

Novus Care Limited

# Novus Care Canvey Island

## Inspection report

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03 July 2017  
10 July 2017  
14 July 2017  
18 July 2017

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## 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

The office visit took place on 3 July 2017 and it was announced. We gave notice to the service to ensure that there were staff available to provide information for the inspection. We also made telephone calls to staff and people using the service on 10, 14 and 18 July 2017.

Novus Care Canvey Island is registered to provide personal care to older people and younger adults some of whom may be living with dementia, a physical disability and/or a sensory impairment. They also provide personal care to people with learning disabilities' or autistic spectrum disorder and to people who misuse drugs and alcohol.

There was a registered manager in post. 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 protected from the risk of harm and received a safe service. Novus Care Canvey Island provided enough staff who had been safely recruited to help keep people safe and to meet their needs. Medication management was good and people were supported to take their medication as prescribed.

Experienced and well-trained staff supported people. The service supported people to have as much choice and control over their lives in the least restrictive way possible. People received sufficient support to have adequate food and drink and to maintain their health to ensure their individual needs and preferences were met.

Care workers were kind, caring and compassionate and knew the people they cared for well. People were supported to improve their independence as much as they were able to. People and their relatives repeatedly told us that care workers treated them with dignity and respect. People and their relatives had been fully involved in the assessment and care planning process. Care plans were regularly reviewed and updated to reflect people's changing needs. People were supported to do their own shopping, to go swimming and to have a manicure.

People were very positive about the quality of the service. The registered manager, office staff and care workers were committed to providing people with good quality person centred care that met their needs and preferences. People felt able to complain and any complaints were dealt with quickly. There were effective systems in place to monitor the quality of the service and to drive improvements. The service met all relevant fundamental standards.

Further information is in the detailed findings below.

## 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 risk of harm. There were sufficient numbers of suitable, skilled and qualified care workers who had been safely recruited.

Medication management was good and ensured that people received their medication as prescribed.

### Is the service effective?

Good ●

The service was effective.

People were cared for by well trained and supported care workers.

The registered manager and their care workers had a good knowledge of the Mental Capacity Act (2005) and had applied it appropriately.

People were supported to have sufficient food and drink to meet their individual needs.

People experienced positive outcomes regarding their healthcare needs.

### Is the service caring?

Good ●

The service was caring.

People consistently received their care from kind, caring, thoughtful and considerate care workers who knew them well.

People and their families were fully involved in their care and support.

### Is the service responsive?

Good ●

The service was responsive.

People's involvement in the assessment and care planning

process ensured that their care workers had good information about how they wanted to be supported.

People were confident that their complaints or concerns would be dealt with appropriately to their satisfaction.

**Is the service well-led?**

**Good** ●

The service was well-led.

People who use the service, their relatives and care workers had confidence in the registered manager. Care workers shared the registered manager's vision to provide people with good quality person centred care.

There were good quality assurance systems in place to monitor the service and drive improvements.

# Novus Care Canvey Island

## **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 checked 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.

The office visit took place on 3 July 2017 and it was announced. We gave the service 48 hours' notice to ensure that someone would be there for us to carry out the inspection. We also made telephone calls, and sent emails to staff to gain their views of working for the service on 10 July 2017. We also carried out telephone interviews between the 14 and 18 July 2017 to ask people for their experience of using the service. The inspection was carried out by one inspector and an expert by experience. An expert by experience is a person who has personal experience of using or caring for someone who uses this type of care service.

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 also reviewed other information that we hold about the service such as safeguarding information and notifications. Notifications are the events happening in the service that the provider is required to tell us about. We used this information to plan what areas we were going to focus on during our inspection.

We sent questionnaires to 19 people who use the service, 19 of their relatives, 26 staff and two community professionals. We received seven completed surveys from people who use the service, one from a relative and eight from staff. We did not receive any completed questionnaire from the community professionals. We have reflected people's views from the questionnaires throughout this report.

We spoke with nine people who use the service, five of their relatives, the registered manager, the supervisor, the care coordinator and five members of care staff. We also received emails from a further five members of staff who shared their views about working for the service. We reviewed four people's care files, four staff recruitment and support files, training records and quality assurance information.

## Is the service safe?

### Our findings

People repeatedly told us they felt safe with their care workers. They said that they were trustworthy and supportive. One person said, "They [care workers] are totally trustworthy. ...when they do my shopping, they'll always bring a receipt back, nothing's ever been wrong." Another person told us, "They [care workers] are so trustworthy. They will ask for a glass of tap water, even in this hot weather they ask, they don't just take it." One relative said, "I trust them to look after my relative well, and if you ask my relative they will tell you they feel safe with their care workers." Other people and their relatives told us how they felt safe and secure when care workers were in their homes.

