

Maiden Care Services Limited

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Inspection report

Business And Technology Centre
Bessemer Drive
Stevenage
Hertfordshire
SG1 2DX

Tel: 01438310034

Website: www.maidencare.co.uk

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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?

Requires Improvement ●

Summary of findings

Overall summary

About the service

Maiden Care Service is a domiciliary care service. The service is registered to provide care and support for older people and younger adults who may experience dementia, sensory impairments, learning disabilities, physical impairments or mental health issues.

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

People were safe and protected from avoidable harm because staff understood how to identify and report any concerns relating to the risk of abuse. Risks to people's health, safety and well-being were assessed, and measures put in place to remove or reduce the risks. People were supported by staff who had been safely recruited.

People's medicines were managed safely. Staff received appropriate training and had their competency assessed to help ensure they were sufficiently skilled and knowledgeable in this area. Staff had received training in infection control practices and personal protective equipment such as gloves and aprons was provided for them. The management team took appropriate actions following any incidents and learning was shared with the staff team.

Before care delivery started the provider completed assessments to help make sure people's needs could be met by Maiden Care Services Limited. Care plans were developed from these assessments for each person's identified needs and staff had clear guidance on how to meet those needs. Staff received training and support to enable them to carry out their roles effectively.

People said staff prepared simple meals for them as needed and encouraged them to take fluids to maintain their health and wellbeing. Staff and the registered manager knew people well and were able to promptly identify when people's needs changed, and they sought professional advice appropriately. Staff were proactive in identifying if people were unwell and contacted appropriate healthcare professionals as needed. People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

People and their relatives praised the kind and caring nature of staff. People received consistent care from a small team of staff. Staff helped to relieve people's distress and discomfort, and supported people to maintain personal relationships. People knew about their care plans and could decide what care and support they needed. People's records were held securely in a locked cabinet within a locked office to help promote confidentiality.

People told us they had not had cause to complain but would be confident to raise any concerns with the management. Everyone we spoke with during this inspection was satisfied with the care and support they received. The registered manager was committed to providing high quality care to the people they

supported as well as the staff team and understood their responsibilities under the Duty of Candour. People, their relatives and staff members spoke highly of the registered manager and said they were always available and supportive. People told us that they were often asked for their views about the quality of the service.

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

Rating at last inspection

The last rating for this service was Good (published 05 April 2017)

Why we inspected

This was a planned inspection based on the previous rating.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

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 effective findings below.

Is the service effective?

Good ●

The service was effective.

Details are in our effective findings below.

Is the service caring?

Good ●

The service was caring.

Details are in our caring findings below.

Is the service responsive?

Good ●

The service was responsive.

Details are in our responsive findings below.

Is the service well-led?

Requires Improvement ●

The service was not always well-led.

Details are in our well-Led findings below.

Maiden Care Services Limited

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 undertaken 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. Not everyone who used the service received personal care. 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. At the time of this inspection five people were receiving the regulated activity of 'Personal Care'.

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

We gave the service 48 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the provider or registered manager would be in the office to support the inspection.

Inspection activity started on 09 October 2019 and ended on 14 October 2019. We visited the office location on 09 October 2019.

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. The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report.

During the inspection

We spoke with one person who used the service and relatives of three people who used the service about their experience of the care provided. We received feedback from three members of staff including the registered manager and care workers.

We reviewed a range of records. This included two people's care records and multiple medication records. We looked at two staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at training data and quality assurance records.

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 the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- The registered manager operated effective systems to help protect people from the risk of harm or abuse. Staff received training and were confident about how they would report any concerns both internally to the management and externally to local safeguarding authorities.
- The registered manager understood their responsibilities to safeguard vulnerable people from abuse and sent us statutory notifications to inform us of any events that placed people at risk.
- People and their relatives told us that staff provided safe care for people. One relative said, "I would say the service provided is definitely safe, I have seen this myself on several occasions." Another person's relative said, "[Person] says they feel very safe when the staff are supporting them."

Assessing risk, safety monitoring and management

- Risks to people's health, safety and well-being were assessed, and measures were put in place to remove or reduce the risks. However, this was not always recorded, and care plans did not always provide the detail needed for staff to have a clear understanding of the risks associated with people's moving and handling needs for example. The registered manager acknowledged this and assured us that this would be rectified immediately.
- People's care plans were kept under review to help ensure people's safety and wellbeing was promoted.
- The registered manager helped ensure people received appropriate support in the event of an emergency. The management team provided a 24 hour on-call service and provided emergency cover if needed for staff sickness or other such events.

