

Helena McNally

# Old Friends Care

## 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

This inspection was announced and took place on 17 and 18 May 2016. We gave the provider 48 hours' of our intention to undertake the inspection. This was because the service provides domiciliary care to people in their own homes and we needed to make sure someone would be available at the office.

Old Friends Care is a domiciliary care agency registered to provide personal care to people living in their own homes. A registered provider was in charge when we inspected the service. Registered providers are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act and associated Regulations about how the service is run. At the time of our inspection 143 people received care and support services.

People said they were safe and they were cared for by staff who had a clear understanding of the risks associated with people's needs. Staff demonstrated knowledge of the different types of potential abuse and how they should respond. People had their individual risks assessed and had plans in place to manage them. Medicines were administered by care staff that had received training. The registered provider had procedures in place to monitor that people received their medicines to safely meet their health needs.

Care staff had been recruited following appropriate checks and the registered provider had arrangements in place to make sure that there were sufficient care staff to provide support to people in their own homes. People told us they received reliable care from a regular team of staff who understood their preferences for care and support.

People told us they were listened to and were involved in making decisions about their care. Care staff understood they could only care for and support people who consented to being cared for. People told us they were happy with the way in which care staff supported them to choose and prepare meals.

People told us they received support from caring staff and the registered provider arranged opportunities for people to meet up and socialise together. People told us that staff treated them with privacy and dignity and supported them to maintain their independence.

People were encouraged by the provider to express their views and give feedback about their care. People said staff listened to them and they felt confident they could raise any issues should the need arise and action would be taken.

Care staff felt supported by the manager and registered provider and that they were given opportunity to progress. The manager was committed to developing new initiatives to support the care provided to people.

The registered provider ensured regular checks were completed to monitor the quality of care that people received and look at where improvements could be made. They encouraged an open office where staff

could 'pop in at any time' and staff confirmed that they could 'count on support from the office'.

People were positive about the care and support they received and the service as a whole.

## 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 received care from staff that understood how to keep them safe and minimise the risk of potential harm.

People were supported by a sufficient number of regular staff and were happy with how staff supported them with their medicines.

### Is the service effective?

Good ●

The service was effective.

People received care in the way they wanted and from staff who were trained to support them.

Care staff had a good understanding of their responsibilities and sought people's consent before providing care.

### Is the service caring?

Good ●

The service was caring.

People received support from caring staff who provided opportunities for people to meet up and socialise together.

People were happy with the care they received and said it was provided by care staff in a way that supported their privacy and dignity.

### Is the service responsive?

Good ●

The service was responsive.

People understood they could complain if needed and how to make a complaint

People who use the service felt staff and management were responsive and there were regular opportunities to feedback

about the service.

**Is the service well-led?**

**Good** ●

The service was well led.

People and staff were complimentary about the service and had their views listened to.

Staff felt well supported by managers and had opportunity to train and develop.

People benefited from a service which was regularly monitored because the registered provider had systems in place to check and improve the quality of the service provided.

# Old Friends Care

## **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 inspection took place on 17 and 18 May 2016 and was announced. The inspection team consisted of one inspector and an expert by experience. An expert by experience is a person who has had personal experience of using or caring for someone who uses this type of care service. The provider was given 48 hours' notice because the location provided a domiciliary care service. The provider can often be out of the office supporting staff and we needed to ensure that someone would be in.

The provider had completed a Provider Information Return (PIR). This form 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 information we held about the service and looked at the notifications they had sent us. A notification is information about important events which the provider is required to send us by law. We used this information to focus our inspection.

We spoke with 20 people who used the service and one relative. We also spoke with the manager, the provider and six members of care staff. We looked at the care records of five people to see how their care was planned. We also looked at three staff files, medication records, complaints and compliments, communication records and provider checks.

# Is the service safe?

## Our findings

All people we spoke with told us they felt safe with the care staff coming into their homes and providing care. One person said "I feel safe.....I've no worries." Another person told us, "Staff call out when they arrive and before they come in so I know they are here." One relative told us they were assured staff kept their family member safe, they said, "Staff wear aprons and gloves and wear their ID badges at all times so we (person using the service and relatives) both feel safe."