Care workers demonstrated a very good understanding of how to protect people from the risk of harm. One care worker said, "I have done all the training and there is guidance in the office. I was also given a staff handbook which includes information about safeguards and whistle blowing." Care workers were aware that they could report any safeguarding concerns to CQC and/or the local authority. There were clear policies, procedures and guidelines for care workers to refer to when needed and safeguarding issues had been dealt with appropriately. Risks to people's health, safety and welfare were well managed. There were risk assessments and management plans in place to minimise any risks to people's health, safety and welfare. Care workers described to us how they kept people safe. One care worker said, "I follow the care plan which tells me how to manage risks to the person and in their environment."

People told us there were sufficient numbers of care workers to meet their needs. They repeatedly told us their care workers were reliable and punctual. One person said, "They [care workers] always stay for the full amount of time and never rush me." Another person told us, "If my care worker finishes early they always ask if there is anything else I would like them to do and if I don't need much, they'll just sit and chat with me. It's lovely for me – I can't ask for more than that." A relative said, "If I want to pop out I can because I know they [care worker] will turn up." People we surveyed told us that they received their care and support from familiar, consistent care workers. One relative told us in their survey questionnaire, 'Care workers arrived on time and stayed the agreed length of time and completed all of the tasks that they should do during each visit'. Care workers told us, and the rotas confirmed that there were enough staff to care and support people safely.

The service had a robust recruitment system in place where all of the appropriate checks had been carried out before staff started work. These included identity checks, disclosure and barring service checks (DBS), written references and evidence of qualifications and skills. All new care workers were subject to a 12-week probationary period where regular checks were made to ensure their suitability to the work. Care workers told us that the recruitment process had been robust. One care worker said, "The recruitment process was thorough. I had a good induction that covered all the necessary training and I shadowed more experienced staff before I was allowed to go out on my own." Another care worker told us, "I could not start work until all my checks had been done. I then had four days induction and regular checks."

Where people were supported with their medication, there were clear records to show it had been administered appropriately. Care workers had been trained and they demonstrated a good understanding

of the service's medication policy and procedures. The registered manager undertook a range of checks to ensure that any errors were identified and dealt with swiftly. People told us that they received their medication in good time and that their care workers didn't rush them. One person said, "They [care workers] are efficient and reliable in dealing with my medication." Another person told us, "They [care workers] don't do my dossett box as I do that myself, but they do sort out my patches for me. They'll always write the details in the book afterwards." Care workers had been trained and their competence to administer medication had been regularly assessed. People received their medication as prescribed.

People told us that their care workers observed good infection control practices. One person said, "They always check that everything is clean and remove and dispose of their gloves before leaving." During the office visit, we heard care workers requesting packs of disposable gloves and there were plenty available for them. Care workers told us they never run short of personal protective equipment. One care worker said, "There are always gloves available in the office. They never run short of them." One relative told us they valued care worker's high regard for hygiene and infection control. They said, "They [care workers] always put gloves and aprons on, and when new staff are shadowing them this is drummed into them."

## Is the service effective?

### Our findings

People were cared for by care workers who told us they felt supported and valued. Care workers told us, and the records confirmed that they had regular supervision and appraisals. The registered manager said that during the induction process care workers received weekly supervision, spot checks and observations of their practice to ensure they were competent to carry out their role. Care workers told us the induction process was good. One care worker said, "I shadowed a more experienced care worker at first and worked with another until my confidence grew." Other care workers told us they received an induction that prepared them for the role before they worked unsupervised.

People told us they felt that their care workers were well-trained. Care workers said, and the records confirmed that they had received a wide range of training appropriate for their role that had been regularly updated. They also told us they had been encouraged and supported to attain a qualification in care. One care worker said, "I have worked here [Novus Care] for years; since it was Crystal Care. The training is good and I am working towards a qualification in care. We have regular supervision and spot checks and can approach the office at any time. I enjoy my work and feel happy and supported." Other care workers told us in our survey questionnaires that they received the training they needed to meet people's needs, choices and preferences. They also said that they had regular supervision and appraisal which enhanced their skills and learning. People were cared for by well-trained and supported care workers.

