

Quality Life Matters Care Services Ltd

Quality Life Matters Care Services Ltd

Inspection report

Milton Keynes Atterbury Lakes
Fairbourne Drive, Atterbury
Milton Keynes
MK10 9RG

Tel: 07427446591

Date of inspection visit:
08 February 2023
09 February 2023

Date of publication:
06 March 2023

Ratings

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

Summary of findings

Overall summary

Quality Life Matters Care Services Ltd is a domiciliary care agency providing personal care to people with health and social care needs in their own homes. Not everyone who used the service received personal care. CQC only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do, we also consider any wider social care provided. At the time of the inspection one person was receiving personal care support.

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

Systems and processes were not always in place to support people's safety. Risks to the person had not always been outlined in detail to ensure the risk was prevented or reduced. The person was supported by staff who had not always undergone a robust recruitment process. Staff were not all up to date with training so there was a risk of not meeting the person's needs.

The provider's systems and processes had not always effectively monitored the quality of the service being provided. Audits undertaken to monitor the quality of care provided had not always identified issues needing improvement.

The person using the service spoke positively of the reliability of the service. There were sufficient staff to meet the person's needs. The person told us they felt safe and staff ensured they were safeguarded from harm. Staff followed the provider's policy and procedure for infection prevention and control.

The person's needs were assessed and kept under review and reflected all aspects of their care. They contributed to the assessment process. The person's health care needs were recorded and met.

The person was supported to have maximum choice and control of their life 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.

The person spoke of the kind and caring approach of staff and said they were involved in decisions about their care, and their views were respected by staff.

The person was aware of how to raise a concern. They were confident any issues raised would be swiftly and effectively followed up.

Staff were supported through ongoing monitoring and good communication, which ensured information was shared in a timely manner to support in the delivery of personal care.

The person's views had been sought through a survey, which had been analysed and used to identify if improvements were needed.

Rating at last inspection and update

This service was registered with us on 25 January 2022 and this is the first inspection.

Why we inspected

This inspection was carried out to provide the first rating of this service following registration.

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?

Inspected but not rated.

Details are in our safe findings below.

Inspected but not rated

Is the service effective?

Inspected but not rated.

Details are in our effective findings below.

Inspected but not rated

Is the service caring?

Inspected but not rated.

Details are in our caring findings below.

Inspected but not rated

Is the service responsive?

Inspected but not rated.

Details are in our responsive findings below.

Inspected but not rated

Is the service well-led?

Inspected but not rated.

Details are in our well led findings below.

Inspected but not rated

Quality Life Matters Care Services Ltd

Detailed findings

Background to this 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 Health and Social Care Act 2008.

Inspection team

This inspection was carried out by 1 inspector.

Service and service type

This service is a domiciliary care agency. It provides personal care to people living in their own homes.

Registered manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations. At the time of our inspection there was a registered manager in post.

Notice of inspection

We gave the service 2 days' notice of the inspection. This was because it is a small service and we needed to be sure that the registered manager would be in the office to support the inspection. We also gave time for the registered manager to send us inspection information, so we did not have to spend an extended amount of time in the office of the service.

Inspection activity started on 8 February 2023 and ended 9 February 2023. We visited the office location on 9 February 2023.

What we did before the inspection

We reviewed information we had received about the service since registration and we sought feedback from the local authority. 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 1 person who used the service about their experience of the care provided. We also spoke with 2 care staff and the registered manager. We reviewed a range of records. This included 1 care plan.

We looked at 2 staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were also 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 of this newly registered service. We have not been able to give a rating as there was insufficient information to enable us to make a judgement.

Assessing risk, safety monitoring and management

- The person was not fully protected from risks associated with their care and support. Risk assessments were in place for a range of issues including assistance with bathing needs. However, assessments were not fully detailed. For example, for the person's mobility needs, there was little information as to how to assist them.
- The registered manager rectified this and sent us amended risk assessments which included this information. We did not find evidence the person had been harmed as a result of this lack of detail, as the person told us staff assisted them when needed and kept them safe.
- Environmental risk assessments were not fully completed. The registered manager rectified this and submitted a full risk assessment to protect people from any risks in their home setting.

