

Quality of Life Services Ltd

Kare Plus Preston

Inspection report

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23 February 2023

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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

Kare Plus Preston provides home care services enabling people to be cared for while living in their own homes. The service is managed from the registered office in Preston. At the time of this inspection 22 people were receiving regulated personal care and support from 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

Systems were in place to record accidents and incidents. However, these were not consistently monitored to identify any potential lessons to be learned, themes or trends. We have made a recommendation that recording systems are consistently monitored to ensure any risks, themes or trends have been recognised and any actions taken recorded.

Risks relating to people's needs had been identified and records provided a detailed plan for managing those risks. Medicines were being administered and managed safely. There were enough numbers of staff on the rota to support the number of people using the service

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. Consent to care and treatment had been obtained and where people lacked capacity relevant others had been involved in supporting people's decision making.

We expect health and social care providers to guarantee autistic people and people with a learning disability the choices, dignity, independence and good access to local communities that most people take for granted. Right support, right care, right culture is the statutory guidance which supports CQC to make assessments and judgements about services providing support to people with a learning disability and/or autistic people. We considered this guidance as there were people using the service who have a learning disability and or who are autistic.

Training records demonstrated appropriate and relevant training was provided. Referrals were made to other healthcare services where necessary. People told us they thought the care they received was very good and spoke positively about the staff who supported them.

People told us the staff treated them with respect and dignity and were kind and caring towards them. Care plans demonstrated a person-centred approach. Concerns and complaints were promptly responded to. End of life care where relevant was done with the community nurses.

Quality monitoring and auditing systems were not all fully established. There was some regular oversight of the safety and quality of the service however this was not always being formally recorded. There was no

recorded analysis or reviews completed in a format to see where improvements to the service could be made. We have made a recommendation that the provider develops and establishes the systems and processes to oversee the quality and safety of the service.

Electronic care planning and rota systems were used. People and their relevant others could access the electronic systems remotely to view information about their visits and care. People said very positive things about the management and staff and described the service as 'excellent'.

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

This service was registered with us on 7 June 2021 and this is the first inspection at this address. The last rating for the service at the previous premises was good, published on 31 August 2018.

Why we inspected

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

Recommendations

We have made recommendations the provider develops and establishes the systems and processes to oversee the quality and safety of the service. Additionally those systems are consistently monitored to ensure any risks, themes or trends have been recognised and any actions taken recorded

The manager responded immediately during and after the inspection to address the completion of records and improve information in order to mitigate any potential risks.

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 well-led findings below.

Good 

Kare Plus Preston

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 an inspector and an Expert by Experience who made telephone calls to people. 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 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 this inspection there was a recently appointed manager who was commencing their registration with us.

Notice of inspection

We gave the service 24 hours' notice of the inspection. This was because we wanted to be sure there would be people available to speak with us.

Inspection activity started on 22 February 2023 and ended on 23 February 2023. We visited the location's office on the first date and the telephone calls were made on the second day.

What we did before the 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 this information to plan our inspection.

During the inspection

We spoke with 2 people who used the service and 3 relatives about their experience of the care provided. We spoke with 5 members of care staff and the manager, care coordinator, recruitment lead and the nominated individual who is also the registered provider. The nominated individual is responsible for supervising the management of the service on behalf of the provider. We reviewed a range of records. This included 4 people's care records and medication records. We looked at 5 staff files in relation to recruitment, training and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

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 newly registered location. This key question has been rated good. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- Staff completed assessments that provided a detailed plan for managing risks.
- The provider had systems in place to record accidents and incidents. We saw evidence that action had been taken to appropriately deal with them. However, they were not consistently monitored to identify lessons learned, themes or trends.

We recommend the provider develops recording systems to include the consistent monitoring of accidents and incidents.

Using medicines safely

- People received their medicines as prescribed. However, the recording of protocols for 'as and when' medicines (PRN) needed to be further developed for staff to follow to ensure PRN medicines were given correctly and safely
- People's records were clear as to whether their medicines were prompted or administered by the staff.
- Staff were trained in how to support people with their medicines and their competencies were regularly checked.

Systems and processes to safeguard people from the risk of abuse

- Staff were trained to identify and report abuse and to provide people's care in a safe way.
- People told us they felt safe with the staff who visited them in their homes. One person said of their relative, "Yes she[relative] is safe."
- Staff told us they were comfortable raising any concerns with the manager.

Staffing and recruitment

- There were sufficient numbers of suitably trained staff. People's experiences about the consistency of visit times were very good. One person said, "They are always on time" Another person told us, "I know who is coming. We have regular carers."
- Recruitment systems and processes in place were robust and records were completed with required information to show staff were suitable to work with vulnerable people.

Preventing and controlling infection

- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.

- We were assured that the provider's infection prevention and control policy was up to date.

