

Brew and Clapp Service Limited

Kare Plus Warrington

Inspection report

Mayne House
Marsh House Lane
Warrington
WA1 3QU

Tel: 07393386707

Website: www.kareplus.co.uk/warrington

Date of inspection visit:
02 July 2019

Date of publication:
31 July 2019

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:

Kareplus Warrington is a domiciliary care agency registered to provide personal care to adults who live in their own homes. At the time of the inspection the service was providing personal care to 30 adults.

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:

People received a consistently good service and felt safe with the support they received from the staff.

Staff were reliable, caring and professional in their approach to their work. People told us of staff being very considerate and paid attention to detail.

The service assessed people's needs and worked in close partnership with healthcare professionals and families to ensure people's health care needs were met. This was particularly well managed in providing end of life care to people.

We received positive feedback from health and social care professionals about the service provided and the open nature of the management team.

People were safeguarded against the risks of abuse and harm by the systems and by the staff training in place. Risks to people were assessed and mitigated. When incidents took place, the provider reflected on events to help reduce the risk of these happening again.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service supported this practice.

Staff had access to a comprehensive training programme developed by the company. Staffing levels were continuously reviewed to ensure there were enough staff to provide reliable, flexible and responsive care.

People and staff spoke of the manager's commitment to provide a high quality of service. One relative told us, "All the staff are so very supportive of us all, and if we raise any concerns with the manager these are dealt with in a sensitive and timely way."

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

Rating at last inspection:

This service was registered with us on 04/07/2018.

Why we inspected:

This was the first planned inspection.

Follow up:

We will continue to monitor intelligence we receive about the service until we return to visit as per our re-inspection programme. If any concerning information is received 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 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 Warrington

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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Inspection team:

One adult social care inspector and an Expert by Experience carried out the 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 homes. At the time of the inspection it was providing care and support to 30 adults.

The service had a manager who was in the process of being 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 24 hours' notice of the inspection visit to be sure the manager, staff and people they supported would be available to speak with us.

Inspection activity started on 28 June 2019 and ended on 12 July 2019. We visited the office location on 2 July 2019.

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 eight people who used the service and three relatives on the telephone about their experience of the care provided. We visited the office location and spoke with five members of staff including the owner, manager and care workers. We reviewed a range of records. This included four people's care and medication records. We looked at four 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.

This is the first inspection for this newly registered service. This key question has been rated good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were safe and protected against abuse and avoidable harm. All staff had safeguarding training and understood their role and responsibilities in protecting vulnerable adults from abuse. Staff were encouraged to raise concerns and challenge unsafe practise. We saw they had worked with the police on hate crime and successfully supported people to live safely in the community.
- People told us they felt safe receiving care and support from staff.

Staffing and recruitment

- The provider had systems to monitor staffing levels to ensure staff were in sufficient numbers to provide safe and individual care to people. The provider had introduced a new IT system to ensure all people had visits at the time requested and that the full allocation of time for the visit was being used.
- People told us they received a very reliable service and had never had a missed visit. They had the same staff team visiting them most of the time; with new care workers being introduced to them prior to starting.
- Staff recruitment practices were safe. The provider completed relevant checks before staff worked with people in their homes.

Assessing risk, safety monitoring and management; Preventing and controlling infection

- The manager made sure people were protected from avoidable harm by the thorough management of risks. Detailed risk assessments included the person's level of independence, risks in the environment, and medical risks.
- The provider had contingency plans for responding to emergencies to keep people, staff and others safe and these were regularly reviewed and updated as required.
- People were protected from the risk of infection by trained staff. Staff followed good infection control practices with risk assessments in place to reduce the spread of infection. People told us how staff carried out hand washing practices and wore gloves and aprons and disposed of these appropriately.