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. We checked whether the service was working within the principles of the MCA. People told us that their care workers always offered them choice in how they wanted their care provided. One person said, "They [Novus Care] stick to the same person coming in. They do what I need." Another person told us, "My care worker always checks if I am happy with the care they provide." A relative told us, "My relative likes to shower every other day and the care workers always respect their choice." Care workers had received training and had a good understanding of their responsibilities under MCA (2005) and of the importance of supporting people to make choices and decisions for themselves.

Where people required support with eating and drinking this was mainly done by heating microwave meals, preparing sandwiches and drinks and ensuring they had access to sufficient food and drink. People told us that their care worker ensured they had enough food and drink to hand. One person said, "The care workers always fill up a flask for me, so that I have enough hot drinks during the day. I also have plenty of cold drinks available especially in the recent hot weather." Another person told us, "They're [care workers] very domesticated, they clear away and wash up for me." People received the support they needed to ensure they had sufficient food and drink.

People's healthcare needs were mainly met with support from their families and friends. However, the supervisor told us that office staff had contacted GP's, district nurses and other professionals when family



was not available to do so. People told us that staff knew them well and would notice any change in their health or behaviour. One person said, "I scratched a gnat bite which they noticed as I drew blood. They kept a close eye on it, and also cut my fingernails." Relatives spoken with were very positive about their loved one's healthcare support. One relative said, "They [care workers] are quick to notice mood changes, and will adjust their way to ensure they support my relative appropriately." Another relative told us that care workers would keep them well informed about their loved one's health, and alert them if there was a need to contact health care services such as the district nurse or GP. People and their relatives also told us that care workers made good use of the notebooks, communicating with each other any concerns or reminders. This meant that people received the healthcare they needed to help them to maintain their health.

## Is the service caring?

### Our findings

People told us that their care workers treated them with dignity and respect. They said they were kind, caring and compassionate. They told us that they were always introduced to their care workers before they provided them with care and support. One person said, "New care workers always shadow more experienced ones, and this gives me peace of mind because the new ones know what is required of them. It also means that I have always been introduced to them before they visit me on their own." A relative told us, "They (Novus Care) always introduce new care workers before they provide my relative's care. The service will call us, and tell us, "We've got some new care workers starting this week and they might shadow the care worker to yours – is that ok? They are caring and kind and always treat my relative with respect and dignity."

We received positive feedback in our survey questionnaires, when speaking with people who used the service and their relatives. This included, 'they [care workers] provide compassionate, professional support at all times', 'very kind girls', 'I feel that I have known them [care workers] all my life – there is not one I would say I didn't like', and, 'they ask me if I am sure I am comfortable before they go'. One person told us, "I'd say they are really perfect, very nice, kind people. They [care workers] are good company and will have a good natter with me. When they go I am always very grateful that I have seen them." Care workers told us in their survey questionnaires, their emails to us and during our telephone conversations that the people they were supporting came first. They said they did their best to ensure people's health, happiness and well-being, one care worker said, "I always treat people with dignity and respect and ensure that their needs are met to a high standard." Another care worker told us, "I love this job. It is hard work but is so rewarding. I really enjoy what I do."

People and their relatives told us they were actively involved in making decisions about their care and support. The care plans showed that people and their families had contributed to the care planning process and agreed their content. People's care plans provided good information about their needs and preferences and described how they wanted their care worker to support them. One person told us, "I have been progressively improving, so my visits have reduced. We've always made these decisions together, they're very conscious of how I'm doing and what I need. It gives me confidence that they'd up the care again if I needed it." Another person told us, "I am fully involved in sorting out my care with them [Novus Care]. We try it out together, and if it doesn't work it gets changed."

People's independence was encouraged and supported to help them retain it as much as was possible. For example, a high percentage of the people we surveyed felt that the support and care they received helped them to be as independent as they can be. One person said, "They do exactly what I want them to do and they don't try to take over. They [care worker] get me a bowl so that I can wash myself, I don't want them to do it for me." Another person told us, "As my health has improved them [care workers] have done less and less for me. Now when I have a shower they sit in the bedroom just to be on the safe side." A relative stated in their CQC survey questionnaire, "The care and support my relative receives helps them to be as independent as they can be." Care workers stated in their CQC surveys that they felt the care and support they provided helped people to retain their independence.

Where people did not have family members to support them, they had access to advocacy services. An advocate supports a person to have an independent voice and enables them to express their views when they are unable to do so for themselves.

## Is the service responsive?

### Our findings

People's needs had been fully assessed before they received a service and their care plans had been devised from this assessment. People and their relatives told us they had been fully involved in the assessment and care planning process. They said that their care plans had been regularly reviewed and updated when their needs had changed and that they were confident of receiving the care they needed at any particular time. One person said, "This agency is very flexible in amending my care when required. I have confidence they will up my care if I needed it."

