

Accurate Care Services Limited

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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

About the service

Accurate Care Services is a domiciliary care agency located in the London Borough of Barking and Dagenham. It is registered to provide personal care to people in their own homes.

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 the inspection, one person was using the service.

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

People told us the service was safe. People were protected from the risk of abuse. Risks relating to people's health, mobility and home environment were assessed so that staff could provide safe care. People told us staff were punctual and completed their tasks.

Staff were recruited appropriately and had received training to ensure they had the necessary skills and qualifications to provide support to people. Staff told us they were supported by the registered manager to perform in their roles. There was a procedure for reporting incidents and accidents in the service and learning lessons from them to prevent re-occurrence. Infection control procedures were in place to protect people and staff from the risk of infections. People did not require support to take their medicines but medicine procedures were available for when people needed this support.

Assessments of people's needs were carried out before they started using the service. People's consent was sought when care was provided. 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. Staff supported people to maintain their independence.

Details of health professionals involved in people's care were included in care plans. People's food and drink preferences were understood to ensure they could be supported to maintain a balanced diet.

People told us staff were respectful and caring. People's privacy and dignity were maintained. People's human rights and equality and diversity characteristics were respected. People and relatives were able to express their views about the care provided. Care plans recorded people's needs and preferences and people received person-centred care. People's communication needs were met by staff. There was a procedure for complaints to be acknowledged, investigated and responded to.

The provider promoted a positive culture and person-centred service. Feedback from people and relatives was received. There were quality assurance systems in place for the provider to continuously improve 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

This service was registered with us on 20 December 2021 and this is the first inspection.

Why we inspected

The inspection was prompted by a review of information we held about the service.

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?

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 safe findings below.

Good ●

Accurate 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 Health and Social Care Act 2008.

Inspection team

The inspection was carried out by 2 inspectors.

Service and service type

Accurate Care Services 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

The inspection was announced. We gave the service 48 hours' notice of the inspection. This was because 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 March 2023 and ended on 15 March 2023. We visited the office location on 13 March 2023.

What we did before the inspection

We reviewed the information we already held about the service. This included notifications. A notification is information about important events, which the provider is required to tell us about by law. We used the information the provider sent us in the provider information return (PIR). This is information providers 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 of this information to plan our inspection.

During the inspection

We spoke with the registered manager, an external consultant, the recruitment manager and 1 member of staff. The registered manager was also the director and provider of the service. We spoke with one person who used the service, by telephone.

We reviewed documents and records that related to people's care and the management of the service. We reviewed people's care plans, which included risk assessments. We looked at other documents such as infection control records and staff training and recruitment records.

Is the service safe?

Our findings

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

This is the first inspection of this registered service. This key question has been rated Good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were protected from the risk of abuse through safeguarding procedures. Procedures described how to identify and report concerns of abuse and who to inform, such as the provider and alerting the local authority safeguarding team or police.
- Staff told us they understood the procedures and could describe different types of abuse. Records showed they had received training in this area.
- People told us they felt safe using the service. One person said, "It is a safe service, the staff were very safe with me."

Assessing risk, safety monitoring and management

- Risks to people's health and their personal care needs were assessed and monitored. This ensured staff could provide people with safe care.
- Risk assessments included people's mobility, nutrition and skin integrity risks. They also included an assessment of their home environment and other potential health risks, such as feeling faint or dizzy with details of what action staff should take to prevent people coming to harm.
- Risk assessments were reviewed when people's needs changed or at least every 3 months. A staff member said, "I would go through the risk assessment to understand how to support the person and keep them safe."

Staffing and recruitment

- There were suitable numbers of staff recruited by the provider to support people in their care.
- People told us staff were punctual and reliable. If staff were running late, they told us they were notified by the registered manager. One person said, "I have never had an issue. The service is good and they do everything on time and at the times I prefer."
- Staff completed timesheets and daily records to evidence the times they arrived and left people's homes and the tasks they undertook.
- Staff were recruited appropriately and safely. The provider requested and received references for new staff, proof of their identity, a record of their employment history and proof of their legal right to work in the UK.
- Criminal background checks were carried out on successful applicants before they commenced working in the service. This information helps providers assess the suitability of staff they employ to support people in their own homes.

Using medicines safely

- People were not required to be supported with their medicines. The provider had procedures for the management of medicines for staff to follow should this be needed in future.
- This included a medicines administration record (MAR) where staff would document when a person had taken their medicines.
- Records showed staff received training in medicines administration. Staff told us they had previous experience of supporting people with medicines and were confident about doing so in the service.