Learning lessons when things go wrong; Using medicines safely

- The service had robust systems in place to monitor and learn from incidents and accidents. The manager checked records for any themes or patterns and took preventative actions to reduce any future risks.
- Medicines were managed safely and the service followed good practice guidance.
- Staff had regular medicines training and competency checks to ensure they had suitable skills to carry out the task safely. Where there had been errors made with recording of medicines, these were quickly identified and measures put in place to keep people safe.

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 service. 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 guidance standards and the law

- The service thoroughly assessed new referrals to ensure people's health and care needs could be met. The care plans in place were regularly reviewed so staff knew people's current needs and could provide safe person-centred care. One family told us, "From our very first meeting with the manager for the assessment of needs at the hospital, the professionalism and compassion shown to us as a family by Kareplus has been excellent."
- The manager and provider kept up to date with new research, guidance and legislation and used this to train staff and help drive improvement. For example, they used a good practice tool "react to red" to train staff in the prevention of pressure sores. Healthcare professionals told us that staff were good at spotting changes and seeking advice so people received appropriate treatment.

Supporting people to live healthier lives, access healthcare services and support; staff providing consistent, effective, timely care within and across organisations: Supporting people to eat and drink enough to maintain a balanced diet

- The service was effective in supporting people to access healthcare services to promote their health and well-being. Staff understood people's healthcare needs and acted appropriately when they recognised changes in people's health. One relative told us, "They are always very quick to let me know if they have any concerns about [relatives] welfare and their knowledge of other services has been invaluable."
- People's care plans contained detailed information to support people to have enough to eat and drink. Any risks associated such as food allergies or swallowing problems had been included. Staff had a good understanding of people's nutritional needs. The manager ensured all staff received training on nutrition, malnutrition and hydration.
- The service worked very effectively with other agencies to ensure timely effective care. We received positive feedback from external professionals about the agencies multi-disciplinary working to ensure good outcomes for people they supported. We saw this was particularly effective for people receiving end of life care and for those people being discharged from hospital.
- The provider used technology to assist in the effective delivery of care. Care staff had phones for monitoring care visits and used Aps for sharing good practice and training updates. The system had details of people's levels of risk which were accessible to staff in an emergency.

Staff support: induction, training, skills and experience

- Staff were well supported and received a comprehensive training programme to equip them for the specific needs of people they were supporting. Staff praised the supportive relationship provided by the management team and told us they could be contacted at any time for advice and guidance.

- The manager had designed additional person-centred training to support people with more specialist health care needs by linking with the local hospice and specialist nurses. For example, training in catheter care and the use of syringe drivers. The provider had a training room which was set up with moving and handling equipment and the creative mock-up of a person's front room for staff to identify risk. Training was based on current best practice covering all aspects of Skills for Care and linked to the key lines of enquiry used by CQC.
- The service matched staff with the appropriate skills and attributes best suited to people's needs. This had led to a high degree of satisfaction expressed by people.

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 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 with appropriate legal authority. Where people are deprived of their liberty in their own homes, applications must be made directly to the Court of Protection.

We checked whether the service was working within the principles of the MCA.

- People's rights were protected. The service followed the MCA guidelines to ensure people's capacity was assessed and they were supported to make their own decision, wherever possible. People told us that staff sought appropriate consent to care prior to carrying out any tasks and this was recorded.
- Staff had completed training in the MCA and had a good understanding of the principles of the legislation.

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 service. 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

- Staff were kind and caring and treated people with respect. People talked very well of the service and told us of them 'going the extra mile'. One relative told us, "They care for him professionally with dignity, respect and utter kindness and compassion, that is extended to all the family."
- Each person had their life history recorded within their care records which staff used to get to know people and to build positive, caring relationships with them. People told us staff knew them well and cared for them in a considerate manner. One person told us, "It's the attention to detail that makes this agency good. They know my ways and stick to them."
- The manager and staff documented people's diverse needs and assisted them to maintain their different requirements. Key values of kindness, respect, compassion, dignity and empowerment were embedded throughout the recruitment and training and staff support process. All staff had training in human rights and equality and diversity awareness.