The care plans described people's likes, dislikes and preferences and provided care workers with clear instructions on how to care for people. There were detailed risk assessments and management plans to enable care workers to minimise risks to people's health, safety and well-being. People said they were happy with their care plans and they felt that their care workers met their needs. One person told us, "My care plan reflects my needs." Another person said, "They [care workers] meet my needs and often do more for me." Care workers told us the care plans told them all they needed to know about people's needs, choices and preferences and how to keep them safe. One care worker told us, "I find the care plans and risk assessments easy to follow. If I have any questions I can call and ask the office or the out of hour's staff."

People told us that they were supported to do the things they enjoyed such as shopping and swimming. One person said, "I have two three-hourly visits each week in order for me to do my own shopping and to go swimming. My care worker looks after me wonderfully, they come in the water with me, it's very good exercise for me. I enjoy it." Another person told us, "My care workers do exactly what I ask them to do. They are the only people I see, so it's a social event for me too – I am pleased to see them as they are so friendly. They sometimes have a cup of tea with me and we have a good natter. I am always very grateful that I have seen them." Another person said, "If my care worker has time left over they will give me a manicure or do odd jobs around the house. My care worker helped me to put together a nest of tables. We did one a day over three days. They'll do absolutely anything for me."

People told us that the registered manager took their concerns seriously and resolved matters quickly. One person said, "My care workers and the office staff respond well to any complaints or concerns." Another person told us, "The manager is very good. If I've got any concerns I can ring them, and they'll come out to see me. You can tell that they want me to be happy. The manager said I must always report any concerns and was adamant that they needed to know so they could put things right." Relatives comments included, "I never worry about ringing them [office staff] as they are always so helpful." And, "When I have complained to the office they took immediate action to put things right." People, their relatives and care workers confirmed in their survey questionnaires that concerns were dealt with quickly and efficiently. There was an effective complaints procedure in place. The registered manager had fully investigated concerns and responded appropriately within the agreed timeframes. The registered manager monitored complaints looking for any themes or trends to enable them to make continual improvements to the service.

## Is the service well-led?

### Our findings

There was a registered manager in post. Care workers told us that the registered manager promoted an open, positive person-centred culture. They said they shared the registered manager's vision to provide people with good quality person-centred care. There was an open and inclusive culture where people, their relatives and care workers felt they could raise issues at any time. Care workers were very positive about the registered manager and told us it was a well-structured company that was great to work for. People knew the registered manager well and everyone we spoke with referred to them by name. They described them repeatedly as 'approachable', 'hands-on', and caring'. One person said, "[Managers name] came to see me the other day, they like to check that we're happy. I made it clear that I have no problems." Other people told us that the registered manager contacted them on a regular basis to check on their satisfaction with the service.

People said they were encouraged to give their views and opinions and the records showed that regular quality assurance telephone calls had been made. People had been asked if they were satisfied with the service and if there was anything else it could do for them. We received positive comments in our survey questionnaires, which included, "I know who to contact and am asked what I think about the service. Information is clear and easy to understand." And, "I would recommend this service to another person." Both a care worker and a relative said they would recommend the service to a member of their own family.

Care workers told us, and the records confirmed that they had regular staff meetings where they had discussed a range of issues such as staff training, care practices risk assessments and the care certificate. One care worker told us in their survey questionnaire, "It's a great agency to work for. "I am very happy in my role within Novus Care, and I feel we are supported to provide the highest standard of care to our service users and staff." Another care worker said, "I cannot fault the support that I receive on a daily basis, the team in the office are readily available and always willing to help and advise if required. I really enjoy working for the company as I feel that we have a good team spirit and the atmosphere is a good working environment."

There was an effective quality monitoring system in place. The registered manager told us they were in the process of carrying out their 2017 annual quality assurance survey where they had sought feedback from people who use the service, their relatives and care workers. They said they were developing a professional's survey to enable them to seek the views of other interested parties. The 2016 survey was positive and where improvements were needed the registered manager had devised an action plan. Regular checks had been carried out on the care plans, care worker's files, supervision, training, observations of practice and new care worker's progress. The registered manager told us, and we saw that they had tracker sheets in place to ensure that audits of the systems and processes were up to date.

People's personal records were safely stored in locked cabinets in the office to ensure that confidentiality was maintained; however, they were readily accessible to office staff when needed. The registered manager had access to up to date information on the service's computer system. This was shared with care workers to ensure that they had the knowledge to safeguard people, protect their well-being and provide them with a good quality service.