All staff we spoke with demonstrated a good understanding of the types of abuse people could be at risk from and confirmed that they had received training in safeguarding people. They were clear about the steps they would take if they had any concerns. Staff told us they were confident to report any concerns with people's safety or welfare to the manager and that action would be taken. One member of staff told us of a concern they had raised. They said that action had been taken and the situation resolved.

All staff we spoke with were able to describe the different risks to people and how they supported them. One member of staff said, a person they supported required equipment to aid their mobility. They told us, "Two carers attend the call; we talk to each other and look at safety, for example, the environment. We refer to the care plan and risk assessment." People's risks had been assessed when they first received care from the service and had then been reviewed regularly and changes recorded in care plans. Staff said the assessments gave them the correct level of information to provide care and support.

People receiving care told us there were sufficient numbers of staff available to meet their needs and staff confirmed this too. People told us they had regular carers. One person, "I get the same member of staff six days a week. I always know who is coming." Another person told us, "I have the same carers unless they are taking holiday or are off sick but I know all the carers so it's OK." One member of staff said, "There's enough staff and we all cover for one another. It's a good team. Very professional."

The registered provider used a planning system to ensure staff cover. The system recorded all care calls and alerted office staff if a visit had not been made enabling them to take action to ensure people received the support they needed.

We saw records of employment checks completed by the service to ensure staff were suitable to deliver care and support before they started work. The provider had made reference checks with previous employers and with the Disclosure and Barring Service (DBS). The DBS is a national service that keeps records of criminal convictions.

Some people told us they received support with their medicines. One person said, "Medication is good, I've got no issues or concerns." Staff confirmed they had received medicines training and were able to give us examples of the actions they had taken when someone refused their medicine. One member of staff told us, "People have the right to refuse but I would explain why it was important," and that they would notify the office and ensure it was recorded. Checks of the medicines record sheets were made to ensure staff had correctly recorded the medicines they had given to people.

## Is the service effective?

### Our findings

All people we spoke with told us staff knew how to support their needs. One person said, "Staff are trained, they know what they are doing." Staff we spoke with explained training helped them to do their job. All staff we spoke with confirmed access to training was good and were able to give an example of how training had impacted on the care they provided. For example, one member of staff explained how dementia training helped them develop awareness, understanding and skills to support people living with dementia.

One member of staff told us they were new to care and their induction training had been, "Very good." They said they had shadowed staff until they were confident. The registered provider and manager showed us the passport system they used for new staff. A record was held for each member of staff giving details of their progress. This gave staff and managers clear information on the level of care and support they could provide to people at each stage of their induction.

All staff told us they received regular supervisions and attended staff meetings, which gave them the opportunity to discuss any issues or request further training. One member of staff told us, "The meetings are two way, everyone gets involved." In addition regular spot checks were made by team leaders to observe their care practice. One member of staff said, "Spots checks are made by the team leaders and include peoples' feedback."

The 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. We checked whether the service was working within the principles of the MCA. Any applications to deprive someone of their liberty for this service must be made through the court of protection.

We looked at the way the registered provider was meeting the requirements of MCA. The manager was clear that all people using the service were able to make choices and said, "All our clients are able to provide their consent". The registered provider had not made any applications to the Court of Protection for approval to restrict the freedom of people who used the service. They were aware of this legislation and were happy to seek advice if they needed to.

Staff we spoke with told us they were aware of their responsibilities to ensure people's consent to care and treatment was sought and recorded. This was confirmed by people we spoke with, one of whom commented, "Staff always ask before they take me to the bath or shower and if I am ready." Another person said, "They (staff) offer the right support in regards to my preferences and choices."

Some people were being supported by staff to eat and drink enough to keep them well. People told us staff



would give choices and ask what they would like to eat and made sure they had plenty to drink. One member of staff said, "I always ask what they want. I wouldn't dream of not asking." One person said staff knew how to support them with their meals, for example by cutting up their food. Staff were aware of people's individual nutritional needs. One member of staff told us they were working with one person as their nutritional needs changed, they told us, "Its long term to get them eating again, starting with a soft foods and making sure I cut food up."

