

Sheena Miles Care Services Ltd

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Inspection report

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10 December 2021

12 January 2022

19 January 2022

02 February 2022

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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

Sheena Miles Care Services Ltd is a new service registered to provide personal care to people living in their own homes in County Durham. At the time of our inspection there were 79 people using the service.

Not everyone using Sheena Miles Care Services Ltd receives a regulated activity; CQC only inspects the service being received by people provided with 'personal care.' This is help with tasks related to personal hygiene and eating. Where they do, we also consider any wider social care provided.

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

The registered manager had identified a range of improvements were needed and had been working hard to address these, but at times these had not been successful. Staff had been employed to write support plans but had not completed this task in line with expected practice, the registered manager had taken proactive steps to rectify this issue.

There were enough staff on duty, but when setting up the service they had been very stretched, as care packages had been dispersed across the county. The registered manager regularly had to provide personal care, which meant they had limited time to undertake management tasks. The registered manager had acted to address these issues.

Due to demands on the registered manager's time, they had not been able to regularly complete audits, seek people's views about the service, ensure records were being maintained appropriately and care records were completed. They recognised this deficit and had created an action plan to rectify these issues. They provided evidence of the positive changes being made.

People had mixed views about the service. Some people found they did not always get consistent care workers and staff who understood their support needs. The organisation of staffing had not always been efficient. The registered manager was making improvements to the system they used to organise rotas and monitor calls.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

People's care needs were assessed by social workers who provided this information to the registered manager. Support plans and risk assessments were drawn up from these assessments, but at times needed to be more detailed. When necessary, external professionals were involved in individual people's care.

Staff took steps to safeguard people and promote their human rights. Some people felt complaints were not dealt with in a satisfactory manner. The registered manager confirmed they took all concerns seriously and

would ensure the way these were responded to improved.

Appropriate checks were completed prior to staff being employed to work at the service. Medicines were administered safely. Staff adhered to COVID regulations and procedures.

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

Rating at last inspection

This service was registered with us on 17 September 2020 and this is the first inspection.

Why we inspected

This was a planned inspection as the service had not previously been rated.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

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 not always responsive.

Details are in our responsive findings below.

Good ●

Is the service well-led?

The service was not always well-led.

Details are in our well-led findings below.

Requires Improvement ●

Sheena Miles Care Services Ltd

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. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Care Act 2014.

Inspection team

The inspection team was made up of 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 Care Quality Commission. This means the registered manager and the registered provider are legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection

This inspection was announced. We gave a short period of notice of the inspection because we needed to ensure the registered manager was available and to contact people to gather their feedback.

Inspection activity started on 10 December 2021 and ended on 2 February 2022. One inspector visited the office location on 10 December 2021 and 19 January 2022.

What we did before the inspection

We reviewed information we had received about the service. We also sought feedback from partner agencies and healthcare professionals. These included the local authority's contracts and commissioning services.

We used all this information to plan our inspection.

The provider was not asked to complete a Provider Information Return (PIR) prior to this inspection. A PIR is information providers send us to give some key information about the service, what the service does well and improvements they plan to make.

During the inspection

We spoke with 12 people using the service and eight relatives. We spoke with registered manager, deputy manager and a member of support staff. We also received feedback from 14 of the care staff.

We looked at four people's care records and three staff recruitment files. A variety of records relating to the management of the service, including audits and action plans were reviewed.

Is the service safe?

Our findings

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

This is the first inspection for this newly registered service. This key question has been rated requires improvement. This meant some aspects of the service had not always been safe. Measures were being put in place to reduce any risk that people could be harmed.

Learning lessons when things go wrong

- The service was continually seeking to improve and learn when things went wrong.
- The service was in the process of building up the number of clients they supported, which had led to staff needing to travel over 45 minutes between calls. The registered manager had identified this issue and was in the process of ensuring staff delivered the care packages in the same area, so they only had to travel several minutes between calls.
- As the registered manager and deputy manager often needed to cover calls, they had struggled to monitor arrival times of other staff and contact people if staff were running late. The registered manager was in the process of improving the monitoring system for calls, to improve call timings and communication with people who used the service.
- The registered manager had implemented incident monitoring records which were used to understand themes and reasons for the events. The registered manager constantly reviewed the operation of the service and actively made changes as and when these were needed.

Staffing and recruitment

- There were enough staff to safely care for people, however, more staff were needed to ensure the smooth running of the service.
- The registered manager was in the process of replacing care coordinators and administrators who had left and expected these resources would provide more office cover. They were also recruiting additional care staff and expected to reduce the amount of personal care they themselves delivered, which would give them more time to oversee and manage the service.
- The provider operated systems that ensured suitable staff were employed.

Assessing risk, safety monitoring and management; Systems and processes to safeguard people from the risk of abuse; Using medicines safely

- Staff generally understood where people required support to reduce the risk of avoidable harm, and risk assessments were in place. At times the risk assessments needed more detail to assist staff readily identify how to safely and effectively mitigate risks. The registered manager recognised improvements were needed and was proactively working to ensure the risk assessments clearly set out what measures needed to be put in place.
- The provider had safeguarding systems in place. Staff spoken with had training and a good understanding of what to do to make sure people were protected from harm or abuse.
- Medicines were appropriately safely managed. Staff received appropriate training and protocols were in place for administering medicines.

Preventing and controlling infection

- Staff had received infection control training and said they had plenty of personal protective equipment such as gloves and aprons.

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.

