

Macmace Limited

# SureCare (Fylde & Wyre)

## 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

What life is like for people using this service:

People who used the agency and relatives told us they felt confident in the management team and how the service operated. They told us good staffing levels afforded people responsive and dignified support.

The management team had safe recruitment procedures to ensure staff were suitable to work with vulnerable adults. We saw staffing levels matched each person's requirements to maintain continuity of care. One person who used the service said, "A lovely agency I am very happy and feel safe with the staff who help me"

Staff responsible for assisting people with their medicines had received training to ensure they had the competency and skills required.

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.

Care plan information focused on a person-centred method of supporting people. Also, information contained what support was required and consent to care forms had been signed by people who received a service from SureCare.

People supported by the service told us they were treated with respect and by caring staff. For example, positive comments included, "A lovely agency I am very happy with the kind, caring people they send me." Also, "Always courteous and respectful when they are in my home."

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 supported this practice. We discussed the principles of the MCA and consent with staff and found they had a good awareness.

We found SureCare had systems in place to ensure they met people's diverse and cultural needs. Those who used the service and relatives told us staff and the management team checked whether staff respected their customs and their way of life. Care records we looked at evidenced people and where appropriate relatives were fully included in their support planning.

People told us and staff confirmed to us there were enough staff on duty to ensure people received care in a timely way in their own homes. In addition, sufficient staff were deployed so that people had opportunity to go out in the local community if this was assessed in their care plan."

The registered manager and management team used a variety of methods to assess and monitor the quality of the service. These included staff meetings, spot checks, auditing of the service and surveys to seek people's views about the service provided.

The service worked in partnership with other organisations to ensure they followed good practice and people in their care were safe.

There was a complaints procedure which was made available to people and their family when they commenced using the service. People we spoke with told us they were happy with the support they received.

More information is in Detailed Findings below.

Rating at last inspection:

This was their first inspection.

About the service:

This service is a domiciliary care agency. It provides personal care to people living in their own houses and flats in the community. It provides a service to older adults. At the time of the inspection 44 people used the service. The office is based in Blackpool and provides services to people who live in Blackpool, Fleetwood, Fylde & Wyre and surrounding areas. The service provides care and support varying from short visits to 24 hours a day support.

Why we inspected:

This was a planned first inspection of the service since their registration with CQC.

Follow up:

We will continue to monitor intelligence we receive about the service until we return to visit as per our re-inspection programme or if any issues or concerns are identified.

## The five questions we ask about services and what we found

We always ask the following five questions of services.

### Is the service safe?

The service was safe.  
Details are in our Safe findings below.

Good ●

### Is the service effective?

The service was effective  
Details are in our Effective findings below.

Good ●

### Is the service caring?

The service was caring  
Details are in our Caring findings below.

Good ●

### Is the service responsive?

The service was responsive  
Details are in our Responsive findings below.

Good ●

### Is the service well-led?

The service was well-led  
Details are in our Well-Led findings below.

Good ●

# SureCare (Fylde & Wyre)

## Detailed findings

### Background to this inspection

**The 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.

**The inspection team** • Consisted of an adult social care inspector.

**Service and service type** • This domiciliary service provides personal care to people living in their own homes and flats.

The service had a manager registered with the Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

**Notice of inspection** • This comprehensive inspection visit took place on 18 December 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.

**What we did preparing for and carrying out this inspection** • 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 SureCare and visited a home of a person who used the service. They included 6 people who used the service, the registered manager, the provider/owner of the franchise and the training and development officer. In addition we spoke with a care co-ordinator, six support staff and two relatives of people supported by SureCare.

We looked at records relating to the management of the service. We did this to ensure the management team had oversight of the service and they could respond to any concerns highlighted or lead the agency in ongoing improvements. We also looked at staffing levels and recruitment procedures for staff and focussed on how staff provided care within people's homes.

# Is the service safe?

## Our findings

Safe – this means people were protected from abuse and avoidable harm

People were safe and protected from avoidable harm. Legal requirements were met.

### Systems and processes

- The service had safe, effective safeguarding systems in place and all staff spoken with had a good understanding of what to do to make sure people were protected from harm. Staff demonstrated a good level of awareness about protecting people from poor practice or abuse. One staff member said, "Training in safeguarding is updated all the time it is very important to this agency that staff are aware of the signs of abuse."
- We found care records looked at included risk assessments that covered mobility, health and safety, the environment, falls and medication. Information contained details comprised of the person's level of independence and action to support them. Records were signed by people who used the service or a relative to ensure their understanding of protocols to reduce risk.

### Assessing risk, safety monitoring and management

- Staff understood where people required support to reduce the risk of avoidable harm. Care plans we looked at contained explanations of the control measures for staff to follow to keep people safe and reduce risk of accidents and incidents.

