

Corporate Care Furness Limited

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Inspection report

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Ratings

Overall rating for this service

Good 

Is the service safe?

Requires improvement 

Is the service effective?

Good 

Is the service caring?

Good 

Is the service responsive?

Good 

Is the service well-led?

Good 

Overall summary

We carried out this announced inspection between 24 September and 9 November 2015. We last inspected this service in April 2013. At that inspection we found the service was meeting all of the regulations that we assessed.

Corporate Care Furness Limited is a domiciliary care agency providing care for people who live in Barrow-in-Furness and the surrounding area. The agency

provides care to people in their own homes, including people who need support due to physical needs, people who have dementia and people who have a learning disability.

There was a registered manager employed at the service. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run

Summary of findings

Everyone we spoke with told us that this was a good service and said they would recommend it to other people.

Most people told us that the staff who supported them knew how to provide their care. However we found that people had not always received their medicines safely. We shared our concerns with the registered manager and they ensured all staff received updated training in the safe handling of medicines while we were carrying out this inspection.

People were treated with kindness and respect and were included in all decisions about their care. Care staff knew how to protect people's privacy and supported people to maintain their independence.

People who used the service knew the registered manager and were confident that she would take action if they raised any concerns.

People valued the service they received and were supported to remain living in their own homes.

Safe systems were used when new staff were recruited to ensure they were suitable to work in people's homes.

The registered manager asked people for their views about the care they received and acted in response to their feedback.

We found a breach of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 in relation to the safe handling of medicines.

You can see what action we told the provider to take at the back of the full version of the report.

Summary of findings

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 safety of one aspect of the service required improvement.

Medicines were not always handled safely. This issue was immediately addressed by the registered manager.

Robust systems were used when new staff were recruited and people could be confident the staff who visited their homes were safe and suitable to work for a care service.

Care staff were aware of their responsibility to protect people from harm.

Requires improvement



Is the service effective?

The service was effective.

People were included in all decisions about their care and their rights were respected.

All staff completed training before working on their own in people's homes.

People received the support they required to eat and drink and to maintain their health.

Good



Is the service caring?

The service was caring.

People valued the care they received and liked the staff who supported them.

The staff treated people with respect and protected their privacy and dignity.

The staff were kind and helpful and knew the people they were supporting.

Good



Is the service responsive?

The service was responsive.

People were included in planning and agreeing to the care they received.

Where people asked for changes to their care, the registered manager tried to agree to their request.

People knew how they could complain about the service provided and were confident action would be taken if they raised any concerns.

Good



Is the service well-led?

The service was well-led.

The registered manager of the service was open to feedback and took immediate action where aspects of the service required improving.

Good



Summary of findings

People knew the registered manager of the service and were confident to contact them if they had any concerns.

Care staff felt well supported by the management team in the service.

Corporate Care Furness Limited

Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

The inspection took place between 24 September and 9 November 2015 and was announced. We gave the registered manager 24 hours' notice of our visit on 24 September 2015 because the location provides a domiciliary care service and we needed to be sure that the registered manager, or another senior person, would be available to speak with us.

The inspection was carried out by an Adult Social Care 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.

The inspector visited the agency office on 24 September and 3 November 2015 and looked at care records for five people who used the service, training records for three staff and recruitment records for two staff. We also looked at records relating to complaints and how the provider checked the quality of the service. We spoke with 12 people who used the service and one relative on the telephone and visited three people in their own homes. We also spoke with the registered manager of the service and four staff.

Before the inspection we reviewed the information we held about the service and contacted the local authority commissioning and social work teams for their views of the agency.

Is the service safe?

Our findings

Everyone we spoke with said they felt safe with the care provided by this service and with the staff who visited their homes. One person told us, “I feel totally safe with my carers, [care staff]” and another person said, “I don’t think I was quite safe living on my own before I got the agency in, but I do feel safe now”. A relative we spoke with told us that they were confident the agency provided a safe service. They said, “The carers [care staff] keep Mum safe, it gives us great confidence knowing that the staff go in regularly and check on her”.

People told us that they received the support they needed with taking their medicines. One person said, “I have a lot of different tablets to take now, I can get mixed up, but the staff keep me right”. We saw that the care staff kept accurate records of the medicines they had given to people. However we found that where care staff had reminded or prompted people to take their medicines, the records did not always clearly identify what medicines the person had taken.

One person had been identified as at risk if they did not take their medicines while the care staff were with them. We saw that their care records stated that no medicines were to be left out for them to take after the care staff had left. The care records also stated that if the person did not take their medicines while the staff were in their home this should be reported to the agency office. The records care staff had completed showed that on five occasions a staff member had not followed this procedure and had left medicines with the individual for them to take later.

This was a breach of Regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 because medicines were not always handled safely.

We discussed the concerns around the handling of medicines with the registered manager at the end of our visit to the agency office on 24 September. They immediately took action to ensure all staff were aware of the procedure to follow when assisting people with their medicines. They also allocated a senior member of staff to audit all medication records to ensure these were completed properly.