Staffing and recruitment

- Staff were not always recruited safely. Recruitment systems for current staff showed evidence of good character and criminal records checks had been completed. These checks help prevent unsuitable people from working with people who used the service. However, references for one staff member were not sought from the last care employer, which could have revealed issues of concern. The registered manager rectified this issue during the inspection.
- Care plans identified the number of staff required to deliver care safely. The person told us the required number of staff were always sent to provide personal care.

Preventing and controlling infection

- People were protected from the risk of infection. The person told us staff wore personal protective equipment (PPE), for example, gloves and apron when delivering personal care during the COVID-19 pandemic, which protected them all from the risk of infection.
- Staff told us they had received training from the registered manager in infection control, including COVID-19 and donning and doffing of PPE. They said there was always enough PPE available to ensure people were protected from infection, and that the registered manager always ensured supplies were in place.

Systems and processes to safeguard people from the risk of abuse:

- People were protected from the risk of abuse. The person said staff followed safe working practices and they felt there was good protection from the risk of abuse. The person said, "I feel very safe with staff. No problems at all."
- Staff understood how to safeguard people. Staff were aware of reporting concerns to the registered manager if abuse was suspected or alleged. They knew how to report to a relevant outside agency if no action had been taken by management. Staff had confidence that management would act if there were any

concerns about people's safety.

- The registered manager was aware of their duty to report any safeguarding concerns to the local authority safeguarding team.

Learning lessons when things go wrong

- Processes were in place for the reporting and follow up of accidents or incidents.
- The registered manager was aware of the need to share information about lessons learnt. Issues had not arisen to date.

Using medicines safely

- The registered manager was aware of how to ensure people safely received their medicines. Records were available to use when staff administered people's medicine to them, to support safe practice in this area.
- The medicine policy supported people to receive their medicines in the way they preferred, when this level of support was needed.

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 of this newly registered service. We have not been able to give a rating as there was insufficient information to enable us to make a judgement.

Staff support: induction, training, skills and experience

- Staff training was relevant but did not cover all topics staff needed to be aware of, such as specific health conditions. We saw no evidence of harm due to this lack of training. However, there was a risk that staff may not appreciate and act on people's health concerns. The registered manager said this training was planned for the near future. We saw evidence this was the case.
- The person told us staff seemed well trained and they had no concerns.
- Staff received supervision, though this had been sporadic. The registered manager said this was recognised and was being planned to take place more frequently.
- Staff thought the training they received meant they could provide effective care to people.

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

- An assessment of the person's needs was in place. This enabled the person to have choice and ensured the service was able to meet their needs and preferences.
- The person confirmed staff always respected their choices in how they wanted their care to be provided.

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

- The person was able to independently provide their own food and drink.
- They told us staff would provide support to eat and drink if they ever needed this support, "Staff would always offer to help if I ever need it."

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- The registered manager was aware of working with medical professionals when needed. The person said they were confident that staff would help them if they needed support with medical appointments. This meant the person was confident their healthcare needs were met.

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

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.

- A mental capacity assessment had been undertaken to assess capacity.
- Staff supported the person to make decisions and choices in line with their preferences, which feedback confirmed.
- The registered manager was aware of the process to put best interest decisions in place when relevant and who to consult about this. This ensured people's liberty would not be unlawfully deprived.

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 of this newly registered service. We have not been able to give a rating as there was insufficient information to enable us to make a judgement.

Ensuring people are well treated and supported; respecting equality and diversity

- The person told us they were well treated and supported. They said staff were very friendly and caring. Staff respected the way they wanted to live their life.
- Staff members had a good knowledge of the person being supported. They were positive about providing quality care to meet the person's needs.
- The registered manager and staff members understood the need to respect people and their individuality. Staff said they respected the person's individual choices and religious needs. This was confirmed by the person.