People told us staff would help them access medical help if they needed. One person said when they were unwell staff had contacted their GP for them. One staff member told us about following training on skin care, they had identified when someone was developing sore skin and had contacted the district nurse who then supported the person. Staff recorded when they had contacted health professionals, for example, GP and district nurses, in the support of people's healthcare needs.

## Is the service caring?

### Our findings

All of the people we spoke with told us they felt staff were caring. One person said, "The (staff) are lovely, sometimes we have a laugh and joke together." Another person told us, "The (staff) are very caring and supportive." One person told us of the relationship they'd developed with staff, they said, "Some of the carers (staff) feel like they are part of our family."

All people we spoke to told us that the service was caring. For example, we heard how the manager and registered provider arranged social get-togethers to give people a chance to meet up and socialise. We saw photographs of people enjoying Christmas and Easter celebrations. One member of staff told us, "The Christmas party for people is such a lovely idea and people really enjoy it."

Staff we spoke with said they were motivated to provide good care. One member of staff told us, "I enjoy working here, I like helping people". Another member of staff said when they supported people, "I think of my mum and what I'd want for her." Staff spoke in a caring way about the people they supported. They told us by providing care to the same people they could build up relationships and get to know them and their families. A member of staff said, "You get a bond with people (using the service)" and "I've never been into a call where staff aren't liked."

All of the people we asked told us staff were considerate and treated them with dignity and respect. One person told us, "Staff from Old Friends care are polite and respect me." People told us staff respected their homes and belongings. One person told us, "(Staff) keep my belongings safe." Another person commented, "They leave my house nice and tidy."

One person told us, "I am quite independent and they (staff) always encourage me." A relative commented, "My [family member's name] mobility is quite poor, staff encourage them to do regular basis exercise to keep fit." Care plans gave information to staff on maintaining a person's independence and ensuring they treated people with dignity and respect. Staff told us how they respected people as individuals and how they involved people in their day to day care and which promoted their independence.

Staff we spoke with also shared their understanding of caring for someone with dignity. They told us about practical ways in which they maintained a person's dignity. One staff member listed things they did such as closing curtains when people were getting dressed as well as ensuring doors were closed when supporting people with personal care.

## Is the service responsive?

### Our findings

All people we spoke with said they received the care they wanted. People told us they were happy with the service and staff understood their needs and they felt comfortable to discuss or share their day to day tasks with them. One person told us "I've built up good relationships with the staff and I share experiences with them and laugh together."

People told us that they were involved in their planning their care and any reviews. One person told us, "Senior staff arrange meetings and come and visit...to discuss if there are any changes or progress to my care plans, so they be can updated where required."

Care records included a record of 'This is me' giving staff information about the person receiving care including their personal history. The service also provided a brief 'This is me' information sheet to each person on the member of staff providing care, the manager told us this was to let people know a little more about the member of staff. One member of staff said the form was a good starting point for conversations with people.

Staff said good communication systems were in place to advise them of any changes. Once they received an update they had to confirm with the office it had been received and read. One member of staff told us office staff were quick to update care staff. They said, "Office staff are very responsive." They told us of an example when a person's care was changed overnight to reflect a change in their needs. The member of staff said, "Things were put in place very quickly and all staff advised."

All staff told us care plans included the most recent information and these would be updated to reflect any changes in a person's care. One relative told us their family member had a personalised plan of care to meet their individual needs. We saw that when a new medication had been prescribed to a person receiving care, records had been updated and all staff that supported the person were advised of the change.

Staff demonstrated a detailed knowledge of the people they cared for and how they supported them in the way they wanted to be supported. One person said, "We swap stories and chat during my calls, because that's the way I like it." Another person commented, "Staff encourage me to share what I like and dislike so they can offer the right support." "

People told us they felt listened to. One person told us, "The staff have a good joke and laugh with me and I feel more comfortable sharing my problems with staff and they do listen to me." Another person told us, "They are quite flexible if I ask them to come late." A relative commented that if they requested a member of staff to come at a different time, "They do, so we feel listened to."

The registered provider had a procedure for people to raise complaints should they have them. All the people we spoke to told us they had not had reason to complain but were aware of how to raise concerns. One person told us, "I would easily contact them without any hesitation." Another person told us, "I would complain if I needed but I've had no problems it's a good service." People we spoke with told us they felt

assured that action would be taken as necessary.

