

Everycare (Central Hants) 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 effective?

Good ●

Is the service caring?

Good ●

Is the service responsive?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

Everycare (Central Hants) is a domiciliary care provider and also provides a 24-hour live-in care service. At the time of this inspection 44 people received personal care support from the service. The service supported older people, some of who were living with dementia and people with physical disabilities, within their own homes.

Not everyone using the service received a regulated activity; CQC only inspects the service being received by people provided with 'personal care'; help with tasks related to personal hygiene and eating. Where they do we also take into account any wider social care provided.

The inspection took place on 11 and 12 February 2019 and was announced.

At our last inspection on 14 December 2016 we rated the service Good. At this inspection we found the evidence continued to support the rating of Good. This inspection report is written in a shorter format because our overall rating of the service has not changed since our last inspection.

The service had a registered manager in post. 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.

Staff understood their role and responsibilities to keep people safe from harm. Staff had received training to deliver care safely and to an appropriate standard.

Staff had a good knowledge of the provider's whistleblowing policy and procedures which meant they were able to raise concerns to protect people from unsafe care.

People were supported by staff who promoted their independence, respected their dignity and maintained their privacy.

Care plans reflected people's individual needs and preferences and were regularly reviewed to ensure the provider continued to meet people's needs.

Risks to people had been assessed and reviewed regularly to ensure people's individual needs were being met safely.

Recruitment processes were robust to make sure people were cared for by suitable staff. There were sufficient numbers of staff deployed to meet people's needs.

Staff understood the requirements of the Mental Capacity Act 2005 and their responsibilities to ensure that people who were unable to make their own decisions about their care and support were protected.

There was an effective complaints system in place. People told us they were confident to raise any issues about their care and that they would be listened to and addressed.

People told us the service was well-led and managed by an effective and organised management team.

Systems were in place to monitor and improve the quality of the service provided.

Staff felt supported and valued in their work. There were systems in place to monitor the quality of the care provided and to ensure people received quality care.

Further information is in the detailed findings below.

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 remains safe.

Good ●

Is the service effective?

The service remains effective.

Good ●

Is the service caring?

The service remains caring.

Good ●

Is the service responsive?

The service remains responsive.

Good ●

Is the service well-led?

The service remains well led.

Good ●

Everycare (Central Hants) 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.

This inspection took place on 11 and 12 February 2019 and was announced. The provider was given 48 hours' notice of the inspection to ensure that staff and people receiving care and support would be available to speak with us. The inspection team consisted of one inspector and an expert by experience. An expert by experience is a person who has experience of using or caring for someone who uses this type of care service.

Before this inspection, we asked the registered provider to complete a Provider Information Return (PIR). This is a form that asks the registered provider to give some key information about the service, what the service does well and improvements they plan to make. We used this information to help with the planning for this inspection and to support our judgements.

On the first day of our inspection we visited the office location and spoke with the registered manager and nominated individual. We reviewed care records and documents relating to four people's health and well-being. We also viewed recruitment records for four staff members, staff training records and quality audits. Our expert by experience telephoned and spoke with 12 people and the relatives of four people using the service to obtain feedback on the delivery of care and support. On the 12 February 2019 we telephoned and spoke with four members of staff.

We looked at the information we held about the provider and this service, such as incidents, or injuries to people receiving care, this also includes any incidents of abuse. We refer to these as notifications and providers are required to notify the Care Quality Commission about these events.

We asked the local authority if they had any information to share with us about the services provided however we did not receive a response to our request.

Is the service safe?

Our findings

At the last inspection on 14 December 2016, we rated this key question as 'Good.' At this inspection the rating remains Good.

People consistently told us they received safe care, one person said, "Yes, I feel safe with the carers, I trust them". Another person told us, "I certainly feel safe with them, they're very attentive and do things by the book". One relative told us they were happy with the safety measures in place, they said, "We have confidence that our loved one is safely cared for".

The provider had taken appropriate steps to protect people from the risk of abuse, neglect or harassment. Staff were aware of their responsibilities in relation to safeguarding. They could describe the different types of abuse and what might indicate that abuse was taking place. Staff told us there were safeguarding policies and procedures in place, which provided them with guidance on the actions to take if they identified any abuse.