Staffing and recruitment

- Recruitment checks undertaken helped ensure that staff were suitable to work at the service. Although the management of recruitment process had not always been robust, the registered manager had satisfied themselves that staff employed were suitable to work in a care setting and did not pose any risk to people's safety.
- The registered manager told us they had experienced significant challenges in respect of staff recruitment and retention in the past year. The registered manager had taken proactive action to secure staff from another care agency to help maintain the service provided for people.
- People said there were sufficient staff available to meet their care needs. One relative told us, "[Person] has a small team of staff that provide care. Staff have never been late and have never missed a care call." Staff told us there were enough staff to meet people's needs and that they were deployed effectively. A staff member told us, "I feel there are enough staff to meet the needs of the service users we have at this time. The manager is very hands on when needed. I feel she works hard to make sure all care is covered and goes above and beyond to make sure of this."

Using medicines safely

- Staff received training in the safe administration of medicines and had their competency assessed to help ensure their practice was safe.
- Thorough audits of medication were completed. The registered manager showed us that where errors, such as staff not signing for administering a medicine, occurred these were identified and dealt with immediately.
- A relative told us that staff supported a person safely with their medicines and there had not been any concerns.

Preventing and controlling infection

- Staff were provided with training and personal protective equipment such as gloves and aprons to help promote effective infection control. The registered manager and senior care staff assessed practice in this area at spot checks and whilst delivering care themselves.
- People and their relatives told us that staff promoted good hygiene practices.

Learning lessons when things go wrong

- The registered manager had no 'lessons learned' to share as there had been no complaints or incidents to take learning from. However, they described to us how they had used the same approach to help safeguard a person living with a progressive health condition. The registered manager had identified potential concerns, involved external professionals and attended meetings with relevant parties to help ensure the person's needs were met appropriately and safely.

Is the service effective?

Our findings

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

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same. This meant people's outcomes were consistently good, and people's feedback confirmed this.

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

- People's needs were assessed before they started to use the service. Assessments detailed people's overall support needs and individual preferences. These assessments formed the basis of people's care plans and risk assessments and were further developed as staff gained a deeper understanding of individuals.

Staff support: induction, training, skills and experience

- Staff received training in areas such as safeguarding, moving and handling and the Mental Capacity Act. Staff demonstrated a good understanding of these topics. One staff member told us, "I am satisfied with the training and support I have received from the management at Maiden Care. I am always offered courses or asked what I would like to do next when I pop into the office."
- Inductions for new staff were thorough and staff knowledge was checked by senior staff during shadow shifts prior to the staff member working with people unsupervised. Staff received supervision and competency observations to help ensure that they had the knowledge to perform their job roles.
- Staff told us they had robust support from the registered manager.
- People and their relatives praised the staff team for their skills and knowledge. A relative told us, "Feedback from [person] about the skills and knowledge of staff is positive. They do what they need to do to keep [person] safe and well cared for. For example, staff called me when they found that [person] had fallen. They didn't try to move them in case of injury, they called an ambulance."

Supporting people to eat and drink enough to maintain a balanced diet

- People who used the service and their relatives said that staff supported people to eat in a safe and effective manner.
- People's dietary needs and requirements were identified in their care plans and staff had a good understanding how to support people with these.

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- Staff and the registered manager worked well with external professionals for the benefit of people who used the service. These included GPs, occupational therapists and district nurses. Information was shared with other agencies if people needed to access other services such as hospitals. People's relatives told us the staff were proactive in noting when people may be unwell and contacting family members to share their concerns.
- The registered manager told us that they changed the times when people received their support so that

they could support them to health appointments if this was the person's choice.

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

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.

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. When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty. We checked whether the service was working within the principles of the MCA.

- People told us that staff always asked for consent when supporting them. We saw that people had been asked for consent to be supported in line with their care plans and risk assessments.
- Staff received training in the Mental Capacity Act and had a good understanding of how to put this in to practice. The registered manager demonstrated a clear understanding of the Act and advised they would access support for people from external advocacy services should the need arise.

Is the service caring?

Our findings

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

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; respecting equality and diversity

- People and their relatives praised the staff team for the care and support they provided. A person who used the service told us, "The care staff I see from Maiden are very caring and responsive, they are always on time and I always know who is coming to me." A relative told us, "[Person] seems really pleased with the support they receive. There are just two or three regular staff involved in [person's] care which is helpful to build a regular routine. [Person] has a very nervous nature so familiar staff are important to them."
- The staff and management took actions to improve outcomes for people. For example, the management team had identified that equipment used to support a person to transfer was draining the person's energy and making them tired for the rest of the day. This also meant that two care staff were needed to facilitate the transfer resulting in a higher financial cost for the person. The management team worked with external professionals to source alternative electrical equipment which was safe to use by one staff member. The management reported this achievement had enhanced the person's life.