Preventing and controlling infection

- People and staff were protected from the risk of infection, such as COVID-19. An infection prevention and control policy was in place to help ensure good practice was followed around hygiene and wearing safety equipment.
- Staff were provided Personal Protective Equipment (PPE) when visiting people and carrying out personal care. These included gloves, face masks, aprons and shoe covers. The registered manager told us they were able to ensure a full supply of PPE at all times for staff to use.
- People told us staff always washed their hands and wore PPE when they were being supported by them.

Learning lessons when things go wrong

- There was a procedure to report when things went wrong in the service such as an incident or accident. This included recording the details of the incident such as a fall or injury to a person and what action needed to be taken to keep the person safe. Forms and procedures showed lessons would be learned and actions taken to avoid a repeat of the incident in future.
- We noted that accident forms were not easily accessible for staff to use when needed. The registered manager told us they would ensure these would be printed for staff to access in people's homes and in the main office.
- Records showed there had not been any incidents in the service since the provider first started supporting people in the community.

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.

This is the first inspection of this newly registered service. This key question has been rated Good. 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 by the registered manager upon referral to the service to determine if they could be supported by staff with their personal care needs.
- People told us they were involved in the assessment process. This helped to ensure managers and staff had the information they needed to meet people's needs. One person said, "I believe they have a good understanding of what I need."
- Assessments were clearly set out and covered people's needs, and any risks staff should be aware of to keep them safe. This included the person's care needs and how they wanted to be supported with their personal care. For example, if they wished to be assisted and supervised to use the bathroom.

Staff support: induction, training, skills and experience

- A training and induction programme was available for all staff to provide them the skills and knowledge to support people. The training was a combination of online and classroom learning. People told us staff were knowledgeable and professional in the way they went about supporting them. One person said, "Staff were excellent."
- Records showed staff completed an induction after they were recruited to help them get to know the service. A staff member told us, "I had an induction to understand what I need to learn and train on. It was very positive."
- New staff completed training in topics such as safeguarding adults, basic life support, moving and handling, infection prevention and control, and dementia awareness. Staff also completed the Care Certificate which is a national set of 15 standards health and social care worker work towards.
- Staff told us felt supported in their roles by the registered manager. Procedures to ensure they had opportunities to discuss their work, their performance and any concerns in supervision meetings, were in place. A staff member said, "I think the company is very good. They have been encouraging and helpful."

Supporting people to live healthier lives, access healthcare services and support; working with other agencies

- People were supported to access healthcare services to maintain their health and receive the treatment they needed. Contact details of the relevant professionals involved in people's care were available in their care plans.
- Staff told us they could identify if people were not well and knew what action to take in an emergency.

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

- If required, people were supported with food and drink to maintain their health and a balanced diet. One

person said, "The staff prepare something for me when I need it."

- Staff told us they understood people's needs and their preferences for their food and drink.
- Information about how staff should support people to maintain and manage people's nutritional requirements were included in their care plan. For example, staff were required to prepare breakfast with drinks and make sure it was within easy reach for people.

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.

- The service followed the principles of the MCA. People's ability to consent to decisions made about their care was assessed and recorded.
- Staff had received training in the MCA and told us they asked for people's consent at all times before providing them with support. A staff member said, "I am an experienced carer and know how to make sure I give people choice and seek their consent when I am supporting them."

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.

This is the first inspection of this newly registered service. This key question has been rated Good. 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; equality and diversity

- People told us staff were kind and caring towards them and they felt well treated. One person said, "The staff were very nice and very respectful. It was nice to be in their company."
- Staff told us they spent time with people and got to know them. A staff member said, "I have good conversations with [person]. I have got to know them well and I am always friendly."
- People's equality characteristics such as their ethnicity, religious beliefs and cultural needs were recorded in their care plans for staff to be aware of, understand and respect. For example, how people wished to practice their religion, such as how they liked to wash themselves a certain way and perform worship.
- The registered manager had produced a colourful document for staff to help them understand the cultural norms of a person who followed a specific religion. This helped staff understand how to support people in respect of their religious beliefs and enabled them to get to know them better. One person said, "The staff were very aware of my religious needs and were very understanding and respectful. They took interest in me and this was good."
- Staff told us they understood equality and diversity, the importance of respecting people's human rights and challenging discrimination. A staff member said, "I do not judge people based on their religion, sexuality or race. People must be treated fairly and equally."

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

- People were supported to express their views and make decisions for themselves as much as possible. Staff told us they always listened to people and respected their choices and preferences. Records showed people had been assessed as having full capacity to make decisions themselves. One person said, "Yes, I can express myself and let the carers know what or want and don't want."
- We saw people had consented to receive care from the provider and they and their relatives had been involved in the planning of their care.

