

Quality Assured Care Services Ltd

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Inspection report

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13 September 2022
22 September 2022

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Quality Assured Care Services is a domiciliary care agency providing personal care to people in their own homes. At the time of our inspection there were 42 people using the service. 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.

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

Staff received safeguarding training and understood their responsibilities to report potential safeguarding concerns to the registered manager. Risks to people's health, safety and wellbeing were assessed and formed part of a needs assessment. This information was used to develop care plans and guide staff on how to manage those risks. Systems were in place to ensure the safe recruitment of staff. This included references and Disclosure and Barring Service (DBS) checks. Staff received training in medicine administration and their competency was assessed. Only staff assessed as competent could support people with their medicines. Staff understood and followed safe infection control guidelines and knew how to minimise risks of infection.

We received positive feedback from people about Quality Assured Care Services. People felt well cared for and looked after. The provider used audits to monitor and improve the quality and safety of care. Some of these audits could be improved to ensure they gathered information that was valuable to the service in order to identify where improvements could be made. Surveys were used to gather feedback from staff and people about the service. The results were analysed and used to make changes in response. The provider and staff worked with other health and social care professionals to improve people's outcomes, and ensure people received care and treatment that was relevant to their changing needs and circumstances.

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 requires improvement (published 2 September 2019).

Why we inspected

This inspection was prompted by a review of the information we held about the service. As a result, we undertook a focused inspection to review the key questions of safe and well-led only. For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Quality Assured Care Services Ltd on our website at www.cqc.org.uk.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next

inspect.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Good ●

The service was safe.

Details are in our safe findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

Quality Assured Care Services Ltd

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 Health and Social Care Act 2008.

Inspection team

This inspection team consisted of two inspectors and a specialist nurse advisor.

Service and service type

This service is a domiciliary care agency. It provides personal care to people living in their own houses and flats.

Registered manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

Notice of inspection

We gave the service 24 hours' notice of 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 13 September 2022 and finished on 28 September 2022. We visited the

location's office on 13 and 22 September 2022.

What we did before the inspection

We reviewed information we had received about the service since the last inspection and sought feedback from the local authority. We used the information the provider sent us in the provider information return (PIR). This is information provider are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We looked at four people's care plans, records relating to medicine competencies and training, and a variety of records relating to the management of the service. This includes audits, staff meetings and recruitment records. We spoke with 15 people and their relatives and nine members of staff. This included care workers, the registered manager and nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

Is the service safe?

Our findings

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

At our last inspection we rated this key question requires improvement. At this inspection the rating has changed to good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- Staff received safeguarding training and understood their responsibilities to report potential safeguarding concerns to the registered manager. Staff felt assured that these would be taken seriously. One staff member said, "We would report it straight away to the office who would take action. The managers are serious about things like this."
- The registered manager understood their obligation to report safeguarding concerns to the local authority and to notify us, CQC, as per regulatory requirements.

Assessing risk, safety monitoring and management

- Risks to people's health, safety and wellbeing were assessed and formed part of a needs assessment. This information was used to develop care plans and guide staff on how to manage those risks.
- Staff understood people's needs, how to support them safely and spot potential signs of complications or deterioration in people's health. For example, regarding catheter care, one staff member said, "We look out for signs that it isn't draining well, any colour changes or reddening to the skin. Any concerns we report straight to the district nurses."

Staffing and recruitment

- Systems were in place to ensure the safe recruitment of staff. This included references and Disclosure and Barring Service (DBS) checks. The DBS helps employers make safer recruitment decisions so only suitable people work with those who are vulnerable.
- Staff had enough time to support people safely without being rushed, and calls were planned to ensure people received continuity of care staff as much as possible. One staff member said, "We are never rushing and have time to spend with people to do what they need."
- Staff were confident telling management if there wasn't enough time allocated for care calls so these could be reviewed and increased if needed.

Using medicines safely

- Staff received training in medicine administration and their competency assessed. Only staff assessed as competent could support people with their medicines.
- Electronic medicine administration records were completed by staff when people received their medicines.
- Weekly medicine reports monitored medicine administration including whether people missed their medicines and the reasons for this. Advice and guidance was sought from healthcare professionals and G.P.s when medicines were missed, including when people with capacity declined to take them.

Preventing and controlling infection

- Staff were trained in infection prevention and control and were provided with Personal Protective Equipment (PPE).
- Staff understood and followed safe infection control guidelines and knew how to minimise risks of infection.

Learning lessons when things go wrong

- The provider used accidents, incidents and safeguarding situations as learning opportunities which were discussed and shared with staff. This helped to improve staff understanding of people's situations, to promote and encourage improved outcomes for them.

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 our last inspection we rated this key question requires improvement. At this inspection the rating has changed to good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- We received positive feedback from people about Quality Assured Care Services. People felt well cared for and looked after. One person said, "Carers are exceptionally good", another person said, "Essentially everything is perfect as can be. I couldn't ask for better care workers."
- Staff also spoke positively about working for the service, the culture and that management were approachable and supportive. Staff felt valued and were confident their views and opinions were listened to and taken seriously. One staff member said, "[Managers] are very good to us and very helpful. Whatever questions we ask they give good advice. If we need anything they will support us, I enjoy it here." Another staff member said, "They [register manager] listen to what we want as care workers and they also listen to us as people."
- Staff were respectful of people and demonstrated that they valued and recognised people's rights. A relative said, "Staff take [person] to heart, treat them like their own. They respond to all [person's] needs and officially go over and above." One staff member said, "Everyone deserves high quality care and to live their lives as normal as possible. They are people at the end of the day." Another staff member said, "We really try and make a bond with them."
- The registered manager understood their responsibilities in relation to duty of candour. Families were informed of any significant incidents or events involving people and we (CQC) were notified as per regulatory requirements.

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

- The provider used audits to monitor and improve the quality and safety of care. Some of these audits could be improved to ensure they gathered information that was valuable to the service, in order to identify where improvements could be made.
- We received positive feedback from people about how the service operated. One person said, "The company are very easy to contact - always willing to help and resolve any issues," another person said, "The management asked for any improvements and opinions, whether they could be doing anything different or extra for us."
- The provider operated an out of hours service to ensure people, their relatives and staff could still communicate with the service in response to any concerns or changes in circumstances.
- Staff understood their roles and responsibilities and were confident asking for advice and guidance. Single

and group supervisions enabled the provider to identify any training needs and provide staff with an opportunity to share learning and understanding, particularly regarding complex clinical care.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Continuous learning and improving care

- Surveys were used to gather feedback from staff and people about the service. The results were analysed and used to make changes in response. This included improved communication between office and care staff and employing a senior care worker.
- When people completed satisfaction surveys and scored the service less than good, action was taken to identify how improvements could be made by carrying out reviews or multi-disciplinary meetings. When changes were implemented, people were encouraged to complete another survey so the provider could identify if those actions improved people's care and experiences.

Working in partnership with others

- The provider and staff worked with other health and social care professionals to improve people's outcomes, and ensure people received care and treatment that was relevant to their changing needs and circumstances.