

Alcedo Orange Limited

Kare Plus Blackpool

Inspection report

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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 inspection visit at Kare Plus was undertaken on 22 November 2018 and was announced. We gave 48 hours' notice of the inspection to ensure people who used the service, staff and visitors were available to talk with us.

Kare Plus provides personal care assistance for people who live in their own homes. The office is based in Blackpool. Kare Plus is a domiciliary care agency providing practical and personal care to people living in their own homes in the Blackpool and surrounding areas. The agency includes supports for older people, dementia, mental health, physical disability and younger adults. The agency is part of a large organisation that has branches in the north west. Parking is provided outside the office building in Blackpool. At the time of the inspection visit the service was supporting 14 people.

A registered manager was in place. A registered manager is a person who has registered with the Care Quality Commission (CQC) 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.

Kare Plus registered as a new service in November 2017. This was their first inspection since registration with CQC.

The service had systems in place to record safeguarding concerns, accidents and incidents and take necessary action as required. Staff had received safeguarding training and confirmed this when we spoke with them.

Risk assessments had been developed to minimise the potential risk of harm to people during the delivery of their care. These had been kept under review and were relevant to the care provided.

Staff knew people they supported and provided a personalised service. Care plans were organised and had identified care and support people required to suit their individual needs. We found they were informative about care people had received. They had been regularly reviewed and changes made when required so they were up to date. Staff had the right information to reflect people's changing needs and tasks required when visiting people in their own home.

The registered manager provided training and reviewed staff skills to ensure they administered medicines safely. The registered manager regularly completed a medicines audit to assess the safety of related procedures.

Kare Plus had safe infection control procedures in place and staff had received infection control training. Staff spoken with confirmed they had been provided with protective clothing such as gloves and aprons as required. This reduced the risk of cross infection when providing personal care.

Care plans seen confirmed people's dietary needs had been assessed and support and guidance recorded.

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

People supported by staff at Kare Plus told us they were treated with respect, dignity and by caring staff. A person we visited who used the service said, "They have been very good to me. They are always caring and will do anything that helps me."

People who used the service knew how to raise a concern or to make a complaint. The service had kept a record of complaints received and these had been responded to appropriately.

The service used a variety of methods to assess and monitor the quality of the service. These included, quality assurance calls, satisfaction surveys (first one due to be completed) and care reviews. People supported by Kare Plus confirmed they have regular contact from the management team to ensure they were happy with the service.

The registered manager and staff were clear about their roles and responsibilities and from talking with them we found they were striving to keep providing a good standard of care and support to people in their care.

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.

Records for recruitment were in place prior to staff starting their employment. We found sufficient staffing levels meant there had been no missed visits.

We found communication systems held at people's homes were effective in retaining their welfare and safety.

Medicines were administered safely by staff who had received training.

We found staff had a clear understanding of safeguarding procedures.

Is the service effective?

Good ●

The service was effective.

The registered manager provided a range of training to support staff in their roles.

Where people who used Kare Plus required support with meals, care plans contained relevant information.

When we discussed the principles of the MCA with staff, we found they had a good understanding.

Is the service caring?

Good ●

The service was caring.

People were able to make decisions for themselves and be involved in planning their own care.

People were supported by caring and attentive staff who showed patience and compassion to the people they supported.

Staff respected people's privacy and dignity when in their homes.

Is the service responsive?

Good ●

The service was responsive.

People told us the service responded to their needs, including when these changed.

Care planning was personalised to people's individual needs. independence.

People said they had information about how to make a complaint if they chose to and relevant procedures to follow

Is the service well-led?

The service was well-led.

People and relatives were complementary about the organisation of the service and felt there was a good management.

The management team regularly completed service audits to check everyone's safety and wellbeing.

Staff told us the management team were supportive and approachable.

Good ●

Kare Plus Blackpool

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 comprehensive inspection visit took place on 22 November 2018 and was announced. The provider was given 48 hours' notice because the location provided a domiciliary care service to people who lived in the community. We needed to be sure that we could access the office premises.

The inspection team consisted of an adult social care inspector.