All staff we spoke with told us they knew how to raise concerns or complaints on behalf of people receiving care and support. There had been one written complaint over the previous twelve month period, which we saw had been logged, investigated and responded to.

## Is the service well-led?

### Our findings

All people we spoke with were very positive about the service they received. One person told us, "This is an excellent service, I am happy with it, it keeps me going." Another person commented, "It's a great service, I couldn't ask for better." People told us that they knew the managers and they were very approachable. One relative said, "Staff and manager are a part of my family and I do respect them. When the manager visits us we talk openly. They are on the ball".

Staff also spoke positively of the management. Three members of staff told us they felt the service was well managed. One member of staff said, "It's (the service) well managed. It all fits into place together." Another said, "I think it's a good company, I really do." All staff told us they felt listened to and supported. For example, one member of staff explained how they received support when they needed it. They said, "I telephoned the team leader when I had a concern about a call. She met me there and supported me."

The provider told us the service had an 'open door' policy. Staff could pop into the office at any time to discuss any issues or just talk socially. On the day of our inspection we saw three members of staff come into the office and speak to the office staff and the provider. One member of staff we spoke to said, "They (managers) encourage staff to pop in." Another member of staff said, "It's an open office, I pop in quite often."

All staff told us they felt able to tell management their views and opinions at staff meetings. One staff member said, "This company is tailor made for me. I have found my perfect fit". Another member of staff told us, "All the managers have been carers, so they understand." A further member of staff said, "Everything is very professional. If you want confidentiality they are good here."

The manager felt that all staff worked well as a team. Staff confirmed this, for example, one member of staff told us, "It's a good team. It's inclusive of everyone." Another member of staff said, "A strength of the service is the superb carers. Lots of them are one in a million." They also confirmed they were well supported by the provider who they told us was, "Very hands on and supportive".

We saw that the service had received a number of compliment cards from people and their relatives. In turn the registered provider had introduced a recognition programme for staff. When staff were recognised as providing good care or had done well in training etc; a certificate of recognition was awarded. One member of staff said, "I feel valued. I get feedback from the office and feel valued by the clients," and showed us the certificate of appreciation they had received that week.

The provider told us some of the improvements made, for example an interactive rota day. They advised communication was a cornerstone of the organisation. Staff attended the office once a fortnight on interactive rota day to pick up their rota and agree any changes and amendments. The registered provider stated that although the process could be automated they found staff coming into the office was a more personal and effective way of managing the rotas. One member of staff confirmed this and said, "The rota day works for me, I prefer to come in and it's face-to-face."

The provider said the rota day was also part of staff welfare so they could pick up any issues and resolve them quickly. It also gave them chance to share information. For example, each rota day staff were asked to read one of the organisational policies and sign to say they had read and understood it. The provider advised this helped keep staff knowledge up-to-date.

Staff told us they completed questionnaires to give feedback on various aspects of the service. One member of staff said, "They (managers) like feedback, we (staff) are given questionnaires." Another member of staff told us, "They are always looking for ways to improve things and asking for our opinion." Staff also told us managers distributed quizzes to check staff knowledge. For example, at Easter there was a quiz on medication with staff winning Easter eggs prizes.

The registered provider had looked at the best way to gain information on user satisfaction. Previously postal questionnaires and feedback cards had given low response rates. The service was currently completing telephone questionnaires and visits to gain user satisfaction. The manager said this would be reviewed to ensure it was effective.

The registered provider completed a number of monthly checks to assure themselves of the quality of care being delivered. We saw that if any improvements were identified these were noted and actioned. We saw that management meetings were also held weekly. The meetings were with the provider, manager and team leaders. We viewed minutes that showed how spot checks led to staff recognition certificates for two staff and feedback from new starters was shared.

The manager and registered provider kept their knowledge up to date by regularly attending events organised by the local authority. The manager told us about their ideas for improving the service including the introduction of dementia packs for people living with dementia. The packs were being developed to include pictures and reminiscence items as well as information on dementia support groups from Age UK.