We saw that potential risks to people’s safety had been identified and their records held information for care staff about how to reduce the risk. The staff we spoke with told us they knew how to keep people safe.

People told us that they usually received care from a team of staff who knew them and who knew the support they required. Three people told us that there had been times when a lot of different staff had provided their support. However, they told us that this had changed by the time we carried out our inspection and they usually had the same care staff who visited them regularly.

The registered manager was very aware of their responsibility to ensure people were protected from the risk of abuse. All staff received training in the action to take if they were concerned a person they visited was at risk. One member of staff told us, “I’d speak up if I thought there was anything wrong, whether it was another staff member or one of the client’s family, we’d have to speak up, people can be very vulnerable”.

We looked at the recruitment records for two new staff members. We saw that thorough checks had been carried out to ensure the staff were safe and suitable to work in people’s homes. People who used the service could be confident that the staff who visited their homes had been recruited using safe procedures.

Is the service effective?

Our findings

People who used this service told us that the staff who visited them regularly knew the care they needed and how to provide their support. One person said, “I find them marvellous, everything they do is very good” and another said, “The staff know what to do for me”. Two people told us that there had been times when they had felt that the staff who visited them had not been fully trained. One person said “Some of the carers seem to be out of their depth” and another person said, “I don’t think all of them [care staff] have had full training.”

The records we looked at showed that all new staff had completed training before working on their own in people’s homes. The staff we spoke with confirmed that new staff did not work on their own before they had completed this training. We saw that some training needed to be repeated to ensure the care staff had up to date knowledge. The registered manager had arranged for this training to be carried out. Updated training in the safe handling of medicines was provided to all staff during the time we were inspecting the service and we saw that training in safe moving and handling was being arranged.

The registered manager had a good understanding of their responsibilities under the Mental Capacity Act 2005, (MCA) and around protecting people’s rights. The 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. We checked whether the service was working within the principles of the MCA.

We found that people who used the service were included in planning and agreeing to the care they received. Everyone we spoke with said that the care staff asked what support they wanted and respected their decisions about their care. People told us that they could refuse any part of their planned care if wished and told us the care staff “always” respected their right to make choices about their support. One person told us, “She [care worker] always asks what I want” and another person said, “They [care staff] will do anything I ask, within reason of course”.

All the care staff we spoke with showed they understood people’s right to make decisions about their lives and care. One staff member told us, “I always ask what clients want me to do”.

We saw that where people required support to make decisions about their care the service had recorded who they wanted to be included in assisting them. This helped to ensure their rights were protected.

Some people required help to prepare their meals. They told us that the staff who visited them asked what they wanted to eat and made the meal of their choice. People told us that the staff helped to ensure they had enough to eat and drink. One person said, “She [care worker] always makes me a drink and reminds me that I need to finish it”. Another person told us, “I don’t usually need help with meals, but if I’m not feeling well my carer [care worker] will always make me something and she always leaves me with a nice cup of tea to enjoy when she’s gone”.

People told us that they did not require support from the care staff with making or attending health care appointments. However, one person told us that when they had been unwell, the care worker had contacted their GP on their behalf and said they had appreciated this support.

Is the service caring?

Our findings

Everyone we spoke with told us that the staff who visited them were kind, helpful and caring. One person told us “They’re [care staff] very kind”. Another person said, “I find the staff very good and very helpful, they’re a lovely bunch of people”.

People told us that they valued the support they received. One person said, “I couldn’t do without them, [care staff]” and another person said, “The staff talk to me and we have a bit of a joke, it brightens the day.”

People told us that the staff provided the care they required and helped them to maintain their independence. One person said, “I try to be independent and they [care staff] support me to do that as best they can”. Another person said, “The staff will do anything, but they don’t try to take over, they just do as I ask”. The care records we looked at included guidance for staff to support people to maintain control over their care. We saw that the care plans instructed staff to ask people what support they wanted and to be guided by the individual.

Relatives we spoke with told us they were confident the care staff treated people in a kind and caring way. One person told us, “I’ve been more than happy with the care, all the staff are kind and caring, they are lovely to Mum”. Another relative said, “I find the staff all very helpful. I’ve been very happy with the care they’ve provided”.

People told us that the care staff provided their support in a manner that protected their privacy and dignity. One person told us, “They [care staff] protect my modesty as much as they can and they are always very kind and gentle”.

During our visits to people’s homes, we saw that the care staff ensured they closed the doors to bedrooms and bathrooms while they were providing people’s care. We observed that the staff spoke to people in a friendly and respectful manner.’

All the care staff we spoke with told us that they understood it was important to treat people with respect and to maintain people’s dignity. One staff member told us, “I try to treat people how I’d want to be treated or how I’d want my relative to be treated”.

We saw that the care staff knew the people they visited and the support they needed. They ensured that people had any aids they required, such as glasses or hearing aids, and knew how people liked their care to be provided. People we spoke with confirmed this. One person said, “She [care worker] knows me well” and another person told us, “She [care worker] is a gem, she reminds me to switch my hearing aid on, says there’s not much pointing having it otherwise, we like to have a laugh about it”.