Before our inspection we completed our planning tool and reviewed the information we held on the service. This included notifications we had received from the provider, about incidents that affect the health, safety and welfare of people supported by the service and previous inspection reports. We also checked to see if any information concerning the care and welfare of people supported by the service had been received. We contacted the commissioning departments who used the service. This helped us to gain a balanced overview of what people experienced accessing the service.

As part of the inspection we used information the provider sent us in the Provider Information Return. This is information we require providers to send us at least once annually to give some key information about the service, what the service does well and improvements they plan to make.

During the inspection visit we spoke with a range of people about the service. They included four people supported in the community, a friend/relative and four staff members. We also went to the Kare Plus office base and spoke with the registered manager and care co-ordinator.

We looked at the care records of two people, recruitment and supervision records of staff members, the training matrix and records relating to the management of the service.

Is the service safe?

Our findings

Everyone we spoke with told us they felt safe and comfortable whilst using Kare Plus. One person said, "They come a lot to help me and it makes me feel better and safe." A relative/friend commented, "I am sure they do provide the care we need and I feel safe that they are looking after us well."

The service had procedures in place to minimise the potential risk of abuse or unsafe care. Staff had received safeguarding vulnerable adults training and understood their responsibility to report any concerns they may observe to keep people safe. Staff we spoke with confirmed they had received safeguarding and whistleblowing training.

We looked at how accidents and incidents were managed by the service. There had been few accidents. However, where they occurred any accident or 'near miss' was reviewed to see if lessons could be learnt and to reduce the risk of similar incidents.

Staff recruitment records we looked at contained required documentation of checks that were needed to meet the regulations to work with vulnerable people. For instance they included references and criminal record checks from the Disclosure and Barring Service. Staff newly employed confirmed to us checks had been carried out prior to their employment starting. In addition staff told the induction process was thorough and informative. A staff member said, "Checks were completed and the induction training was very good."

Staffing levels discussed with the registered manager and staff showed how the service consistently deployed staff to meet each person's individual needs. People who used Kare Plus told us they received care from staff they had built up a relationship with because they had staff consistency for their visits. A person who used the service said, "They are generally on time and never miss a visit. I get to know them as they are the same people." Staff confirmed staffing levels were sufficient because they had time to complete visits in a calm and unhurried way. The registered manager had a good system to ensure care packages were delivered on time. In addition the length of time spent with people was sufficient. This was confirmed by staff spoke with and people who used the service.

Care records contained risk assessments to guide staff about protecting people from unsafe care in their own homes. These included hazards associated with medication, the environment in which staff visited and meal preparation. The management team reviewed potential causes, and what the impact may be and also the level of possible risk. Records included action needed to reduce the occurrence of risk.

Staff told us there was sufficient personal protective equipment, such as disposable gloves and aprons to maintain good standards of infection control. One staff member said, "We have access to plenty of gloves and things." People who used Kare Plus we spoke with confirmed staff practiced good hygiene standards.

The registered manager provided training and reviewed staff skills to ensure they administered medicines safely. The registered manager regularly completed a medicines audit to assess the safety of related

procedures. Medication records seen gave clear instruction as to whether the person would self-medicate or request support from the agency. Staff told us the system was clear and in each care plan information was available for staff when visiting people's homes on how medicines should be administered. This was good practice in safe administration, which followed national guidelines. We found records gave clear instruction and there were no gaps on medicines charts we looked at.

Is the service effective?

Our findings

We found evidence the manager was referencing current legislation, standards and evidence based on guidance to achieve effective outcomes. People received effective support from staff at Kare Plus because they were supported by trained staff who had a good understanding of their needs. Comments from people who used the service confirmed this. One person said, "All the staff who come here appear well trained and know what they are doing. I have no issues with them."