Safe recruitment processes were in place. Staff files contained all of the information required under Schedule 3 of The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Application forms had been completed and recorded the applicant's employment history, the names of two employment referees and any relevant training. A Disclosure and Barring Service (DBS) check had been obtained by the provider before people commenced work at the home. The Disclosure and Barring Service carry out checks on individuals who intend to work with vulnerable children and adults, to help employers make safer recruitment decisions.

There were sufficient numbers of staff deployed to meet the people's needs. Staff told us they knew the people they supported well and were allocated to work with them on a regular basis so they were able to provide a consistent service. This was confirmed by the relatives we spoke with. One relative told us, "It's usually the same carer most of the time. It only changes when they have a day off but the other carer that comes knows what to do so we don't really notice anything differently".

Risk assessments were completed to help staff support people safely and to minimise risk whilst ensuring people could make choices about their lives. These included people's mobility, nutrition and medicines. The service had carried out comprehensive environmental, health and safety and home working risk assessments which included information about action to be taken in order to minimise the risk of harm occurring to people and the staff supporting them.

The service used an electronic monitoring system to help ensure that people received their care at the agreed times. Each member of staff was provided with a mobile phone that contained details of care plans, risk assessments and additional information to ensure care was delivered safely. Staff recorded their visits and completed daily care records using this system. It also monitored the safety of staff who often worked alone. Staff were required to log their arrival and departure times at a person's home. The system used a 'live view dashboard' which gave the service an overview of care events / visits as they happened. An alert system was in place, which notified office or on call staff if a member of staff had not arrived at a person's

home at the agreed time, or if specific care tasks such as administration of medicines had not been undertaken. This enabled the service to monitor the whereabouts and safety of their staff whilst working in the community and helped ensure that people received their care visits as planned.

There were arrangements in place to ensure that staff had access to management support out of office hours in the event of an emergency. The registered manager told us they were always available outside these hours should staff or people need advice or support. Staff and relatives of people confirmed they could contact management at any time, night or day, for advice, guidance and support.

The service had an up to date business continuity plan date December 2018, that outlined actions to be taken in the event of an emergency to ensure people were kept safe. For example, if there was inclement weather the use of a 4 x 4 vehicle and plans to prioritise visits for those people that were isolated or did not have any other support.

There were systems in place to ensure that medicines were managed safely. Staff had all received training to administer medicines when people were unable to do so for themselves. The service maintained a record of people's medicines using the electronic monitoring system which enabled staff to efficiently update people's medicine administration records (MAR) on each visit. A relative told us, "The staff are very good with the medicines. They always get them a glass of water to help them swallow their pills".

Accidents and incidents were appropriately recorded and analysed to identify any trends. Staff were aware of the reporting process for any accidents or incidents that occurred in people's own homes. A staff member described the actions they would take in the event of an incident which showed us that people's safety and wellbeing was at the forefront of the care and support provided.

The registered manager had arrangements in place to manage and monitor infection control practices. Personal Protective Equipment (PPE) were available for staff to use as needed.

Is the service effective?

Our findings

At the last inspection on 14 December 2016 we rated this key question as 'Good.' At this inspection the rating remains Good.

Relatives told us people were cared for by staff who had the skills and knowledge to meet people's needs. One relative told us, "They [staff] are very good at providing my relatives care. They know what they are doing". Another relative said, "They do everything we as a family ask and more. We couldn't wish for better".

People felt staff were competent to deliver the care they needed and told us staff were flexible with the support they provided. One person told us, "The carers are excellent and always check with me if there's anything else I want them to do, or stop doing, when they visit me. I just have to ask them, they never make me feel it's any bother for them". Another person told us, "They're well trained and if it's a new carer they always ask me first before they do something". A relative told us, "They're very professional and well trained, they log everything they do electronically and I have access to this via my own electronic device. The girls [care workers] are great, they call the doctor when needed".

People received timely support to access healthcare services and professionals when they needed this. One person told us, "Recently I felt unwell when my carer visited. She [care worker] picked this up and after talking to me was able to arrange for the doctor to come and see me at home straight away". The service supported people flexibly to meet people's healthcare needs. One person said, "If I let them [care staff] know I have a GP appointment, or something like that, they are very flexible and will come earlier or later that day to fit around my appointment time".