People told us that the care they received supported them to remain living in their own homes. They told us that this was very important to them.

Is the service responsive?

Our findings

People told us they received a high quality of care from this service and said that they had been included in agreeing to the care provided by the agency. One person told us, “Everything was agreed when I started with the agency, I told [the registered manager] what I wanted and it was all set up, I’m perfectly happy and can’t recommend them highly enough”.

We saw that people had a copy of their care plan in their homes to guide staff in how to support them. One person told us, “The care plan is over there, I don’t look at it, but it’s good to know it’s there if I want to”. A relative we spoke with said, “I used to look at the care plan to check Mum was getting the support we agreed, but I don’t need to now, I know Mum is getting everything she wants and sometimes more, the staff are fantastic with her”.

People told us that they knew how to contact a senior person in the agency if they wanted to request any change to their planned care. They said that if they ever needed to ask for a change to their care the agency did “everything possible” to agree to their request. One person said, “I had a hospital appointment and needed the staff to come in earlier to help me get ready, I asked [the registered manager] and it was all arranged and the carer [care worker] turned up on time, just as I had asked”.

We looked at the care records for five people. We saw that these included the choices people had made about the support they received and how they wanted their care to be provided.

The staff we spoke with told us that the care plans provided them with information about how to support people. They said they knew how to contact a senior person in the office if the support a person needed had changed and their care plan required updating.

People told us they received care from staff who they knew and who they liked. Two people told us that they had been visited by a staff member who they had not liked. They said they had spoken to the registered manager to request the member of staff was not sent to their home again and this had been agreed immediately.

Everyone we spoke with said they would be confident speaking to the registered manager if they wanted a change to the staff who visited their homes. One person said, “I’ve never had to ask for a carer [care worker] not to come, but I’m sure it would be OK if I did ask”.

The registered provider had a procedure for receiving and responding to complaints about the service. People we spoke with told us they knew how they could report a concern about the care they received. One person told us, “I’d call the office if I wasn’t happy” and another person said, “I’ve never had to complain, but I’d definitely speak to [the registered manager] if I had any problem and I know she’d sort it”.

Is the service well-led?

Our findings

Everyone we spoke with said the service was well managed. People who used the service and the relatives we spoke with said that they knew the registered manager. They all told us that they were confident the registered manager was committed to providing a good service. One person told us, [The registered manager] is marvellous, she really goes “that extra mile” to try to make sure I have everything I need”. A relative we spoke with told us, “We’ve been perfectly happy with the service. We know [the registered manager] and trust her implicitly. I know that if we had even the tiniest concern, [The registered manager] would sort it quickly”.

People we spoke with told us that, if they had raised a concern with the registered manager, they were listened to and action was taken in response to their comments. This showed that the registered manager used the feedback from people who used the agency to improve the service provided.

During our inspection at the service the registered manager showed that they were open to feedback. We saw that they had identified areas of service that required improving and were taking action. Where we identified issues with how medicines were managed the registered manager had taken action immediately to ensure people received their medicines safely.

People who used the service were asked for their views in formal and informal ways. Some people told us that they were asked for their views of the service when their care plans were reviewed, the records we looked at confirmed this. People had also been asked to complete a quality questionnaire to share their views with the registered manager. We looked at some completed questionnaires and found these were positive about the service provided.

Everyone we spoke with said that they knew how to contact the registered manager if they needed to. People told us they could telephone the agency at any time and knew there would be a senior person they could speak to. During our visit to the agency office we observed that the registered manager and deputy manager received calls from people who used the service. We saw that, as well as taking action in response to any requests from people, they used these calls as an opportunity to ask if people were happy with the care provided. This helped them to maintain oversight of the service.

The agency office was in the local community where care was provided. People told us that this was important to them. One person told us, “We go past the office on the bus and I like knowing I could just pop in and speak to [the registered manager] if I wanted to. I never have, but I like to know that I could.”

During our visits to the office we saw that staff felt confident calling into the office to speak with the registered manager or deputy manager. The staff we spoke with said they knew they could call in the office any time they needed to. They said that this helped them to feel supported in their work. One staff member said, “If I have a concern about a client I can call the office, or if I’m passing I sometimes pop in, we all know we can call in anytime and speak to [the registered manager] or [deputy manager].

Everyone we spoke with told us that they would recommend this service to other people who needed support to remain in their own homes. We asked people how they judged the quality of the service care to be, eleven people told us the service was “good”, three people told us the service was “excellent” and two people said it was “outstanding”. Everyone we spoke with told us that they valued the support they received from the service.

This section is primarily information for the provider

Action we have told the provider to take

The table below shows where legal requirements were not being met and we have asked the provider to send us a report that says what action they are going to take. We did not take formal enforcement action at this stage. We will check that this action is taken by the provider.

Regulated activity	Regulation
Personal care	<p>Regulation 12 HSCA (RA) Regulations 2014 Safe care and treatment</p> <p>How the regulation was not being met: The provider had not ensured that medicines were managed safely. Regulation 12 (2) (g).</p>