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

- The person was supported to be involved in planning and making decisions about their care. They said the registered manager had listened to what they needed and acted on this.
- Staff members were aware of how to involve people in decisions about their care. For example, choices such as whether to handle their own medicine and choose the clothes they wanted to wear.

Respecting and promoting people's privacy, dignity and independence

- The person was respected, and their privacy, dignity and independence was encouraged. The person said staff fully respected their independence and encouraged this, such as when they were able to wash themselves.
- Staff promoted privacy and dignity when providing care. This was confirmed by the person. Staff members gave examples of how they did this. This included covering the person when providing personal care and closing curtains and doors when personal care was to be provided. Staff members said they always encouraged the person to be independent and would only provide support when needed.
- Staff were aware of keeping information safe and confidential. This was supported by the provider's policy on confidentiality which stressed the importance of doing this.

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 of this newly registered service. We have not been able to give a rating as there was insufficient information to enable us to make a judgement.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- The care plan did not fully detail the person's personal history such as family, previous employment and their interests and hobbies. The registered manager took swift action and added this information. This provided staff with more personalised information to understand and engage with what was important to the person.
- Staff provided personalised care. The person told us staff communicated and chatted to them, so they felt they were recognised as an individual and respected.
- The person had choice and control over the way their care was provided. For example, what time they wanted their calls to be made on a daily basis.

Meeting people's communication needs 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 registered manager was aware of the need to put systems in place when needed. This included providing information in large print, audio and pictures. There was information in care plans regarding the person's communication needs.
- The registered manager was aware of the need to respect people's preferred communication style. This meant people were able to feel valued as they could always express themselves.

Improving care quality in response to complaints or concerns

- A complaints policy and procedure were in place so complaints could be recorded and dealt with formally.
- The person told us if they ever had any concerns, they would discuss this with the registered manager. This is because they had confidence in the registered manager, who was responsive to their views.

End of life care and support

- This was not yet needed at the time of the inspection.
- The registered manager was aware of the need to respect people's end-of-life wishes. A system was in place to include personal preferences in care plans.

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 of this newly registered service. We have not been able to give a rating as there was insufficient information to enable us to make a judgement.

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

- Audits and checks were carried out to check the service met people's needs. These included checks on care, care records, call times and staff recruitment. However, they were not always effective as the issues we found during this inspection had not been identified. The registered manager took action to rectify this.
- The registered manager understood their role and the needs of their staff team. Staff understood their responsibilities, and who to report to if they had concerns or needed help
- Staff were monitored and supported by the registered manager continuously as they worked together. This showed staff were providing appropriate care and a positive approach to people. This allowed the registered manager to maintain oversight of how care was being delivered.

Continuous learning and improving care; Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- The registered manager promoted a positive culture that was inclusive and empowering to achieve good outcomes for people. This had been successful for the person we spoke with, who said, "They are a good company and the staff are very caring."
- Staff felt supported. They said whenever they had an issue, the registered manager always responded swiftly and positively. Staff told us they felt appreciated by the registered manager for the care they provided to people.

How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong

- The registered manager was aware of the duty of candour. If mistakes were made, they had a duty to be open and honest, issue an apology and take any necessary action.
- The registered manager understood information sharing requirements. They knew when concerns were identified, notifications should be sent to the CQC as required by law. There had not been a need to do this to date.

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

- Formal feedback had been sought from the person. This showed they were satisfied their care needs had been met.
- As there were only a small number of staff and they worked together, the registered manager spoke with staff continuously about issues concerning care and received feedback from staff.

- The person told us that they were treated fairly. Staff were respectful of their religious beliefs.

Working in partnership with others

- The registered manager was aware of the need to work in partnership with other professionals when required.
- Staff understood they needed to inform the registered manager and people's families if people were ill or had an accident.
- The registered manager was supportive of the inspection and receptive to feedback when we discussed the findings.