records showed that referrals to health and social care were made in a timely way to enable people to maintain their health and independence.

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

- The Mental Capacity Act 2005 (MCA) provides a legal framework for making 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 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 within the principles of the MCA.
- We saw evidence that the service was working within the MCA. Assessments were undertaken, people's capacity recorded and consent to care arrangements and the sharing of information obtained.
- Where people did not have capacity, they were supported to have maximum choice and control of their lives. Details of their legal representatives were recorded if known.

Is the service caring?

Our findings

Caring – this means we looked for evidence 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; respecting equality and diversity

- People told us they received a good service from kind and caring staff. People told us that the staff were very positive and always seemed have their interests to heart.
- People also said they found most of the care staff to be respectful and care for them in a dignified way.

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

- Staff knew people well, their preferences for care and their personal histories. People and their relatives were aware of their support plans and had review meetings with the management team to identify any needs or wants they may have. As well as reviewing their overall well-being.

Respecting and promoting people's privacy, dignity and independence

- Staff treated people with dignity and respect and provided compassionate support in an individualised way.
- People's needs were recorded in a clear and sensitive way. People's likes, dislikes and preferences were respected and considered.
- People's confidentiality was respected. Guidance was in place to ensure staff knew about protecting people's information.

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs

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

Planning personalised care to meet people's needs, preferences, interests and give them choice and control

- People's care and support needs were well understood by staff. This was reflected in detailed support plans and individual risk assessments and in the attitude and care of people by staff.
- The registered manager showed us a new support plan that they were introducing. The registered manager told us that the new support plans were more robust and detailed and gave more of a true picture of people's needs.

Improving care quality in response to complaints or concerns

- The service had policies and procedures in place for receiving and dealing with complaints and concerns received. The information described what action the service would take to investigate and respond to complaints and concerns raised.
- Staff, people and relatives knew about the complaint's procedure. Staff told us that if anyone complained to them they would either try and deal with it or notify the registered manager. Complaints we reviewed confirmed this.

End of life care and support

- Staff told us about how they supported people and their families and worked closely with the palliative care team so that people could have the best care possible at the end of their life.

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.

Requires Improvement: The service was not consistently managed and well-led. Leaders and the culture they created was intended to promote high quality, person-centred care. However, the governance systems in place were not always effective.

Planning and promoting person-centred, high-quality care and support with openness; and how the provider understands and acts on their duty of candour responsibility

- The registered manager had the skills, knowledge and experience to lead the service. They were committed, caring and lead by example. One staff told us, "The manager will sometimes come and work with us, we find this valuable, as we are able to talk about our experiences when supporting people to find the best way to provide good quality care." Another member of staff informed us, "The manager will visit or call people on a regular basis to review their support needs and seek support from professionals where necessary."
- People's needs were assessed and monitored, and their rights protected. Staff were aware of the rules on protecting and keeping people's information safe.
- The registered manager understood their responsibility under the duty of candour to be open and honest and take responsibility when things go wrong.

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

- The registered manager and staff were passionate about the service they provided and were clear about their responsibilities to provide good quality and personalised care to people.
- The registered manager understood their requirements within the law to notify us of all incidents, accidents, deaths and safeguarding alerts.
- Audits and checks took place to monitor the quality of the service delivered. We discussed with the registered manager that audits of medicines, were not as robust as they should be to enable the service to effectively monitor the quality and delivery of the service. Audits had not identified the shortfalls that we found regarding recruitment. They informed us shortly after the inspection that a more thorough process had been put in place, with an arrangement being made to invite all of the staff who required the checks to provide necessary documentation.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- People benefited from a staff team that felt supported by the manager. Staff received positive feedback, encouragement and motivation from their management team.

- Staff attended team meetings and were involved in developing the service. Staff members described working for the service as positive, welcoming, diverse, caring and made them feel looked after and valued.
- Effective communication systems were in place to ensure that staff were kept up to date with any changes to people's care and support.

Continuous learning and improving care

- Lessons had been learnt during the development of the service and new practices put in place for continuity and quality of care delivery. The service had refined their call monitoring system. The registered manager and care co-ordinator now review call logs weekly to ensure that people were receiving care calls in a timely manner.

Working in partnership with others

- The service worked in partnership with others for the benefit of the people they supported.
- Referrals to professional health and social care services, follow up calls, updating care plans with advice and changes to people's care needs were undertaken to ensure they received the right level of care.