

Ultimate Care Services Limited

Ultimate Care Services Limited

Inspection report

Station House
Biddulph Road
Congleton
Cheshire
CW12 3JR

Tel: 01260295879

Date of inspection visit:
31 October 2016
01 November 2016

Date of publication:
30 November 2016

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

This inspection took place on 31 October and 1 November 2016 and was announced.

Ultimate Care Services Limited provides personal care for people in their own homes. At this inspection they were providing care and support for 145 people.

A registered manager was in post and present at this inspection. 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 were safe as staff had been trained and understood how to support people in a way that protected them from danger, harm and abuse. People had individual assessments of risk associated with their care and support. Staff members understood what to do to reduce the risk of harm to people.

The provider followed safe recruitment practices with staff before they started work to ensure they were safe to work with people. People received help with their medicines from staff who were trained to safely administer these.

People received care and support from staff that had the skills and knowledge to meet their needs. Staff members attended training that was relevant to the people they supported. Staff received support and guidance from a management team who they found approachable.

People had their rights upheld by staff members who knew the appropriate legislation which directed their roles.

People were involved in decisions about their care and had the information they needed in a way they understood. When people could not make decisions for themselves staff understood the steps they needed to follow to ensure people's rights were upheld.

People had access to healthcare when needed and staff responded to any changes in their needs promptly and consistently. People were supported to maintain a healthy diet which promoted well-being.

People's likes and dislikes were known by staff who supported them in a way which was personal to them. People had positive relationships with the staff members who supported them. People had their privacy and dignity respected and information personal to them was treated with confidence.

People were supported by a staff team who had shared values which were demonstrated in their interactions with people and their families.

People and staff members felt able to express their views and felt their opinions mattered. The provider engaged people and their families and encouraged feedback. The provider had systems in place to respond to any feedback they received.

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 were protected from the risks of abuse by a staff team who knew how to recognise the signs of abuse and knew what to do if they had concerns. People had individualised assessments of the risks associated with their care and staff knew what to do to minimise the risk of harm. People were supported to take their medicines by staff who were competent to do so.

Is the service effective?

Good 

The service was effective.

People were assisted by staff members who were trained and supported to undertake their role. Staff members received regular support from the management team. People had their rights protected by staff members who followed current guidance. People had access to healthcare to maintain wellbeing.

Is the service caring?

Good 

The service was caring.

People had positive and caring relationships with the staff who supported them. People had their privacy and dignity protected by staff. People were provided with information relating to their care in a way they understood. People's personal information was kept confidential by staff members supporting them.

Is the service responsive?

Good 

The service was responsive.

People were involved in the planning of their own care and support. The provider responded to people's changing needs. People were able to raise any concerns and were confident any issues would be addressed to their satisfaction.

Is the service well-led?

Good 

The service was well led.

The management team was accessible to those they supported. The provider and staff members had shared values regarding the support they provided. The provider had systems in place to monitor the quality of service provided and made changes when

needed.

Ultimate Care Services Limited

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 is meeting 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 for the service under the Care Act 2014.

This inspection took place on 31 October and 1 November 2016 and was announced.

The provider was given 48 hours' notice because the location provides a domiciliary care service and we needed to be sure that someone would be in.

The inspection team consisted of one inspector.

We reviewed information we held about the service. We looked at our own system to see if we had received any concerns or compliments about the provider. We analysed information on statutory notifications we had received from the provider. A statutory notification is information about important events which the provider is required to send us by law.

We asked the local authority and Healthwatch for any information they had which would aid our inspection. We included this information in our planning.

Before the inspection, the provider completed a Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. We used this information to assist in our planning of the inspection.

We spoke with the registered manager, eight people receiving support, four relatives and four staff members. We looked at the care and support plans for three people and records of quality checks, incidents

and accidents, medicines and details relating to staff recruitment.

Is the service safe?

Our findings

We looked at how people were kept safe from abuse. One person told us, "I have total trust in (staff). I know they would never do anything that I would disapprove off." Staff we spoke with had received training and knew how to recognise and respond to concerns of abuse and ill-treatment. One staff member said, "Anything that I am unhappy about is reported straightaway. We are here to look after people and if we fail to do so it needs investigating." Staff members knew what to do to report incidents of concern and where to report these to. Staff members told us they were provided with information on how to raise a concern which included contact details of the local authority. We saw the provider had made notifications to the local authority and to the police in order to keep people safe. When concerns had been raised all staff members knew what to do to ensure people remained safe.