### Staffing levels

- We looked at how the service was staffed and found appropriate arrangements were in place. People supported in the community told us they were always aware of personnel who would be supporting them. They told us the agency where possible maintained the same carers which helped continuity. A relative said, "They are very good at keeping to the same carers and that was a good thing and made us feel safe in the knowledge [relative] was settled and safe."
- Staffing levels matched each person's requirements and sickness and staff leave was managed between the team to maintain continuity of care. When we discussed this with people and relatives, they confirmed they had the right support and staff who understood their needs.
- The management team had good systems for recruiting staff in place. Staff recruitment records seen were consistent and held required information. This included professional references and criminal record checks from the Disclosure and Barring Service (DBS). In addition, the registered manager had details about each person's full employment history to assess reasons for any gaps. Staff received a full induction following their recruitment to help them settle in their new roles. Staff we spoke with confirmed this. This showed the management team followed safe procedures to ensure staff were suitable to work with vulnerable adults.

### Using medicines safely

- We looked at medication records and found people's medicines to be managed safely. Staff who administered medication did so at the correct time they should and had received appropriate training. One staff member said, "Anyone giving out medicines has received appropriate training."

- Medicines were managed in line with The National Institute for Health and Care Excellence (NICE) national guidance. This showed the service had systems to protect people from unsafe storage and administration of medicines.
- The registered manager regularly completed medication audits to check their procedures and processes were safe.

#### Preventing and controlling infection

- If required staff told us there was sufficient personal protective equipment, such as disposable gloves and aprons to maintain good standards of infection control.
- The registered manager ensured infection control procedures were maintained with effective staff training. People who used the service we spoke with told us staff consistently washed their hands before and after providing personal care for them.

#### Learning lessons when things go wrong

- We looked at how accidents and incidents were managed by the management team. They detailed the nature of the incident, time and action taken to resolve it. When accidents occurred any accident or 'near miss' was reviewed so that lessons could be learnt and to reduce the risk of similar incidents.



# Is the service effective?

## Our findings

Effective – this means people's care, treatment and support achieved good outcomes and promotes a good quality of life based on best available evidence.

People's outcomes were consistently good and people's feedback confirmed this.  
Staff skills, knowledge and experience.

Staff skills, knowledge and experience.

- Staff records showed personnel received training that was relevant to their role and enhanced their skills. This was confirmed by records we looked at and discussions with staff. A staff member said, "Training events are very good and lots of it. The manager always asks if anything we need regarding specific training courses. They always support the staff to attend courses."
- SureCare employed a designated training officer and provided in house courses for staff to attend. These included, safeguarding, moving and handling and infection control. Staff also told us they were supported to improve their learning by undertaking professional qualifications.
- The management team strengthened staff experience and support through supervision and individual informal meetings. Supervision was a one-to-one support meeting between individual staff and a member of the management team to review their role and responsibilities. Meetings were provided regularly and covered, for example, professional and personal progress, and training needs.

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

- Care plans we looked at showed expected outcomes were identified and ensured promoting people's independence would be a priority.
- Care plans detailed times and tasks required when visiting people's homes. They were regularly reviewed and updated when circumstances changed. Records looked at and discussions with staff and people who used the service confirmed this.

Supporting people to eat and drink enough with choice in a balanced diet

- Care plans seen confirmed people's dietary needs had been assessed and support and guidance recorded as required.
- People we spoke with told us they were happy with the support they received with their meal preparation.
- Staff informed us they had completed food and hygiene training to ensure they were confident with meal preparation.

Staff providing consistent, effective, timely care

- We found evidence the registered manager and management team was referencing current legislation, standards and evidence based on guidance to achieve effective outcomes.
- People received effective support from staff at SureCare because they were supported by trained staff who had a good understanding of their needs.

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

- We looked at how the service gained people's consent to care and treatment in line with the Mental Capacity Act (MCA). We saw written consent to care and support had been recorded on people's care records by the person.
- The Deprivation of Liberty Safeguards (DoLS) do not currently apply in settings such as domiciliary care where people are resident in their own homes. However, the management team were aware of (DoLS). Staff demonstrated a good awareness of related procedures We found staff had MCA and DoLS training to underpin their knowledge and skills. People we spoke with confirmed staff did not limit their freedom.

#### Adapting service, design, decoration to meet people's needs

- We looked at what arrangements the management team had taken to identify record and meet communication and support needs of people with a disability, impairment or sensory loss. Care plans seen identified information about whether the person had communication needs. These included whether the person required easy read picture format or large print reading.