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

- People's care plans showed that they were consulted about changes to their care and that these were documented. Regular reviews of people's support involving people, their relatives and other professionals took place.
- People could make choices about the time their care was delivered, how it was delivered, and choices about the staff members delivering the care.

Respecting and promoting people's privacy, dignity and independence

- Staff had a good understanding of people they supported. Staff took time to get to know people's likes and dislikes, their pasts and interests and incorporated these into their care.
- People and their relatives said that staff promoted people's privacy, dignity and independence. One relative said, "The staff are a real comfort. I live some distance away. Knowing they are seeing [person] daily gives me peace of mind. The staff are kind, caring and conscientious towards [person]. They chat and engage well with them." Another relative told us, "We are receiving good care. If we were to lose the personalities of the staff supporting [person] it would be a significant loss for us all."

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs.

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- People told us the care they received met their individual needs. Care staff were able to tell us about the personalised care and support they provided for people.
- People's care plans included personalised information to support the staff team to deliver consistent person-centred care. For example, one care plan viewed detailed how a person enjoyed having their hair brushed and liked to have lip balm applied after cleaning their teeth.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- The registered manager reported that people who used the service at this time did not have communication needs resulting in them needing information provided in alternative formats. However, the registered manager undertook to investigate available resources so that they could provide information in more accessible formats. These included large print and audio so that people with disabilities, impairment or sensory loss could be provided with information that they can easily read or understand.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- The service does not provide support with activities and interests at this time. However, the registered manager reported this support could be provided according to people's wishes and preferences.

Improving care quality in response to complaints or concerns

- The provider had a complaints and compliments policy, people and their relatives told us they had a copy of the policy in their homes to access if needed.
- The registered manager told us they had not received any formal complaints. However, during the course of a routine spot check a person had shared with the registered manager that they found a specific staff member was too loud in their approach. The registered manager took immediate action to allocate a different care worker for this person to address their concern.
- People and their relatives told us that any concerns or complaints were responded to promptly and to the complainant's satisfaction. For example, a person had not engaged well with a specific staff member. The registered manager made changes to the staff rota which meant the person had a different staff member attend their needs. It was clear from subsequent follow up information that this action had a positive

impact.

End of life care and support

- The staff team were not supporting anyone at End of Life at the time of this inspection. The registered manager advised that some of the staff team had received 'End of Life' training and this would be rolled out across the staff team when the need arose.

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 Requires Improvement. At this inspection this key question has remained the same. This meant the service management and leadership was inconsistent. Leaders and the culture they created did not always support the delivery of high-quality, person-centred care.

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

- The registered manager undertook audits of care plans, medicines and staff files. Audits had not been effective in identifying some of the recording shortfalls we found. For example, copies of identity documents for employed staff had not always been signed and dated to indicate who had seen the original and when. Dates of applicants' employment history didn't always enable the registered manager to effectively explore gaps in work records. Where gaps in employment histories were identified or concerns noted within criminal record checks, the registered manager shared the actions taken however, these weren't always clearly documented, and risk assessed.
- The registered manager explained they had experienced significant challenges in respect of staff recruitment and retention in the past year. This had resulted in them attending care calls daily to maintain continuity of people's care and support. They acknowledged this was not in the best interest of the business as it meant their time to attend to management tasks had been significantly impaired.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- The registered manager had a good understanding of their legal and ethical responsibilities towards the people they supported and had a passion for delivering person-centred care.
- Relatives told us they felt the service was well managed in the interests of the people who used it. One relative said, "I think the service is well led and well organised. I would recommend them to anyone looking for care in their own home without any hesitation at all."

How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong

- The provider demonstrated a clear understanding of their responsibilities under the duty of candour. They explained to us how they discussed with prospective applicants at interview about the duty to be transparent, honest and open with regards to all aspects of the agency business.
- The registered manager reported all notifiable incidents appropriately to the proper authorities.

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

- People and their relatives gave positive feedback about the registered manager.

- Staff were also positive about the management of the service. A staff member told us, "I would recommend Maiden care, having worked for many care providers both in domiciliary and care home/nursing settings, I have found the registered manager to be caring and compassionate about the service."
- Regular feedback was collected from people and their relatives both formally with questionnaires and informally when changes happened. For example, feedback from a person in April 2019 stated, "I have been entirely satisfied with the support your care service offered and would have no hesitation in recommending your service to a friend."

Continuous learning and improving care

- The registered manager was a member of a local care provider's association. They had arranged training for themselves and the staff team and attended some management network meetings to help keep themselves up to date with changes in the care sector and legislation.

Working in partnership with others

- The registered manager often worked with other professionals to achieve good outcomes for people. For example, the registered manager had liaised with occupational therapists in relation to a specific person's needs.