

Care More Limited

Inspection report

4 Tudor CourtDate of inspection visit:Brighton Road12 November 2020SuttonDate of publication:SurreyDate of publication:SM2 5AE15 February 2021

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Ratings

Overall rating for this service

Is the service safe? Good Is the service well-led? Requires Improvement

Good

Summary of findings

Overall summary

About the service:

Care More is a domiciliary care agency. It provides personal care to people living in their own houses and flats. At the present time it provides a service for 110 people. Not everyone using the service receives personal care. The Care Quality Commission (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.

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

At the time of this inspection there was not a manager in place who was registered with the CQC . Also CQC had not received an application for a new registered manager that could be approved. The previous registered manager left the service at the end of March 2020. A management team was in place in the interim period.

People were protected from the risk of abuse. The service had safeguarding procedures in place that staff were well aware of. Staff received training on safeguarding people.

Comprehensive risk assessments and risk management strategies were in place as part of the assessment and support planning process. This meant risks to people and to staff were minimised.

There were robust recruitment practices in place and sufficient staff levels to meet people's needs.

The provider had reviewed their medicines policy and procedure and all staff received appropriate training. This meant people received their medicines safely and staff had clear guidance to follow, informed by models of best practice.

The provider ensured that all their staff received appropriate training and support to understand and to manage Covid 19. This included best practice for infection control and the use of PPE.

Staff also received appropriate guidance on how to support people with dementia to understand the pandemic and Covid 19. The provider made appropriate support services available to staff in order to support their mental wellbeing through the pandemic and if they became unwell and when they returned to work.

Accidents, incidents and risks were appropriately recorded and included details of preventive strategies used by the service to reduce the likelihood of events occurring in the future.

People all told us they thought the service was well led and that they were very happy with the support they received.

Staff told us the service was well led by the owner and the management team. They said they employed innovative ways of working to develop the service. There were effective systems in place to monitor the quality of the service provided to people which ensured good governance.

Technology was used effectively by the provider to ensure people were informed promptly about potentially missed or late calls.

The service had systems in place to notify the appropriate authorities where concerns were identified. The culture of the service was positive, open and person centred.

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

Rating at last inspection and update: The last rating for this service was good (published 19 June 2018). At this inspection we rated the service as good.

Why we inspected: We carried out this inspection following a routine review of information we held about this service. Our intelligence indicated that there may be a higher level of risk at this service. As a result we undertook a focussed inspection to review the key questions of safe and well-led only. We applied the ratings limiter to well-led.

Follow up: We will continue to monitor information we receive about the service and we will re-inspect when we feel it is necessary.

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.	
Details are in our Safe findings below.	
Is the service well-led?	Requires Improvement 🧡
The service well-led?	Requires Improvement 🥌



Care More

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 This inspection was completed by 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 did not have a manager registered with CQC. The last registered manager left the service at the end of March 2020. Registered managers are legally responsible for how the service is run and the quality and safety of the care provided.

Notice of inspection

This inspection was announced. We gave the service 24 hours' notice of the inspection. This was because managers are often out meeting people and staff. We wanted to make sure someone would be available to meet with us

The inspection site visit took place on 12 November 2020.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. We used this information to plan our inspection.

During the inspection

We visited the offices of this service. We spoke with the management team responsible for managing this service in the absence of a registered manager. This team comprised of the owner, the compliance manager and another manager. We also spoke with two staff. We inspected four care files and four staff files. We also reviewed a variety of records relating to the management of the service.

After the inspection

We spoke with twelve people who used the service and two relatives on the telephone.

Is the service safe?

Our findings

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

At the last inspection this key question was rated as good. At this inspection this key question has remained Good. This meant people were safe and protected from avoidable harm.

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

- People were protected from the risk of abuse. The service had safeguarding procedures in place that staff were well aware of. Staff received appropriate training on safeguarding people. Staff knew how to recognise abuse and they told us what action they would take if any safeguarding concerns arose. They were aware of the requirement to report any safeguarding concerns to both the local authority and to the CQC.
- The provider had an appropriate whistleblowing policy and procedure in place that staff knew about and felt confident to follow if the need arose
- Staff were required to sign the provider's policies and procedures to indicate they had read and understood them.

Assessing risk, safety monitoring and management.

- Comprehensive risk assessments were carried out for each person who used the service. We saw these on each care file we inspected. People told us they had signed them to indicate their agreement with them. We saw evidence of this on the files we checked.
- Staff understood where people required support to reduce the risk of avoidable harm. They told us care plans contained detailed guidance for them to follow to help keep people safe. Staff said they found this useful and risks to people and to themselves were reduced.