People told us they felt safe when receiving care and support services from Ultimate Care Services. One person said, "I never have to worry when using the hoist. They (staff) know how to help me safely." The people and relatives we spoke with told us that a team leader would come out to their home and complete an environmental risk assessment. This was to ensure they were safe in their home. One person told us, "I had a rug which curled up on the corners. [Team leader's name] advised me about the risks of tripping and I got rid of it straightaway. I never liked it anyway." We saw people had individual assessments of risk associated with their care. These included mobility, skin integrity and risks from using domestic equipment. We saw action had been taken to reduce the possibility of harm. For example, the provider had identified the pathway to someone's house was slippery with overgrown hedges which restricted mobility. The person's wishes were considered and action was taken to make their access to their home safer. We saw that people were involved in their own assessments of risks about their own living environment. We saw that staff members had outlined the risks to one person who made the decision not to make any changes. We saw this person's wishes were respected and they had been provided with the information to make an informed decision.

Staff members knew how to report incidents or accidents and these were monitored by the team leaders. The provider had systems in place to identify any trends or patterns and took action when needed. For example, we saw staff members revised their assessment of risk after someone became unsteady and had fallen. They spoke with the person and made referrals to their GP and to occupational therapy. This was so the person received the right support and equipment they needed to move around safely.

People told us they received support from a consistent staff team who knew their individual needs and who arrived on time. One person said, "You can set your watch by them." People and their relatives told us they were always contacted if there were ever any difficulties in attending the arranged call. One person told us, "I was told that [staff member's name] had just phoned in sick and that the call would be late. However, [team leader's name] arrived 20 minutes later. I have full confidence someone would always come and support me."

The registered manager had processes in place to respond to people's changing needs and to ensure enough staff were available to assist them. For example, when someone required extra assistance at short

notice the registered manager provided additional support immediately. They then completed a re-assessment of need and the person's calls were increased. This ensured the person received the correct amount of support to keep them safe and well.

Staff members told us before they were allowed to start work checks were completed to ensure they were safe to work with people. References and checks with the Disclosure and Barring Service (DBS) were completed and once the provider was satisfied they could start work. The (DBS) helps employers make safer recruitment decisions and prevents unsuitable individuals from working with people. The provider had systems in place to address any unsafe behaviour displayed by staff members which included additional training or disciplinary action.

We looked at how people were supported with their medicines. People told us they were happy with the assistance they received. One person told us, "I can take my medicines myself. However, they (staff) just give me a little reminder to make sure I have taken them." Another person told us the team leader did an assessment to ensure they were safe to take their own medicines as directed. Staff members told us they received training and were assessed by a senior staff member as competent and safe to support people with their medicines. Regular checks were made by the registered manager or team leaders to ensure staff members followed safe practice. Should any errors occur staff members told us they would report them immediately and seek medical advice to ensure no ill effects were experienced by the person concerned.

Is the service effective?

Our findings

People and relatives told us they thought the staff members supporting them were trained and skilled to assist them. One person said, "They (staff) know all about my condition and how to help me." Staff members we spoke with told us they received regular training opportunities to increase their skills and knowledge. One staff member said, "I completed dementia training. It gave me an insight into how this affects people and how to support them. I was able to make a link between someone singing and how it brought them comfort at times they felt unsure. This allows me to be more responsive to their individual needs."

Staff members we spoke with told us they received an induction to their role which included training in health and safety and moving and handling. New staff members assisted existing staff members when supporting people. One person told us, "When there is a new staff member they always come out with one of the others. We get to know them and they get to know us and how we like things." One staff member told us they were never pressured by [provider's name] to do things they did not feel comfortable or confident to do. They said, "After we have been out a few times with someone else we meet with the team leader or registered manager and chat about how we got on. We can say if we need any more support or training before we go out and support people on our own."

People were assisted by staff members who felt supported to complete their role. One staff member said, "We have one-on-one meetings with either the team leader or the registered manager. We can talk about what has gone well and what we need further support with. I find these sessions very supportive but I can always just pop into the office or phone if I need any advice at any time."

Staff members had the skills to effectively communicate important information between themselves, the person they supported and anyone else involved in their care. One person told us, "I have a book where carers and nurses pass information about me. I have a read just to make sure it is accurate but there has never been a problem. It means I get the same support from everyone." One staff member told us they complete records regarding the support they have provided following each visit. This is to pass on relevant information about those they support to other staff members.

We looked at how people were offered choices and involved in decisions about their care. People told us they felt they were able to direct their care and make decisions which affected them. One person said, "I can let the staff know on a day to day basis what I want help with. They always ask me what I need and always check that they have done what I wanted." The registered manager told us people's capacity to make decisions was assessed only when required.

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular 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 particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible. People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA. Any such applications must be made to the Court of

Protection.

We checked whether the service was working within the principles of the MCA. The provider had trained and prepared staff in understanding the requirements of the MCA. At this inspection it had not been necessary for the provider to make any applications relating to the deprivation of liberty to the Court of Protection.