We looked at training records and spoke with care staff about training methods and what access was like to courses. Responses were positive and comments included from staff, "No problems with training this is the best company I have worked for training courses." Another said, "They have supported me through my National Vocational Qualification (NVQ) training which has been a big help." Training records showed a number of courses had been attended by staff and regular training was ongoing. For example training included, safeguarding, basic life support, medication and infection control. The registered manager provided equality and diversity training for staff and this was utilised by staff we spoke with. The course recognised the importance to respect people's individual beliefs including religion, culture and sexual orientation. This confirmed the service was able to accommodate diversity in the workplace and create a positive and inclusive environment.

The registered manager strengthened staff skills and support through supervision. Supervision was a one-to-one support meeting between individual staff and a member of the management team to review their role and responsibilities. They covered, for instance, people's care and further training needs.

The Mental Capacity Act 2005 (MCA) provides a legal framework for making 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 decisions, any made on their behalf must be in their best interests and as least restrictive as possible. The Deprivation of Liberty Safeguards (DoLS) do not currently apply in settings such as domiciliary care where people are resident in their own homes and so any deprivation of liberty may only be undertaken with the authorisation of the Court of Protection (CoP). Staff files held evidence to confirm staff received training. When we discussed the principles of the MCA with staff, we found they had a good understanding.

The service worked in partnership with health and social care professionals to ensure people with complex health needs could be cared for in their home. We saw people's care records included contact details of their General Practitioner (GP) so staff could contact them if they had concerns about a person's health.

Care plans seen confirmed people's dietary needs had been assessed and support and guidance recorded. We found by talking with staff they had completed food and hygiene training to ensure they were confident when meal preparation was needed.

People's healthcare needs were carefully monitored and discussed with the person as part of the care planning process. People we spoke with told us they were happy with the support they received with their

healthcare needs.

Care records we looked at contained consent to care forms. This stated the agreed package of care between the person and Kare Plus, such as visit times and support needs. The document was signed by each individual and a staff member to confirm they agreed to care being provided.

We looked at how the management team identified and met the support and communication needs of people with a disability, impairment or sensory loss. Care records included information about whether the person had communication needs and how staff should assist them.

We found Kare Plus had good use of technology to benefit people who used the service. For example, they had a live system to monitor the start and end of care visits. This consisted of an application on telephones, which they were required to swipe on entry to people's home. This enabled the management team to check people received their care packages and act where staff had not begun visits. They knew where each employee was and could advise people if they were going to be late.

Is the service caring?

Our findings

People supported by staff at Kare Plus told us they were treated with respect, dignity and by caring staff. A person we visited who used the service said, "They have been very good to me. They are always caring and will do anything that helps me." A friend/relative said, "[Person who used the service] is very happy with the attitude of all the staff who visit him. They are considerate and nothing is too much trouble for them."

Staff had a good understanding of protecting and respecting people's human rights. They talked with us about the importance of supporting people's different and diverse needs. Care records seen had documented people's preferences and information about their backgrounds. Additionally, the service had carefully considered people's human rights and support to maintain their individuality. This included checks of protected characteristics as defined under the Equality Act 2010, such as their religion, disability, cultural background and sexual orientation. Information covered any support they wanted to retain their independence and live a meaningful life. Staff received equality and diversity training to ensure they understood inclusion, discrimination, diversity and prejudice. The intention was to ensure staff demonstrated interactions that respected people's beliefs, values, culture and preferences.

Support planning was personalised and focused on the individual aimed at retaining people's independence. For example, risk assessments covered infringement of rights to privacy where a person was not able to maintain them. This showed good levels of guidance was made available to help staff understand and manage people's privacy. One staff member said, "It is important to treat people individually and promote their independence."

The registered manager had a policy of where possible matching people with staff who shared similar interests, hobbies and personalities. This promoted continuity of care for people and helped develop relationships. A person who used the service confirmed this happened and said, "I generally get the same carers and one or two share the same interest which is good."

There was information available about access to advocacy services should people require their guidance and support. This ensured their interests would be represented and they could access appropriate services outside of the service to act on their behalf if needed.

Care records were comprehensive and kept both in the office base and the persons home. They contained evidence the person or a family member had been involved with and were at the centre of developing their care plans. One person who used the service said, "We went through everything together and decided the best way forward." Details in care records covered what support was required to maintain their independence within their own home. The plans contained information about people's current needs as well as their wishes and preferences. Daily records completed were up to date and provided information for staff who were visiting the home. This ensured staff had information that was up to date and how the person was at the last visit.

