

Care Matters (Homecare) Limited

Care Matters (Homecare) Limited Darlington

Inspection report

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30 March 2023

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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

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

At the time of the inspection, the location did not care or support for anyone with a learning disability or an autistic person. However, we assessed the care provision under Right Support, Right Care, Right Culture, as it is registered as a specialist service for this population group.

About the service

Care Matters (Homecare) Limited Darlington supports people to live in their own homes. The service provides personal care and support to people who may be living with dementia, of older age, a learning disability or autistic spectrum disorder, a physical disability, sensory impairment or mental health needs. At the time of the inspection, the service was providing care to 23 people.

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

Right Support:

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.

Risks to people's health, safety and well-being were effectively managed. Medicines were administered safely. The provider had effective infection prevention and control systems in place.

People were supported to access specialist health and social care support where appropriate. People told

us they felt safe when receiving support from staff. Staff understood how to protect people from poor care and abuse. Staff had training on how to recognise and report abuse and they knew how to apply it.

Right Care:

People told us staff arrived on time and they received support from the same good group of staff, which promoted good continuity of care. People's needs were assessed prior to the commencement of the service. The assessment included people's health, physical, emotional and communication needs. Care provided was personalised and supported people's preferences and wishes. The new manager was reviewing all care plans with people and their relatives,

Staff respected people's privacy and dignity. People were encouraged to be independent and to carry out tasks without support.

People could communicate with staff and understand information given to them because staff supported them consistently and understood their individual communication needs.

Right Culture:

The provider had recruitment processes in place to ensure suitable staff were employed. People told us staff were kind, caring and promoted their dignity.

Systems were in place to manage complaints. The previous registered manager left at the end of 2022 and there was a gap in management support until March 2023. A new manager was now in post and in the process of applying to be registered with CQC. People and staff spoke positively about the new manager and they had plans in place to meet with all staff and people to review their support needs.

Systems to monitor the quality and safety of the service were in place.

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

Rating at last inspection

The last rating for this service was good (published 5 February 2019).

Why we inspected

This inspection was prompted by a review of the information we held about this 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?

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.

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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 one inspector.

Service and service type

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

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 not a registered manager in post. The last registered manager left in December 2022 and a new manager started on 1 March 2023. The new manager had been registered with CQC previously and was in the process of completing their application to be registered with us.

Notice of inspection

This inspection was unannounced.

We visited the registered location office on 29 March and spoke with people on 30 March 2023

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 (PIR) prior to this inspection. A PIR is information providers send us to give some key information about the service, what the service does well and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with 4 people about their experience of the care provided from the service. We spoke with 4 members of staff including the manager, coordinator and care workers. We reviewed a range of records. This included 2 people's care records, medication records, 3 staff files and a variety of records relating to the management of the service, including policies and procedures.



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 good. At this inspection the rating has remained the same. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management

- People's known risks had been assessed and accompanying care plans and risk assessments were in place.
- Risk assessments were person-centred and reviewed with people.
- Staff managed the safety of the living environment. Regular checks on equipment and maintenance were made. We saw the service involved the local fire brigade to give people home visits on keeping safe in their own homes.

Systems and processes to safeguard people from the risk of abuse; Learning lessons when things go wrong

- People and those who matter to them told us they knew how and when to raise a safeguarding issue. People said, "Yes I trust them and they are all very kind and considerate," and "They always respect my dignity, I feel very comfortable with them."
- People were kept safe from avoidable harm because staff knew them well and understood how to recognise and protect them from abuse.
- The provider had an out of hours on call service to provide guidance and support to staff.
- Accidents and incidents were recorded, and action had been taken to mitigate risks to prevent reoccurrence.
- Audits were used to identify any shortfalls in practice. When shortfalls were found, lessons had been learnt and shared with the staff team.

Staffing and recruitment

- Staff were recruited safely. Appropriate recruitment checks were carried out and recorded as standard practice.
- Staff had the skills to ensure they could meet people's needs. Staff told us they had received training to support them in their role but some felt there could be more face to face learning to ensure people were confident using medical equipment. The new manager agreed to review training with the staff team.

Using medicines safely

- People's medicines were managed safely. Staff received medicines training and their practice was assessed to check they were competent to manage medicines safely.
- Information regarding the support people needed with their medicines was recorded within their care plans, which was clear, up to date and accessible to staff.

Preventing and controlling infection

- The provider had up to date infection prevention and control and COVID-19 policies in place to provide guidance for staff.
- Staff were provided with appropriate personal protective equipment (PPE) and had completed infection prevention and control training.
- People we spoke with told us, "Yes the staff wear the PPE when they are helping me."



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.

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

- There had been a gap where management support was not present at the service at the end of 2022. This meant staff and people had felt unsupported at this time.
- The new manager had already been meeting with people and staff members and had a clear supervision plan in place. One person told us, "The new manager has visited us twice and we feel a lot more confident now."
- People, relatives and external professionals had been invited to take part in surveys. Feedback was used to improve care and support for people.

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

- People were being supported by staff who wanted to provide person-centred support. One person told us, "They are brilliant, very kind and always the same faces and best of all, I have a laugh with them."
- The service worked in partnership with health and social care professionals to ensure people's physical and emotional needs were met.
- Staff told us they were looking forward to working with the new manager.

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

- Governance systems were in place within the service to monitor the quality and drive improvement. Regular audits were completed which included oversight by the nominated individual.
- There were clear structures in place to support managers and staff to understand their roles and responsibilities. Staff received development opportunities to ensure they had the necessary training and skills to provide care to people.

- The service was proactive in using information from complaints, incidents and feedback to learn from and drive improvements in care.

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 saw evidence that when things went wrong these were discussed with the staff team to allow reflection and lessons learnt to help reduce the risk of recurring themes.