# Is the service caring?

## Our findings

Caring – this means that the service involved people and treated them with compassion, kindness, dignity and respect.

People were supported and treated with dignity and respect and involved as partners in their care.

Ensuring people are well treated and supported

- People and relatives, we spoke with and visited confirmed staff were kind, respectful and sensitive to their needs. For example, we received only positive responses about the attitude and performance of staff at SureCare they included, "A lovely agency I am very happy with the kind, caring people they send me." Also, "Always courteous and respectful when they are in my home."
- Care records we looked at contained information in relation to each person's dignity and privacy. It was evident care records and the attitude of staff was to ensure support planning was personalised and focused on retaining and promoting people's independence. A staff member said, "We do try and make people more independent it does make them feel better."

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

- Care records we looked at contained evidence the person who received care or a family member had been involved with and were at the centre of developing their support plans. Also, what support was required to maintain and promote their independence within their own home.
- Records contained information about people's current needs as well as their wishes and preferences.
- 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.

Respecting and promoting people's privacy, dignity and independence

- It was clear from our observations when we visited a private home of one person and discussion with people who used the service, staff showed a good awareness of the importance of treating people with respect and maintaining their dignity.
- 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.

## Is the service responsive?

### Our findings

Responsive – this means that services met people's needs.

People's needs were met through good organisation and delivery.

#### Personalised care

- SureCare staff and management team provided care and support that was focused on individual needs, choices and routines of people they cared for. People who used the agency told us this. For instance, a relative said, "They are very good and make sure it suits myself and [relative] in terms of support they provide."
- Care was personalised and centred on the individual. For example, details in care records highlighted how people wanted to spend their time and what their interests were and choices they preferred. A staff member said, "It is good having that information when we visit homes of people to build up a friendship."
- People we spoke with told us how they were supported by staff to express their views and wishes. This enabled people to make informed choices and decisions about how they were cared for and at what times suited their individual circumstances. For instance, one person who used the agency told us they were introduced to people they had similar interests to. They went through the best times to suit their needs and choices where possible. The person said, "We shared our views and what best would help me. That is what I like with the agency."

#### End of life care and support

- The service is a domiciliary care agency. The aim of the service is to make independent living a reality by working with the people to overcome the obstacles of day-to-day life. The registered manager told us the service at present does not support people with end of life care. The service had provision for staff training in 'end of life care'.

#### Improving care quality in response to complaints or concerns

- We saw information was made available to people that described how to make a complaint if they wished and relevant steps to follow. 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

# Is the service well-led?

## Our findings

Well-Led – this means that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

The service was consistently managed well led. Leaders and the culture they created promoted high-quality, person centred care.

Provider plans and promotes person-centred, high-quality care and support, and understands and acts on duty of candour responsibility when things go wrong

- People who received care from the agency and relatives were complimentary about the registered manager and management team. They said they were approachable and available at all times and operated an organised service.
- The registered manager and management team demonstrated a commitment to provide person-centred, high-quality care by engaging with everyone using the service and outside agencies who had involvement in SureCare.

Managers and staff are clear about their roles, and understand quality performance, risks and regulatory requirements

- This was the first inspection for SureCare since their registration. We had received notifications of incidents and events that required attention. This showed the management team were aware of their responsibilities and knew their regulatory requirements. A senior staff member said, "We know what to do when reportable events occur."
- We found the service had clear lines of responsibility and accountability. The registered manager, management team and staff 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. For example, a staff member commented, "A fantastic management team they are very supportive and easy to get along with."

Engaging and involving people using the service, the public and staff

- The service had systems and procedures in place to monitor and assess the quality of their service. These included seeking views of people they support through satisfaction surveys that at the time of the inspection the process was ongoing. Surveys were distributed to people who they supported and relatives. Also, staff completed questionnaires in relation to the service, management and how they were treated. So far there had been 28 responses from people the service supported. They were positive and included comments such as, 'I am very satisfied with the carers and care.' Another comment included, 'Everything is excellent.' The registered manager informed us all would be examined and where any negative comments were made, they would be analysed and acted upon.
- Staff meetings were held regularly and regular spot checks at people's homes carried out to ensure the service was monitored and continued to develop. Staff told us they were useful and well attended and gave them opportunities to suggest ideas or voice opinions on how the service operated.

#### Continuous learning and improving care

- The management team completed a range of quality audits to ensure they provided an efficient service and constantly monitored SureCare performance. These for example included, medication, care records and spot checks. This meant improvements could be made to continue to evolve and provide a good service for people.

#### Working in partnership with others

- SureCare management team worked in partnership with other organisations to make sure they followed current practice, providing a quality service and the people in their care were safe. These included social services, healthcare professionals and social workers.