Is the service responsive?

Our findings

Kare Plus staff and management team provided care and support that was focused on each individual and their needs and preferences. People who received a service told us how they were supported by staff to express their views and wishes. They told us the service responded quickly to ensure their wishes and preferences were met. This enabled people to make informed choices and decisions about how they wished their care to be delivered, in order to maintain as much independence as possible. For example one person said, "Sometimes I want to go out and sometimes do things at home. The staff are so flexible and fall in to what I want to do. I have to say they have been great."

Care records we checked were personalised and contained information about the person's likes and dislikes. This supported staff to get to know them and their wishes and aspirations. This included the care package agreement, people's choice about meals, activities and religious beliefs. Care records also included an assessment of people's physical, emotional and social support needs. Areas covered for example were, medication, mobility, medical history and mental health. The aim of care planning was maintaining people's independence through assessment of their skills and ability to look after themselves.

Staff told us they had regular visits by the same staff as much as possible so they were able to form relationships with people and get to know them better. One staff member said, "Continuity of staff is good for clients to get to know them."

The service had a complaints procedure which was made available to people they supported and their family members. The procedure was clear in explaining how a complaint should be made and reassured people these would be responded to appropriately. Contact details for external organisations including social services and the Care Quality Commission (CQC) had been provided should people wish to refer their concerns to those organisations. We saw complaints received by the management team had been taken seriously and responded to appropriately with details of the concern, action taken and outcomes. This was achieved in a timely manner.

People's end of life wishes had been discussed sensitively with them and their family members where appropriate and recorded so staff were aware of these. Staff spoken with confirmed they had received or were in the process of attending end of life care training.

We saw evidence of the registered manager involving people in the review of their care. This was confirmed by talking with people who used the service and their relatives/friends. One person said, "We keep in touch with the [registered manager] and get involved when we need to. We are always consulted and make changes where needed." We found the management team endeavoured to keep staff up-to-date through good communication systems.

Is the service well-led?

Our findings

People who used Kare Plus were complementary about the organisation of the service and felt there was strong leadership. One person who we visited in their home said, "A very good service that is organised and keeps me informed. The management team do a good job."

The registered manager and staff team were experienced, knowledgeable and familiar with the needs of people they supported. Discussion with the registered manager and staff on duty confirmed they were clear about their role and between them provided a well-run and consistent service.

The registered manager regularly checked on the performance of the service by undertaking regular audits to ensure everyone's safety and wellbeing. Audits covered for example, medication, care planning and training of staff. We saw action was taken to address identified issues and maintain good quality assurance at Kare Plus. For example, one audit found staff were not always following recordkeeping in medication documentation. The registered manager followed this up through staff meetings and one to one support. This showed the registered manager continued to improve the quality of the service and aim to keep people safe.

The registered manager had a live system to monitor care delivery times. The use of technology enabled the management team to check people received their agreed packages. Since registering with CQC, there had been no missed visits, which indicated monitoring procedures were successful in identifying issues before they arose.

The service worked in partnership with other organisations to ensure they followed good practice and people in their care were safe. These included, social services. Age UK, and health and social care agencies.

We noted the registered manager had a variety of systems to obtain feedback from people and relatives about the quality of their care. These included, spot checks to people's homes and telephone calls. A person who used Kare Plus said, "They check up from time to time to see everything is going well and it is." The registered manager had a system of surveys for people who used the service and staff. However these will be done annually and the first one was due to be sent out.

Staff told us the management team were supportive and they felt valued as employees of the service. Comments included, "I have been here from the start and cannot fault them. [Registered manager] is very good and helpful, always approachable." Another staff member said, "We have great support from the manager the service runs well."

The management team provided good communication systems to ensure staff were able to raise concerns or make suggestions about improving the service. This included regular team meetings and electronic messages. A staff member said, "We get together and discuss how things are going. Meetings are useful."