All new staff employed had undergone an induction which included the standards set out in the Care Certificate. The Care Certificate is an identified set of standards that health and social care workers adhere to in their daily working life.

Staff completed annual development training on a number of subjects that related to the people they were supporting. These subjects included, prevention and control of infection, safeguarding adults, dementia awareness and basic life support. Staff were very positive about the training they received. One staff member told us, "If I need extra training I only have to ask". Another member of staff told us, "The training on offer covers everything I need to help me care for people well. I only have to ask for training and it is arranged". The registered manager told us, "We now have a dementia champion and are rolling out a programme over the next few weeks to become a recognised dementia friendly service. We want our staff to fully understand how dementia can affect people and how we as carers can make a difference".

Staff told us they felt supported in their role, and were provided with regular one to one supervision meetings, spot checks / working supervisions (direct observations) and an annual appraisal. Records showed that staff were provided with the opportunity to discuss the way that they were working and to receive feedback on their work practice. For example, a review of supervision meetings evidenced that specific subjects were discussed such as, safeguarding, risk management and staff well-being.

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 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 decisions, any made on their behalf must be in their best interests and as least restrictive as possible. We checked whether the service was working within the principles of the MCA and found them to be compliant.

Staff had completed training in relation to the Mental Capacity Act 2005 (MCA) and understood how to make sure people who did not have the mental capacity to make decisions for themselves had their legal rights protected. The registered manager and nominated individual told us they would work with family members and other healthcare professionals if they had any concerns about a person's mental capacity to consent to their care and support and to reach a shared decision about what might be in the persons best interest.

People's dietary and hydration needs were an important focus during assessment and care planning. People's likes, dislikes and preferences about food and drink had been recorded in their care plan. The guidance given was personalised and reflected people's individual choices. A relative of one person who had their meals prepared by staff told us they were always asked what they wanted to eat and staff knew their dietary requirements. Staff fully understood the need for people to eat well and to have good hydration to maintain their wellbeing. The registered manager told us if people were not eating or drinking adequate amounts, staff would report it and this would be passed on to their GP or family.

Is the service caring?

Our findings

At the last inspection on 14 December 2016, we rated this key question as 'Good.' At this inspection the rating remains Good.

People were positive about the care and support delivered by the service. One person told us, "The carers are a good crowd. Nothing's too much trouble for them. They're very obliging and punctual, we get on very well". Another person told us, "She's [care worker] like a friend to me now. Very caring lovely person". One relative said, "They are marvellous, I really don't know what we would do without their support. As a family we have peace of mind knowing they are safe and well cared for".

Relatives told us they were involved, together with their loved ones in making decisions about their care and support provided and told us that staff respected people's choices and preferences. One relative told us, "We were all involved in arranging the care [person's name] needed. We sat down with [name of registered manager] and together we sorted out what care we needed. The registered manager calls in very regularly to make sure everything is working well". Another relative told us, "They always encourage [name] to do what he can for himself even if it's with their support. They never assume anything and won't do anything unless it's agreed". A member of staff told us, "It's very important to ensure people are encouraged to maintain as much independence as possible. I always ask how they are and how I can support them. I never assume they can or can't do something for themselves".

Staff spoke about the importance of developing good positive relationships with the people they supported and their families. They spoke about people respectfully and described the importance of valuing people, respecting their rights to make decisions about the care they received and respecting people's diverse needs. One member of staff told us, "I live and work with the person I support and I feel very much part of their family. It's important I have a good relationship not only with the person I care for but also the family".

Staff could tell us how they made sure people received support with their personal care in a way which promoted their dignity and privacy by closing doors and covering people whilst providing personal care. One member of staff described how they gave people time to complete their personal care themselves where possible, for example they waited outside the toilet or bathroom until the person asked for their support.

The provider had received many compliments relating to the service and delivery of care. Comments included, 'Your carers are thoughtful, caring and yet professional and friendly', 'Thanks for an excellent service, you chose your staff well', 'They [Everycare], are always kind, patient and reliable. They help me lead and enjoy a good life' and 'The reassurance I had knowing you were their when I couldn't be is something I will always be grateful for'.

