

Sarah Care Ltd

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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 caring?	Outstanding ☆
Is the service well-led?	Good ●

Summary of findings

Overall summary

About the service

Sarah Care Limited is a domiciliary care agency. It provides personal care to people living in their own houses and flats in the community. At the time of this inspection the service was supporting approximately 165 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

The service had a positive culture that was person-centred, open, inclusive and empowering. The service ensured that staff in all roles were highly motivated and offered care and support that was exceptionally compassionate and kind. People's human rights, equality and diversity were very important to the service. Care workers understood the importance of respecting people's diverse needs and promoting independence. Comments included, "The personality of the carers is superb, and I love talking to them. They lift my mood up in the morning," "They [staff] are incredibly caring and very kind," "My sister is very happy with the care, they [staff] are brilliant. Excellent, cannot speak highly enough of them," "They [staff] talk to him [family member] about daily current affairs. They are just really lovely people who are dedicated to their work" and "I have regular carers who are excellent. They are fantastic and I couldn't wish for anyone better. They really do care."

People and relatives were exceptionally complimentary about how caring the staff were. The staff valued the people they cared for. People had built, strong, meaningful and trusting relationships with staff. Staff told us they enjoyed working at the service. Comments included, "I do enjoy working for Sarah Care the job itself is great and team members and clients are too. I enjoy all aspects of my job" and "Sarah Care is a fantastic company to work for and I'm very happy with all aspects of the job. Service users are happy with the care they receive and know that confidentiality is our first priority."

People said they felt safe using the service. Staff were aware of their responsibilities in keeping people safe. Risks to people's health and safety were assessed and mitigated. Medicines were managed safely by the service. Medicines records had been improved since the last inspection. There were enough staff available to ensure people received their calls. Most people told us they were supported by regular care workers. The provider had safe recruitment procedures in place to make sure staff had the required skills and were of suitable character and background.

People were consulted and listened to about their care and support needs. People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible.

The registered managers monitored the quality of the service and took action when issues were identified. This ensured the service was safe and well managed. The service had received positive feedback from health professionals about the support provided.

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 4 May 2019) and there was one breach of regulation. 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

This inspection was carried out to follow up on action we told the provider to take at the last inspection. We undertook a focussed inspection to review the key questions of safe, caring and well-led only.

The ratings from the previous comprehensive inspection for those key questions not looked at on this occasion were used in calculating the overall rating at this inspection. The overall rating for the service has changed from requires improvement to good. This is based on the findings at this inspection.

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

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

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 caring?

The service was exceptionally caring.

Details are in our caring findings below.

Outstanding ☆

Is the service well-led?

The service was well-led.

Details are in our well-Led findings below.

Good ●

Sarah 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 Care Act 2014.

Inspection team

This inspection was completed by two inspectors and two Experts 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 houses and flats.

The service had two managers registered with CQC. This means that they and the provider are all legally responsible for how the service is run and for the quality and safety of the care provided.

We gave the service one days' notice of the inspection so we could ensure the registered managers would be available during the office visit. Inspection activity started on 1 December 2021 and ended on 14 December 2021. We visited the office location on 9 December 2021.

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. We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all of this information to plan our inspection.

During the inspection

We spoke with 11 people and 10 relatives about their experience of the care provided. We spoke with four

members of staff including the two registered managers, a care coordinator and the senior care coordinator during our visit. We also received feedback from seven care staff.

During the inspection we reviewed a range of documentation. This included three people's care records and multiple medication records. We looked at three staff files in relation to recruitment 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.

At the last inspection this key question was rated as requires improvement. At this inspection this key question has now improved to good. This meant people were safe and protected from avoidable harm.

Using medicines safely

At our last inspection we found concerns relating to people's medication records. This was a breach of regulation 17 (Good governance) 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.

- Medicines were managed safely by the service. People's medication records had been improved since the last inspection.
- People told us they received their prescribed medication at the right time. This was also reflected in the feedback received from relatives. One relative told us, "Punctuality is very good. My father needs medication at a certain time and they [staff] are always on time for that."
- Regular checks of people's Medication Administration Records (MAR) had been completed, to make sure full and safe procedures had been adhered to.
- Staff competency to administer medication had regularly been checked.