The registered manager and staff knew the actions to take if someone lacked the capacity to make decisions for themselves and how to act in the person's best interests. One relative told us, "[Person's name] does not have the ability to manage their money. [Staff member's name] goes out with them and supports them with shopping and their money. They can still buy what they want but the possibility of mistakes is reduced."

People told us staff asked them for their consent before they supported them. One person said, "They (staff) always ask me before they do anything. It is just a common courtesy they extend to me, for which I respect them." The registered manager understood their responsibilities under the MCA. They were clear on the process they would need to follow if they believed a person was being deprived of their liberty or if a decision had to be made in their best interests.

People told us they were supported to eat and drink enough to maintain well-being. One relative said, "[Family member's name] struggles with some aspects of shopping. [Staff member's name] will go through the cupboards with them and make sure they have the food they like and will eat." One staff member said, "We were a little worried about [person's name]. With their permission we spoke with their family. We found out this was part of their pattern and they sometimes just like a little food but often. We now ensure small snacks are available throughout the day for them to graze on. This has appeared to work well for them."

People had access to healthcare services, including their GP, the district nurses and occupational therapists and were supported to maintain good health. One relative told us, "I usually arrange the GP appointments but will always get a call from one of the carers if they are ever worried about anything. We all work together to ensure [family member's name] gets the support they need."

Is the service caring?

Our findings

People and relatives we spoke with described the staff members supporting them as "brilliant", "lovely", "kind" and "friendly". One person said, "Sometimes (staff) are the only people you get to see throughout the day. It is so lovely when they come in smiling and show they are pleased to see you." Another person told us, "[Staff member's name] is an absolute darling. There is nothing they wouldn't do for you." Another person told us they got to meet all new staff members when they first started working with Ultimate Care Services. They said, "It is good to know that if your regular (staff member) is not available the person covering them knows me and that we have already met." Staff we spoke with talked about those they supported with warmth, fondness and compassion. One staff member said, "You have to love your job and enjoy spending time with those you support to be able to work in care."

Staff members were able to tell us about the people they supported, what they did, who mattered in their lives and their personal preferences. People were supported by staff members who took an interest in them and who enjoyed the interactions they had together.

Staff took the time and opportunity to reassure people in times of upset and worry. One relative told us, "[Relative's name] could sometimes be very unsure about things and a little resistant to change. This causes them anxiety. Staff take the time to reassure and explain things to them. They will also keep going over the same thing time and time again until they get it. They never rush them but put them at ease."

People felt that staff communicated with them in a way they liked and adapted how they spoke with them depending on their needs. One person said "Sometimes they (staff) have to talk up a bit but we have a chuckle when I don't hear them properly." People told us they were provided with a pack of information containing all the details they needed relating to their care and support. One person told us, "Everything I need, including any phone numbers, is all in my folder in case I need them."

People told us they were involved in making decisions about their own care and support. Staff were aware of people's decisions and these were recorded so staff supported people in a consistent manner. People told us staff members would always ask them what they wanted help with when they first entered their home. People and relatives told us staff members never presumed what anyone needed but would always enquire what they could assist them with during their visit.

People told us their privacy and dignity was respected by staff providing support. One person said, "They (staff) always make sure I am wearing my dressing gown and they keep me covered when assisting with personal care. They talk to me and get me to do what I can for myself. They treat me with dignity." Another person told us their dignity was maintained by staff members supporting them to be independent. They said, "They (staff) make sure I have my adapted cutlery when eating. This helps me to do what I can and not to be reliant on someone for everything. It is small things like this that protect my dignity."

People we spoke with were confident the information concerning them was treated appropriately and not divulged without their permission. Staff members we spoke with told us information relating to the person is

confidential and should not be shared unless prior permission is gained.

Is the service responsive?

Our findings

People had care plans which were personal to them. People told us when Ultimate Care Services first started providing support for them the registered manager or a team leader went out and met with them and their family members. During this initial meeting their strengths were highlighted along with areas in which they needed support. One person said, "We went through everything I needed but also talked about me. I didn't feel that I was just a number to them. I felt what I could do also mattered along with what I needed help with." One staff member told us, "It is good to know the person and not just what their needs are. We would be spending long periods of time with them so knowing about them, what they used to do and what they like matters to us. It helps us provide holistic care where we support the whole person."

Staff members we spoke with could tell us about those they supported. This included personal preferences and things that mattered to them including hobbies and interests. One person told us, "I love knitting and bingo. They (staff) always ask me if I have won anything when they come to see me. It is always good humoured but it shows that they know me as a person."

