

Forget Me Not Care 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 well-led?

Good ●

Summary of findings

Overall summary

About the service

Forget Me Not Care Limited is a domiciliary care agency providing personal care to people in their own home. At the time of our inspection there were 37 people receiving personal care from the service.

Not everyone who used the service received personal care. The Care Quality Commission (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

Following the last inspection, the provider had taken action to address the breaches of regulation and improve the service.

People felt safe receiving care from staff. The provider had taken action to keep people safe and manage the risks they faced. Systems to protect people from the risk of financial abuse had been improved.

People were supported to take medicines safely and staff sought advice from health and social care services when necessary. Staff kept good records of the medicines support they provided to people.

Staff had a good understanding of the support people needed. Staff supported people to do as much for themselves as possible and maintain their independence.

The provider completed a criminal record check and obtained references from previous employers of new staff before they started work. People said staff had the skills and knowledge to meet their needs.

The provider had established good systems to monitor the quality of service provided and make improvements where needed. The registered manager worked with people, staff and other professionals to ensure people achieved good outcomes.

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

Rating at last inspection and update

The last rating for this service was requires improvement (published 17 August 2019). The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

Why we inspected

We carried out a comprehensive inspection of this service on 14 June 2019. Breaches of legal requirements were found. The provider completed an action plan after the last inspection to show what they would do

and by when to improve safe care and treatment, safeguarding people from abuse and good governance.

We undertook this focused inspection to check they had followed their action plan and to confirm they now met legal requirements. This report only covers our findings in relation to the Key Questions Safe and Well-led which contain those requirements.

The overall rating for the service has changed from requires improvement to good based on the findings of this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Forget Me Not Care Limited 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.

Forget Me Not Care 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 completed by one inspector and an Expert by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

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

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 48 hours' notice of the inspection. This was because we needed to be sure the provider or registered manager would be in the office to support the inspection.

Inspection activity started on 23 May 2023 and ended on 5 June 2023. We visited the office location on 5 June 2023.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. 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 5 people who used the service, 5 relatives, the registered manager and 7 staff. We reviewed a range of records. This included 6 people's care and medication records. We looked at 2 staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service were reviewed.

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.

Using medicines safely

At our last inspection the provider had failed to ensure medicines were managed safely. This was a breach of regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 12.

- People were supported to safely take the medicines they were prescribed. The support people needed was regularly reviewed to ensure people were as independent as possible. Details of the support people needed was set out in their care plan.
- Medicines administration records had been fully completed. These gave details of the medicines people had been supported to take.
- People and their relatives told us staff provided good support for them to take their medicines at the right time. Comments included, "The carers now give [my relative] her tablets and we have had no errors. Everything is done with accuracy" and "They will give [my relative] her tablets and watch to ensure she takes them all. No mistakes have been made with medication. They will also go and collect her medication from the pharmacy which is very helpful."

Assessing risk, safety monitoring and management

At our last inspection the provider had failed to identify and plan how to minimise risks to people. This was a breach of regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 12.

- Risk assessments were completed to support people to be as independent as possible. They balanced protecting people with supporting them to maintain their independence. Examples included support for people to manage the risks relating to skin breakdown, catheter care and self-harm.
- Risk assessments and management plans had been reviewed and updated as people's needs changed. People and their relatives had been involved in these reviews.
- Staff demonstrated a good understanding of the risk management plans and the actions they needed to take to keep people safe. Staff said they had access to the most up to date information about the care they should provide.

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

At our last inspection the provider had failed to effectively manage the risk of financial abuse of people. This was a breach of regulation 13 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 13.

- The service had effective safeguarding systems in place. Since the last inspection the provider had implemented additional procedures to safely manage people's money. This included staff submitting photos of receipts for any expenditure made on behalf of people. Senior staff regularly checked the receipts to ensure the records matched.
- People and their relatives told us they felt safe receiving care. Comments included, "I certainly am safe, absolutely. The carers are wonderful" and "I feel safe when they [staff] are here."
- Staff had a good understanding of what to do to make sure people were protected from harm. They received regular training in safeguarding processes.
- Staff were confident the management team would take action to keep people safe if they raised any allegations of abuse. They knew how to raise allegations directly with other agencies if they needed to.
- Staff were aware of incident recording systems and their responsibilities to report such events. They said these systems worked well and they were always able to contact a member of the management team if necessary.

Staffing and recruitment

- Effective recruitment procedures ensured people were supported by staff with the appropriate experience and character. The provider completed a criminal record check and obtained references from previous employers of new staff before they started work. Staff records contained confirmation of their right to work in the UK.
- People and their relatives said staff had the right skills and experience to provide the care they needed. Comments included, "The carers are very well trained. They keep him safe when assisting him when he walks" and "New carers work with regular experienced carers, until they are fully competent in my [relative's] care needs."
- People told us staff usually arrived on time and stayed for the full duration of their call. People said they were contacted by the office if their carer was running late.

Preventing and controlling infection

- There were systems to prevent people from catching and spreading infections. These included using relevant protective equipment and keeping up to date with guidance.
- People told us staff followed these measures when providing care for them.
- Staff received training on infection prevention and control measures and how to use personal protective equipment (PPE) safely.

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.

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

At our last inspection the provider had failed to implement effective quality assurance and governance systems. This was a breach of regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 17.

- Since the last inspection the provider had recruited new staff to support the registered manager, including a new training manager. These staff had helped to ensure the provider had effective oversight of the service.
- People and their relatives said they were happy with the service provided. They felt confident the management team would address any concerns they had. Comments included, "They are very professional, and I highly recommend them. They are easy to approach, and any queries are answered promptly" and "I have a good relationship with the manager. She responds quickly if I ever send an email."
- The registered manager had developed a series of audits, to assess how key aspects of the service were operating. Records demonstrated audits had identified any shortfalls in the service and how improvements could be made. Actions from the assessments had been followed through to ensure improvements were implemented by staff.
- The provider was a member of relevant industry associations. The registered manager had kept up to date in relation to changes in legislation and good practice guidance.

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

- The registered manager had promoted a person-centred approach in the service. This was evidenced through people's feedback, the content of staff meetings, support sessions for staff and the training staff received.
- Staff said the registered manager was supportive and focused on ensuring people received a good service.
- The registered manager had a good understanding of their responsibilities under the duty of candour.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- The service involved people and others effectively in a meaningful way. People and their representatives were involved in all decisions about their care.
- Staff said they felt listened to and valued by the registered manager. Comments included "I have regular supervisions and appraisals and I can request extra training, support and information. The support is amazing" and "I feel I have good support and [the management team] are available to help me at any time of the day."
- Staff worked with health professionals to improve the support people received. A relative commented, "The carers have good communication between themselves and other health professionals and liaise with district nurses."