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 for this newly registered location. 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

- The staff carried out an assessment of people's needs before agreeing to provide their care. One person told us, "I was involved in my care plan and staff discuss it with me."
- People were regularly included in developing their needs assessment and care plans.
- The manager and senior staff referred to current legislation, standards and best practice to achieve effective outcomes.

Staff support: induction, training, skills and experience

- The staff had been trained and had their competencies checked before providing people's care.
- The staff told us they completed a range of training to give them the skills and knowledge to provide people's support. One staff member told us, "We do a lot of training it is really good."
- People told us they were happy with the care they received. One relative told us, "The staff are trained and shadow with another carer when they start." A relative said, "The staff know what they are doing."

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

- Staff provided the level of support people needed with preparing their meals and drinks. One person told us, "Staff will make what I want and they monitor what I eat and drink."
- People had been referred to other services where concerns with eating had been noted.

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

- Staff supported people in managing their health and wellbeing needs by making appropriate referrals to external services.
- Staff worked effectively with healthcare professionals to ensure people's healthcare needs were met. The staff team worked closely with health care services including GPs, pharmacists and district nurses.

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 MCA 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, whether appropriate legal authorisations were in place when needed to deprive a person of their liberty, and whether any conditions relating to those authorisations were being met.

- Staff were knowledgeable about their responsibilities under the MCA and people's rights were protected.
- People and their relatives were regularly involved, consulted with and had agreed with the level of care and treatment provided.

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 for this newly registered location. 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; respecting equality and diversity; Respecting and promoting people's privacy, dignity and independence

- Staff treated people with respect and were kind and caring towards them. People were very complimentary about the staff who supported them. One person said, "The carers treat me with respect and dignity." Another person told us, "Yes the staff respect my wishes" A relative said, "The staff are very caring and professional."
- The staff promoted independence. One person told us, "The staff encourage me to do what I can." Another person said, "I never feel they are rushing me."

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

- The manager was in the progress of developing systems and processes to capture people's views of the service.
- People and their relatives could remotely access the electronic rota and care planning systems.
- People could express their views and raise any concerns or queries and we saw these were dealt with promptly.

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 for this newly registered location. 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's needs had been assessed and staff supporting them had a good understanding of their personal preferences. This enabled them to provide personalised care tailored to the needs and wishes of the individual. One person told us, "The staff know me well."
- People told us they had been involved in their care and support plans. Staff supported them to express their views and make choices about the care delivered. One person told us, "My daughters are involved in my care plan and decisions."

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- The staff identified people's communication needs and they were recorded as part of the care plan.

Improving care quality in response to complaints or concerns

- The manager communicated effectively with people and any concerns or complaints had been dealt with as they had arisen.
- People told us they could approach the manager about any concerns they had. One person said, "You can ring any time and they are very helpful." Staff said they would be confident supporting someone to complain if they required assistance to raise any concerns.

End of life care and support

- The service had systems in place and worked closely with the primary care teams to support people at the end of their life.
- The staff team had relevant experience of caring for people at the end of their life.

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 for this newly registered service. This key question has been rated good. This meant the service was 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

- The service had an electronic care planning and rota system in use however some of the system had not been fully developed or used to audit aspects of the service. The manager had recognised this and told us that this was work in progress.
- There was some oversight of the safety and quality of the service however this was not always being formally recorded.
- Oversight systems and processes used needed to be further implemented and embedded by the provider and management team.

We recommend the provider further develops and establishes the systems and processes in place to oversee and record the quality and safety of the service.

Continuous learning and improving care

- The manager had taken appropriate actions to address problems as and when they arise.
- We received very positive feedback about the leadership and the management from staff and people using the service. One person told us, "The manager is very approachable, and when we spoke she listened to me."

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

- People could engage and give feedback on the service they received during the reviews of their care and support.
- We saw reviews for individual people were completed regularly and peoples experience of the service was gathered. However, their views were not always analysed to give direction of where improvements could be made. The manager identified actions during the inspection to improve the process for this.

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

- People told us they were very happy with their visit times and were happy with the care and support they received. One person said, "I would definitely recommend the service because they are excellent."
- People and their relatives spoke highly about the management. One person told us, "We have tried lots of other agencies but been let down. This one has not let us down at all. We have peace of mind with them."

Working in partnership with others

- Staff worked effectively in partnership with community health care professionals from multidisciplinary teams to achieve good outcomes for people.
- The staff told us the manager listened to them and was very supportive. One staff member said, "They would definitely recommend the service to my own relatives."

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 manager regularly reviewed any accidents and incidents to and took appropriate actions to rectify and keep people safe. However, no audits were in place to establish if trends or themes were happening that needed to be addressed or lessons to be learned. The manager acted during the inspection to ensure records were established to capture this information.
- The provider and manager understood their responsibilities under the duty of candour. People's relatives and or relevant others including local authority safeguarding and commissioners had been informed of significant events.