This is the first inspection for this newly registered service. This key question has been rated good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Ensuring consent to care and treatment in line with law and guidance; Assessing people's needs and choices; delivering care in line with standards, guidance and the law; Staff working with other agencies to provide consistent, effective, timely care; supporting people to live healthier lives, access healthcare services and support

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. When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty. We checked whether the service was working within the principles of the MCA and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- At the time of the inspection nobody using the service was subject to restrictions of their liberty under the Court of Protection, in line with MCA legislation.
- People told us they were involved in decisions about their care.
- People's care needs were assessed before they started to use the service. Social workers supplied the registered manager with their assessments and these were used as the basis for the care records
- People's records included contact details for GPs and immediate family members, and information about individuals' healthcare conditions. This helped staff recognise any deterioration in health so they could contact people's relatives and health and social care professionals.

Staff support: induction, training, skills and experience

- Staff had the skills and knowledge to carry out their role effectively. Staff had completed training in relevant areas to ensure they could carry out their role safely and competently. The service was registered to provide support for children, and staff had training in this area.
- Most people told us they were happy with the support they received and felt staff were competent. One person told us, "Staff do a good job." A relative said, "The regular staff who come are well trained and one staff member always goes over and above when they support us." Another person said, "My son had to have a word as some of the staff just sat around for the 15 minutes and would not even make a cup of tea. These

were changed and now the staff who come are good."

- The registered manager had decided to provide additional customer care training following feedback from people and relatives about not being personable and approachable.
- Staff supervisions were being completed for all staff. Due to time constraints the registered manager had struggled to get these done but had prioritised them in recent weeks.

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

- Staff supported people with eating and drinking where they had needs in this area. One person told us, "I'm happy with the care overall, especially the cooking. I get the food I like."

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.

This is the first inspection for this newly registered service. This key question has been rated good. This meant 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; supporting people to express their views and be involved in making decisions about their care

- People spoke positively about the service and the good quality of care provided. People in general found they were supported by a kind and caring staff team. One person said, "The staff are always lovely and I look forward to them coming."
- People told us staff supported and encouraged them to maintain their independence, which was important to them. People told us they valued the service as it enhanced their life. One person said, "I feel so much better and more able now because of the help the staff provide."
- People's care records reflected people's communication needs.

Respecting and promoting people's privacy, dignity and independence

- People, and where appropriate families, were consulted about the care they needed and how they wished to receive it. People told us they were involved in developing their care plans and their views were listened to and respected.
- People's information was stored securely and used appropriately in line with the provider's policies and government regulations. Each staff member had their own secure login details to access any information stored electronically.

Is the service responsive?

Our findings

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

This is the first inspection for this newly registered service. This key question has been rated good. This meant people's needs were met.

Meeting people's communication needs; Planning personalised care to ensure people have choice and control and to meet their needs and preferences; Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- The service was meeting the AIS. People's communication needs were assessed, and appropriate measures were put in place to support them.
- People received care and support that was focused on their individual needs. Staff monitored people's changing needs and brought these to the immediate attention of the registered manager, who arranged for reviews or referrals, as required.
- Care plans were written in a person-centred manner, however, at times they did not provide enough detail to assist staff understand how exactly to deliver the care package. The registered manager had identified these issues and put measures in place to rectify them.
- Staff understood the importance of promoting equality and diversity and respecting individual differences. Staff we spoke with knew people's needs and preferences well.
- When needed, people were supported to attend events and do activities they valued, if this was in line with their care plan.

Improving care quality in response to complaints or concerns

- Relatives had some mixed views around how they felt the registered manager listened to them and acted on complaints. One relative said, "We were told if we did not like the service we should look for a different home care service."
- We found the concerns raised had related to the difficulties the service had delivering the care packages across a very wide area. The registered manager recognised this issue and had proactively dealt with it. They had reviewed how they responded to concerns and put in new systems to assist this to be more effective.

End of life care and support

- No one was receiving end of life care. This aspect of people's needs was discussed when the care package was being put in place.

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.

This is the first inspection for this newly registered service. This key question has been rated requires improvement. This meant the service management and leadership was inconsistent. Time constraints the management team faced had negatively impacted the delivery of high-quality, person-centred care.

Managers and staff are clear about their roles, and understand quality performance, risks and regulatory requirements; How the provider understands and acts on their duty of candour responsibility; Continuous learning and improving care; Working in partnership with others

- The quality assurance system had not always been effective. The service had been adversely impacted by the pandemic whilst they were setting the home care agency. The registered manager had found the impact of the time-constraints had led to him struggling to complete quality assurance processes.
- The registered manager was in the process of addressing this and had completed initial audits, which had assisted them to determine where the gaps were, and put a realistic action plan in place to resolve them.
- People told us no one had called to check if they were satisfied with the service. The registered manager outlined how they were gradually building-up the service and had just started to contact people to seek their views about the service. The client or relative survey had yet to be completed.
- The registered manager understood their duty of candour responsibility. These are a set of expectations about being open and transparent when things go wrong.

Planning and promoting person-centred, high-quality care and support with openness

- The registered manager was committed to making improvements to the service and to develop a high-quality person-centred care provision. They recognised, when accepting packages from two areas in County Durham, this led to difficulties in having enough packages and staff in each area to meet people's needs. The registered manager assured us they were working to rectify this matter.
- Due to the COVID-19 pandemic the service had experienced increased levels of sickness or the need for staff to self-isolate. This had impacted the care and support being provided. Every staff member was committed to assisting people to have a good quality of life and all had pulled together to cover all the care packages.
- Staff told us they felt listened to and that the registered manager was approachable. They understood the aim of the service and they told us they worked well as a team.

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

- The service worked in partnership with external agencies and actively acted on issues raised. They used the information from these partnerships to assist them to improve the service.