People and their relatives told us that their care and support plans were regularly reviewed to account for any changes. One person said, "We go through everything with [team leader's name] every now and again. They make sure everything is alright and there have been no changes." We saw regular reviews had been completed which involved people and when required their family members.

When changes were identified we saw this was included in the care and support plans. This was to ensure people received consistent support to meet their needs. For example, staff members recognised that someone had experienced mental health difficulties and were at risk of self-neglect. Staff members engaged the person and their family and made changes to their care plan. They also involved healthcare professionals to provide the additional support for this person.

People felt comfortable about raising any concerns or complaints with staff, team leaders or the registered manager. One person said, "I once had a little grumble and spoke to [registered manager's name]. They did what they needed to do and I was happy with the outcome." Others we spoke with were confident that any concerns they had would be taken seriously by the provider. The registered manager had a system in place to receive, investigate and reply to any complaints received. People told us they were provided with details including who to contact should they have a complaint or a concern.

Is the service well-led?

Our findings

People told us they felt they were kept informed about any changes in the services they received from Ultimate Care Services. All those we spoke with knew the registered manager and told us they could contact them at any time they wanted. People and their relatives told us they found the team leaders approachable, efficient and responsive to any questions they had. Everyone we spoke with told us they had a positive experience when contacting the registered manager or the office and that any concerns or queries were answered promptly. People, relatives and staff members had access to an out of hours number they could ring at any time of emergency or for advice and guidance. All those we spoke with told us if they ever needed the out of hours service this was answered promptly and appropriate assistance provided.

People and staff told us they believed the management team at Ultimate Care Services was open and transparent. One relative told us, "We had a slight disagreement over something. The registered manager recognised the mistake, apologised and took steps to rectify it immediately." Staff members told us they received information either through text messages or at a team meeting regarding any improvements that needed to be made. One staff member said, "We were all reminded after someone raised a concern about the disposal of rubbish. We got a text message just to remind us what they (provider) expected us to do."

Staff members were aware of what was expected of them in terms of their role and the support they offered. Staff members had access to information in the form of policies and procedures which they could refer to when they needed. Staff members were aware of the provider's whistle blowing policy and were confident they would be supported if they needed to raise a concern. One staff member told us, "I am sure I would be supported if I ever needed to raise an issue." Another staff member told us they had previously voiced a concern. They told us the registered manager took immediate and appropriate action to resolve the situation.

We asked staff members what values they believed the provider demonstrated. One staff member told us, "It is all about being consistent and reliable. To go the extra mile by talking with people and seeing if they want any other help. To always treat people with respect and dignity and to work with them and their family altogether as one team." People and relatives we spoke with confirmed that they were supported by staff members who reflected these principles.

Staff members we spoke with told us they had regular opportunities to discuss aspects of their work as part of team meetings. One staff member said, "We can talk openly and honestly at team meetings. It is an opportunity to all get together and share experiences and what we can do better for people." Another staff member told us they could talk through any difficulties they were experiencing. For example, they told us they found motivating someone to be involved in their personal care was becoming difficult. As a team staff were able to offer advice and suggestions about how to engage the person more. The staff member told us, "I tried a different approach that was recommended by colleagues. We are not completely there yet but [person's name] is now doing more for themselves and their independence has increased."

Staff members were kept informed about changes or updates from the provider by letters or memos sent

out with their work rotas along with text message updates. Staff members told us they also received a regular "thank you" or praise from the registered manager. One staff member told us they recently received a thank you card and a gift voucher for helping out. They said, "It felt so nice just to get a little thank you. It means so much just to know you are appreciated."

People and their relatives were encouraged to feedback on the service they received by either completing one of the regular questionnaires sent out or through the review process. We had sight of the results from last year's satisfaction survey. We saw the registered manager had gone through the results of the survey and made changes where needed. For example a couple of people had requested different call times. We saw that this had been completed and people told us they were happy with the time of day that they received support.

At this inspection there was a registered manager in post. The registered manager understood the requirements of their registration with the Care Quality Commission. The provider had appropriately submitted notifications to the Care Quality Commission. The provider is legally obliged to send us notifications of incidents, events or changes involving the service within a required timescale.

The registered manager maintained their personal and professional development by attending regular training and commissioner events. Any learning or changes to practice were cascaded to staff members through regular team meetings or one to one sessions.

The provider had systems in place to monitor the quality of service provision. The registered manager told us they undertook "spot checks". This was where they attended calls along with the care staff. It was during these visits that they assessed the care being provided and made recommendations to the care staff for change if needed. One staff member told us, "I received this feedback following a spot check. This included guidance on how to do something differently. If you don't get told how to do things better how do you know when to change." In addition to "spot checks" the provider assessed information from incident and accidents and feedback from people and staff which they used to drive improvements.