Systems and processes to safeguard people from the risk of abuse

- People were safe from harm.
- People and relatives spoken with told us the service was safe. Comments included, "The past couple of years during the pandemic Sarah Care have been excellent in keeping me safe through their professional approach," "I think the people [staff] from Sarah Care make me feel safe when they visit" and "I take comfort in that's she's [family member] safe; I have no worries at all and the carers love my mum to bits."
- Staff received training and understood how to recognise and report any concerns about people's safety and welfare.
- The registered manager understood their responsibilities to ensure any safeguarding concerns were dealt with properly.

Learning lessons when things go wrong

- There were systems in place to learn from complaints, accidents and incidents to identify trends and common causes. This enabled possible themes or trends to be identified and action to be taken to reduce future risks.

Assessing risk, safety monitoring and management

- Individual risk assessments were completed for people so that identifiable risks were managed effectively. Risk assessments were reviewed and updated at regular intervals.

Staffing and recruitment

- There were enough staff deployed to meet people's needs. Most people told us they received support from the same group of care staff. However, some staff told us their rotas had been frequently changed due to staff unexpected absence. A few staff told us these constant changes had affected their home life. During the pandemic the service's priority had been to ensure people received their calls. The registered manager told us no one using the service had experienced a missed call. The provider was actively recruiting additional care staff for the service.
- Most people told us they had a regular team of care workers. People told us staff arrived on time, but on the odd occasion care staff may be running late. Comments included "The carers are usually first class, but I think staff shortage is an issue at the moment. I don't always get my usual carers and don't know who will be coming. They are all very good anyway" and "I consider Sarah Care is brilliant and no improvement is required. My sister has one main carer who comes in four times a day. They [staff] are always on time, stay the full call time and wear PPE (Personal Protective Equipment). They have always turned up even last week in the snow."
- The recruitment systems were designed to make sure new staff were only employed if they were suitable to work at the service.

Preventing and controlling infection

- Staff were trained in infection prevention and had access to gloves, masks and aprons to mitigate the risk of cross infection.
- People and relatives spoken with did not raise any infection control concerns.

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.

At the last inspection this key question was rated as good. At this inspection this key question has now improved to outstanding. This meant people were truly respected and valued as individuals; and empowered as partners in their care in an exceptional service.

Ensuring people are well treated and supported; respecting equality and diversity

- There was a strong, visible person-centred culture. People's human rights, equality and diversity were very important to the service. The provider had arranged bespoke equality and diversity training for staff in 2020. So, staff could develop a greater understanding of equality and diversity, protected characteristics and human rights.
- The service ensured staff in all roles were highly motivated and offered care and support that was exceptionally compassionate and kind. For example, one staff member sat with a person during their passing so they would not be alone. Staff organised parties to celebrate people's birthdays. This included a socially distanced party to celebrate one person's hundredth birthday. This event was reported in the local press. Staff collected donations from the community to ensure each person received a present last Christmas. Staff had supported some people to access and attend vaccination appointments. One person expressed what a difference the staff had made to their life when they had obtained furnishings for their home. They now had a bed to sleep in. One staff member told us "The staff at Sarah Care are a dedicated team of people who you can trust to take care of vulnerable people in their homes to the highest standard."
- All the people and relatives spoken with told us staff were exceptionally compassionate and kind. People valued the service greatly and said it enhanced their lives. Comments included, "The personality of the carers is superb, and I love talking to them. They lift my mood up in the morning," "They [staff] are incredibly caring and very kind and they always go the extra mile like going out for a birthday card," "My sister is very happy with the care, they [staff] are brilliant. Excellent, cannot speak highly enough of them," "They [staff] talk to him [family member] about daily current affairs. They are just really lovely people who are dedicated to their work" and "I have regular carers who are excellent. They are fantastic and I couldn't wish for anyone better. They really do care."
- Relatives shared examples where staff had gone the extra mile to ensure people were well treated and supported. One relative described the staff as angels as they had ensured their family member was able to attend their 7am hospital appointments. Another relative described how supportive staff had been when their family member's health had deteriorated rapidly. "Mum's carers [staff] have been amazing. The care and support is fantastic, we are treated as family with respect and dignity. The regular carer has been our rock."
- The service had received compliments from people, relatives and health professionals. District nurses had complimented members of staff. Paramedics had rung the service to tell them how highly their patient had spoken about their care staff.