Is the service responsive?

Our findings

At the last inspection on 14 December 2016, we rated this key question as 'Good.' At this inspection the rating remains Good.

People's needs were assessed before they started to receive support from the service. The information gathered included people's preferences, backgrounds and personal histories. This enabled staff to know people well. One person's care plan stated that staff should ensure that the person's, 'Daily routine is not altered in any way'. This supported the person to maintain positive control of the way their daily care was provided and their preferred routines.

Since our previous inspection the service had introduced an electronic care planning system. The provider told us that the system in place allowed any changes to people's condition or needs could be amended immediately. This was confirmed by a person who told us, "My care plan is amended all the time and things go along very well. Where there are changes it's done immediately". The provider shared examples of how they responded to short term changes in people's needs, such as if they had an illness. This included amending their care plans including guidance for care workers on how the needs had changed and how they were to provide care for people. Care workers accessed the records on the secure electronic system which allowed them to check any changes prior to their visits.

The provider had a complaints policy which set out the process and timescales for dealing with complaints. This was provided to people when they started to receive care and support. There had been seven recorded complaints since our last inspection which had been appropriately investigated by the registered manager. Relatives told us they were confident that if they needed to make a complaint the provider would take this seriously. One relative told us, "I don't feel I ever need to complain. If things are not quite right a conversation with the manager or office staff is usually enough".

The service had systems in place to ensure that if required people had access to the information they needed in a way they could understand it and were complying with the Accessible Information Standard. The Accessible Information Standard is a framework put in place from August 2016 making it a legal requirement for all providers to ensure people with a disability or sensory loss can access and understand information they are given. The registered manager told us, "We do have a few people who are visually impaired. We always arrange for any documentation in this regard to be in large print if that is what the person wants. We also have the facility to send our service users large print versions of our time sheets if they so wish".

Is the service well-led?

Our findings

At the last inspection on 14 December 2016, we rated this key question as 'Good.' At this inspection the rating remains Good.

People, staff and relatives told us they felt the service continued to be well led and spoke positively about the registered manager. One person told us, "Yes I think the service is well run. I've met the manager, there is always someone you can contact day or night. I'm very happy with them and I would recommend them". Another person said, "I see [name of registered manager] quite often. She comes out sometimes to do my care. It's nice to see her get involved". One relative told us, "Yes I think it's well run. I've certainly had no issues". Another relative told us, "I find the manager to be very approachable. They always return my calls and if I have a problem she [registered manager] comes to visit me and we sort it out". One member of staff told us, "I feel very happy working here. The registered manager is very supportive and always at the end of a phone if I need help or guidance".

There were clear lines of accountability and responsibility. Staff confirmed the registered manager and management were readily contactable for advice and support and all staff said management were approachable and they felt able to raise concerns without hesitation. One member of staff told us, "I feel very well supported by the registered manager. They really do work with us and for us to help us deliver the very best care".

Systems were in place to monitor and improve the quality of the service. The service had a comprehensive system in place to obtain feedback from people about the quality of the service they received through review meetings, telephone monitoring and home visits.

The registered manager explained that the service was in regular contact with people so that they were able to build close relationships with them and ensure they felt comfortable raising issues with management.

The service undertook a range of audits of the quality of the service and acted to improve the service as a result. Audits had been carried out in relation to care documentation, safeguarding, medicines, complaints and training.

The provider hosted a 'community event' regularly under the heading 'Tech Fest' Tackling modern technology for the over 65s'. It's aims were to give hands on help to people who wanted a greater understanding in using modern technology such as smart phones, tablets and laptops etc. The events were open to the public, well attended and the feedback was positive. Comments included, "The event was very informative – need more!", whilst another added: "Very good day – helpful, relaxed and altogether easy. Look forward to the next time. Can see how people have improved from being here. Well done". The nominated individual told us how initially the event was supported by a global telecoms provider however future events which were free of charge would be hosted solely by Everycare and they aimed to hold two to three events a year.

The service had up to date policies and procedures in place to guide and inform staff practice. People's care records and staff personal records were stored securely in the provider's office which meant people could be assured that their personal information remained confidential.