

Esteem Homecare Services CIC

Esteem Homecare Services

Inspection report

Room 1a, Multi Media Exchange
72-80 Corporation Road
Middlesbrough
TS1 2RF

Tel: 07565602959

Date of inspection visit:
12 August 2020
13 August 2020
25 August 2020

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30 September 2020

Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Requires Improvement ●

Summary of findings

Overall summary

About the service

Esteem Homecare Services provides domiciliary care services to people living in their own homes in Middlesbrough and the surrounding area. At the time of the inspection 17 people were using the service.

People's experience of using this service and what we found

We received positive feedback on people's experience of using the service. Comments included, "They are all lovely, I could not speak more highly of them" and, "They are very caring."

Risks were assessed and addressed, but records needed improving in some areas. Staff were safely recruited. Medicines were managed safely.

Quality assurance systems were in place but further improvement was needed. We received positive feedback on the management and leadership of the service. Staff worked effectively with external professionals.

We recommend the provider seek advice and guidance from a reputable source, in relation to quality assurance audits.

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

Rating at last inspection

The last rating for this service was requires improvement (published 12 September 2019)

Why we inspected

We carried out an announced comprehensive inspection of this service on 12 August 2019. We identified that further and sustained improvement was needed in relation to medicine records, risk assessment records and quality assurance processes.

We undertook this focused inspection to check whether improvements had been made and sustained in these areas. This report only covers our findings in relation to the key questions Safe and Well-led which contain those requirements.

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 Esteem Homecare Services 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.

Good ●

Is the service well-led?

The service was not always well-led.

Requires Improvement ●

Esteem Homecare Services

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

An inspector and an Expert by Experience carried out this inspection. 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 and specialist housing.

The service had a manager registered with the Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection

We gave the service 48 hours' notice of the inspection. This was because staff worked with people in their own homes and we needed to be sure that the provider or registered manager would be in the office to support the inspection.

Inspection activity started on 12 August 2020 and ended on 25 August 2020. We visited the office location on 25 August 2020.

What we did before the inspection

We reviewed information we held about the service, including the notifications we had received from the provider. Notifications are changes, events or incidents the provider is legally obliged to send us within required timescales. 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 three people who used the service and five relatives about their experience of the care provided. We spoke with seven members of staff, including the registered manager (who was also the nominated individual), support and office staff. 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 three people's care records and three medicine records. We looked at two 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.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at records relating to policies and procedures. We spoke with an external professional who works with the service.

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.

Assessing risk, safety monitoring and management

- At our last inspection we saw further and sustained improvement was needed in risk assessments. Improvements had been made in most areas, but some additional work was needed.
- Risks to people were assessed, but for some people information was missing on how to manage them. The registered manager took action to update these before the end of the inspection.
- Staff were knowledgeable about risks to people and worked effectively to keep them safe. One person said, "I feel very safe."

Using medicines safely

- At our last inspection we saw further and sustained improvement was needed in medicine records. Improvements had been made when we visited for this inspection.
- Systems for recording the use of 'as and when required' medicines and creams had improved.
- People received their medicines when needed and spoke positively about the support they received.

Staffing and recruitment

At our last inspection we recommended the provider consider reviewing its recruitment processes to make them more robust. The provider had made improvements.

- Recruitment checks were carried out to minimise the risk of unsuitable staff being employed. This included obtaining written references.
- Staffing levels monitored to ensure people were supported safely. A member of staff said, "There are enough staff to cover calls, and extra available if needed."
- Rotas were planned to minimise the risk of late or missed calls. One person said there were, "never any missed calls."

Systems and processes to safeguard people from the risk of abuse

- Systems were in place to safeguard people from abuse. Staff received safeguarding training and said they would immediately report any concerns they had.

Learning lessons when things go wrong

- Accidents and incidents were monitored to see if improvements could be made to keep people safe.

Preventing and controlling infection

- Staff received infection control training and had sufficient stocks of gloves, eye protection and aprons.

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 remained the same. This meant the service management and leadership was inconsistent. Leaders and the culture they created did not always support the delivery of high-quality, person-centred care.

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

- At our last inspection we saw further and sustained improvement was needed in quality assurance systems. Improvements had been made in most areas, but some additional work was needed.
- A wide range of audits were used to monitor and improve the service. However, these had not identified the issues we found with risk assessments. The registered manager said these would be immediately reviewed.

We recommend the provider seek advice and guidance from a reputable source, in relation to quality assurance audits.

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

- People, relatives and staff spoke positively about the culture and values of the service. A relative told us, "It seems to be more than just a job, they seem to care."
- People and relatives said the service offered the support people wanted and helped them achieve their goals. One relative said, "They lift him up and make him happy."
- Required notifications about people's health and welfare had been submitted in a timely manner.

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

- Feedback was sought and acted on and people were involved in reviews of their support.
- Regular staff meetings took place, where staff had open discussions on how the service could be improved.

Continuous learning and improving care; Working in partnership with others

- Staff worked effectively with other agencies and external professionals to ensure people received the support they needed.
- The service was committed to ongoing learning and development. For example, staff had recently accessed training provided by the local authority.