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

- The staff and registered managers placed people fully at the centre of their care and respected the decisions they made. They supported people to express their views about what was important to them and people received care in a way that took account of their wishes and preferences.
- Each person had a bespoke communication plan. The registered had information available in different formats to support people to express their views and be involved in their care planning. For example, the service user guide was available in large print and Braille.
- The service offered information and support to people to access advocacy services. Advocacy is a process of supporting and enabling people to express their views and concerns, access information and services.

Respecting and promoting people's privacy, dignity and independence

- Respect for privacy and dignity was at the heart of the service's culture and values. The staff respected people's privacy and promoted their dignity and independence.
- People told us they were treated with dignity and respect by staff. Comments included, "I get on really well with them [staff] and in turn they are very respectful to me. For example, I often apologise to the carers about my needs and they just tell me not to worry that's what we are here for. They ask questions like how I am when they arrive and ask if there's anything they can do before they leave" and "They [staff] are very respectful. I think my carers go over and above their duties to make sure my life is not as hard as it would otherwise be."
- Staff supported people to maintain and to increase their independence. People were supported to be as independent as possible. One person said, "They [staff] are very nice people who know me well. They encourage me to be independent where possible. They chat to me and we have lovely conversations. They are very kind." A relative had thanked a care worker for helping their family member to feel confident enough to accept support with their personal care. This had enabled them to stay in their own home. The care worker had built a meaningful and trusting relationship with them by playing their favourite game with 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 the last inspection this key question was rated as requires improvement. At this inspection this key question has now improved 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; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- The service had a positive culture that was person-centred, open, inclusive and empowering. The registered managers and staff encouraged people to express their views and concerns. They listened and acted on them to help shape the service and culture.
- People and relatives told us the service was well managed. Comments included, "The service is very well managed and run," "The company is well managed and the office very responsive and efficient. I have no complaints at all and would recommend this service with confidence as we are highly satisfied" and "The management is very good and very informative. There is always someone on duty to speak to outside office hours." Two people felt they could have been provided with more information about their calls. We shared this feedback with the registered managers.
- The provider actively sought the views of people, staff and healthcare professionals. For example, an annual questionnaire was sent out to people, staff and professionals. The two registered managers used this feedback to shape the service.
- People and relatives' views were actively sought during reviews of people's care plans.
- Staff were encouraged to express their views during staff meetings and via newsletters. This had led to improvements being made at the service.

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; Continuous learning and improving care

- The provider had learned from mistakes and admitted when things went wrong. This reflected the requirements of the duty of candour. The duty of candour is a legal obligation to act in an open and transparent way in relation to care and treatment.
- Systems were in place to make sure managers and staff learnt from events such as accidents and incidents, complaints, concerns and whistleblowing. This reduced the risks to people and helped the service to continually improve.

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

- The registered managers monitored the quality of the service and took action when issues were identified. This ensured the service was safe and well managed.
- The registered managers were aware of their responsibility to inform the CQC about notifiable incidents

and circumstances in line with the Health and Social Care Act 2008.

- Staff were clear about their roles and responsibilities. Staff told us they enjoyed working at the service. Comments included, "I do enjoy working for Sarah Care the job itself is great and team members and clients are too. I enjoy all aspects of my job" and "Sarah Care is a fantastic company to work for and I'm very happy with all aspects of the job. Service users are happy with the care they receive and know that confidentiality is our first priority."
- Staff made positive comments about the management of the service. Comments included, "Yes it is managed well, yes the senior managers do listen to our concerns and act on them" and "Senior managers do listen to concerns in the office privately and confidentially and I feel that they act on them as well as they can and in a reasonable way."

Working in partnership with others

- The registered managers had ensured positive relationships had been made with other healthcare agencies involved with people's care, to ensure they received effective care, support and treatment.
- The service had received positive feedback from health professionals about the support provided.