Staffing and recruitment

• Records demonstrated the provider had appropriate recruitment procedures in place for the recruitment of all staff. These procedures included criminal record checks, identity checks and references from previous employers. This meant only staff deemed suitable by the provider were employed to provide care and support safely.

- There were appropriate staffing levels needed to meet people's assessed needs.
- People told us they received their care on time and was planned with them. One person said, "They [the staff] are usually always on time, I mean they might sometimes be five or ten minutes late if there has been bad traffic but they let me know if they are going to be any later." Another relative told us, "They do come on time, they are very regular in fact. The office rings us if there are likely to be any changes to the time of my [family member's] calls."
- People also said they received their care from a regular team of staff who they knew and liked and had confidence in.

Using medicines safely.

• People received their medicines safely and as prescribed. Only staff who completed training in the safe

administration of medicines were allowed to assist people with their medicines. Staff told us they had been trained in the safe administration of medicines which they had found useful. We saw certificated evidence that supported this.

• The provider's policies and procedures for medicines helped to ensure people received them safely and as prescribed. Clear guidance was provided for staff to follow in how to administer medicines safely. Staff were able to describe the steps to ensure people received their medicines safely. People we spoke with confirmed this as did the records we inspected.

Preventing and controlling infection

• People were protected from the risks of infection by effective infection control practices.

• Staff said they were supplied with sufficient personal protective equipment [PPE] to enable them to follow the guidelines and government advice to help prevent the spread of the Covid 19 virus amongst people who used the service. People confirmed that staff wore PPE appropriately when providing them with support.

• Staff told us they received training in infection control and food hygiene as a part of their induction training. They also received refresher training as part of their further development programme. This knowledge, staff told us, helped to prevent the spread of infection to people.

• The management team carried out 'spot checks' when staff provided care and support to people. Part of the process included monitoring staff practices relating to infection control.

Learning lessons when things go wrong

• Records evidenced that where things had gone wrong lessons were learnt and improvements were made to remedy the problems identified.

• The management team showed us the records for logging any accidents or incidents that arose. The recording format used to log any accident or incident was appropriate and included a section designed to enable improvements to be made to policies and practices where necessary.

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.

At the last inspection this key question was rated as good. At this inspection this key question had deteriorated to requires improvement. This is because the service did not have a registered manager. Services that require a registered manager cannot meet the characteristics of a good rating if there is no registered manager in place.

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

- The registered manager for this location left the service at the end of March 2020. At the time of this inspection there was not a manager in place who was registered with the CQC. Also, CQC had not received an application for a new registered manager that could be approved. A management team was in place in the interim period. This was to ensure the agency had an effective management and staffing structure in place.
- Comprehensive quality assurance systems helped to ensure areas for improvement were identified and action taken to continuously improve the quality of the service provided.
- Staff were well supported with good training and one to one supervision.
- Regular spot checks of staff practice were undertaken by managers and field supervisors. These checks were not announced. This enabled managers to monitor how staff were working practically with the person as well as checking time keeping and monitoring their performance. In this way they were able to ensure improvements were made where necessary.
- The provider implemented a wide variety of auditing tools including regular telephone monitoring calls to people; unannounced spot checks and feedback surveys to gain the views of people, their relatives and staff. There were systems in place to review incidents and accidents which helped to ensure action was taken to prevent a recurrence.

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

- People and their relatives spoke positively about the service they received from staff. They said staff were committed to providing good, high quality care. Comments we received reflected this and included, "I am very happy with the care I get, no complaints at all," and "The staff really care and in these very odd times that is especially important. The staff are really very supportive and caring." People said they felt listened too and were able to discuss any concerns they may have. They said there was an open and transparent culture at the service that met the needs of the people they supported.
- The management team understood their duty of candour responsibility to notify CQC appropriately of significant incidents including allegations of abuse and serious injuries

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

- People told us they were fully involved in making key decisions about their care. They said any special needs or requests they might have were taken seriously and integrated into their care plans.
- People said the agency communicated very well with them individually but also said that every year they were able to contribute suggestions as how the service could be improved. They told us they felt listened to.
- Staff told us they regularly spoke with people to ensure they were happy with the service they received.

• People told us they received good support from staff who were happy and committed to their work. They said they worked in an open and friendly culture. One staff member told us, "I really do love my job, even at times like this [CV19]." Another staff member said, "It's a good service, well managed and the staff team is supportive." Staff told us the managers dealt effectively with any concerns if they were raised.

Continuous learning and improving care

• Staff team meetings provided opportunities to build a coherent team approach for staff and to discuss their work. Staff were able to discuss work they did with people at these meetings, share any worries they had about individuals and seek advice. They told us they felt they were listened to.