Respecting and promoting people's privacy, dignity and independence

- There was a confidentiality procedure in place to ensure people's personal information remained secure and protected. Staff told us they understood the importance of protecting people's personal details.
- People told us staff were respectful of people's privacy and dignity. One person said, "I am given the privacy I need. The staff are good, I have no complaints."
- Staff told us they protected people's privacy during their personal care task to maintain their dignity. A staff member said, "I will make sure people are covered and that curtains are drawn and doors are closed."
- Care plans contained information about people's levels of independence and if support was required from family members and from staff. For example, their ability to dress themselves and eat independently. One

person said, "I was encouraged to be independent by the service. They were very positive."

Is the service responsive?

Our findings

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

This is the first inspection of this newly registered service. This key question has been rated Good. 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 received care that was person-centred. Care plans were written in a personalised format and people had choice and control of how they wished to receive care. One person said, "The service has been very responsive to my needs."
- People's needs and wishes in regards to their personal care were recorded in their care plans. Care plans contained personalised information including people's personal history, interests, preferences and outcomes they wished to achieve from their care, such as for their mental and emotional wellbeing.
- Staff told us care plans were helpful in getting know the person. Care plans included a sections titled "What is important to me" and "What I want to achieve" and included their cultural and spiritual preferences.
- The registered manager told us they reviewed care plans when people's needs changed.

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 provider supported people to develop and maintain relationships with others, such as their family and friends. This helped to prevent people feeling isolated or lonely.
- People were supported to go about their daily lives as much as possible by the service. Staff supported them to follow interests that were socially and culturally relevant to them, such as going to places of worship so they could practice their religion.

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.

- People's communication needs were set out in their care and support plans. Staff told us they followed the person's communication plan. For example, one person's communication needs in their care plan stated, "I will like the carer to speak to me when I have my hearing aids on or bring them to me to wear them before any conversation to allow proper communication."
- The registered manager told us and showed examples of how they could provide information about the service in a format that was suitable for people to understand, such as easy read or large print versions.

Improving care quality in response to complaints or concerns

- The provider had a complaints procedure should people wish to make a complaint about the service.

There had been no complaints since the provider registered the service with the CQC.

- The registered manager told us they would investigate complaints according to the complaints policy and provide people and relatives with an outcome for their complaint.
- People told us the registered manager was responsive to concerns or queries. One person said, "The manager is very good, excellent. They would be able to resolve any queries I have."

End of Life care and support

- At the time of inspection the service did not support people with end of life care.
- There was an end of life policy in place should the service support people needing this care and support.
- The registered manager was a specialist in providing end of life care and had previous experience. They told us they had the necessary skills and knowledge to support people requiring palliative or end of life care in future.

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.

This is the first inspection of this newly registered service. This key question has been rated Good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

- The registered manager and staff were clear about their roles and responsibilities. The registered manager was also the owner and provider of the service. They were supported by a recruitment manager and an external consultant to advise them on meeting health and social care regulations.
- Quality assurance systems were in place to monitor the service and implement continuous improvements, such as spot checks of staff in the community to ensure they were providing a safe level of care. However, the service provided was limited at the time of our inspection, and records showed people and relatives were able to contact the service if there were any concerns.
- Daily notes were completed after staff had supported people and we found them to be detailed and informative.
- The registered manager told us quality monitoring systems would be developed further as the service began to grow. They carried out audits of care plans, staff training, recruitment files and daily notes. If concerns were identified with staff performance or record keeping, these would be addressed in supervision meetings.

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

- There was a positive culture in the service, which was person-centred. People were supported to achieve good outcomes. People and staff felt the service was well managed. A person told us, "I would have no problem recommending this service."
- Staff told us there was an open-door policy and could approach the registered manager with any issues. A staff member said, "They are a good employer and very supportive."

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 registered manager was aware of their legal responsibility to notify the Care Quality Commission of any allegations of abuse, serious injuries or incidents involving the police.
- The registered manager confirmed they would be open and honest with people should something go wrong. The registered manager told us lessons would be learned to prevent future reoccurrence.

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

- People were contacted by the service to check how they were and if they had any issues or complaints.
- The registered manager carried out visits to people and relatives to obtain their overall feedback about the service. We saw that feedback was positive. The feedback was reviewed and analysed to see if they could further improve people's experience using the service.
- Staff felt engaged with the management team. They understood their roles and the policies and procedures for the service to ensure they kept safe when out in the community and provided care to a good standard.
- Staff meetings were held to share important information. Items discussed included staff training, recruitment and policies.
- People were consulted about their equality characteristics and these were recorded in their care plans.

Working in partnership with others

- The provider worked well and in partnership with health and social care professionals such as social workers and local commissioners and doctors.
- The registered manager followed good practice standards to help develop the service and ensure people received safe care.