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

- The service cared about and valued the views of people who used the service. Staff recognised people's communication needs and what was important to people. Care records detailed how people had been involved in developing their care plans and detailed any communication support needs. For example, staff had been trained to understand the communication needs of people living with dementia.
- Information was readily available about local advocacy contacts, should someone wish to utilise this service. Advocacy seeks to ensure that people are able to have their voice heard on issues that are important to them.

Respecting and promoting people's privacy, dignity and independence

- People's right to privacy and confidentiality was always respected. Staff had a sensitive and caring approach when talking about the people they supported. They understood the importance of protecting and respecting people's human rights.
- People told us their independence was encouraged. One person told us, "They don't take over. They never rush and always listen to what I want on that day."
- The staff team were knowledgeable about accessing services so people could have equipment and adaptations to their homes to keep them both safe and promote their independence.
- The service ensured people's care records were kept securely. The language used in daily notes and care plans was respectful and was written in a positive manner. Information was protected in line with General Data Protection Regulations.

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 service. This key question has been rated good. This meant people's needs were met through good organisation and delivery.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control

- People had control over how their support was delivered. People were closely involved in developing person-centred support plans to give staff clear guidance about people's specific needs and how these were best met.
- The manager and senior staff acted responsively to people's changing needs by rearranging care visits, scheduling additional care and contacting professionals to help ensure people had the support they required.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- The service ensured people had access to the information they needed in a way they could understand it and complied with the Accessible Information Standard.
- People were given information in different formats such as large print or in different languages.

Improving care quality in response to complaints or concerns

- People knew how to provide feedback about their experiences of care and the service provided a range of accessible ways to do this. The people we spoke with were all happy with the service they received and had no complaints. They told us they knew how to make complaints and felt these would be listened to and acted upon.
- The provider had a complaints policy. This detailed how people could make a complaint and how these concerns would be investigated. The policy also detailed external agencies that concerns could be referred to such as the local authority.

End of life care and support

- People were supported to have a dignified and pain-free death. The service worked effectively with other agencies, such as GPs and hospice services. The service had policies and procedures and staff had training in the end of life care. People's religious beliefs and preferences were respected and recorded in their care plans. Relatives of those people receiving end of life care were hugely positive about the support given to the whole family by the service.

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 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; Continuous learning and improving care

- The manager and staff team demonstrated a commitment to providing person-centred, high-quality care. People's wishes were highly respected and care was arranged around people's preferences and requirements.
- Health and social care professionals spoke positively about the service. They told us the manager was proactive and involved in a number of different initiatives to improve social and healthcare in the local community. One of these was to review the effectiveness of care delivery with the local authority to reduce care staff travel.
- The manager and staff had a good understanding of equality, diversity and human rights. This was embedded and under-pinned in policies and practices of the organisation and ensured safe, high-quality, compassionate care.
- The manager used relevant legislation and best practice guidelines to drive improvement. For example, using current good practice in dementia care from the National Institute for Health and Care Excellence.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; 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 service was well-organised with clear staffing structures and a well-developed staff development programme. Staff told us they were very well supported and the manager actively encouraged them to feel part of developing the service. Regular team meetings, informal get-togethers and drop-ins promoted engagement and a sense of belonging.
- People spoke positively about how the service was managed. They informed us the manager and senior staff were approachable and had a good understanding of people's needs and backgrounds.
- Kareplus Warrington had a strong emphasis on continually striving to improve the service to deliver the best possible care for people supported. The provider and manager carried out regular audits that included medication, complaints, financial records, training, staff supervision arrangements and reviewing care plan records. Any issues found on audits were quickly acted upon and any lessons learnt to improve the service.
- The provider had developed policies and procedures and training around the duty of candour responsibility if something was to go wrong. We saw they contacted families and other professionals and had notified CQC of any incidents they were required to tell us about.

Working in partnership with others; Engaging and involving people using the service, the public and staff,

fully considering their equality characteristics

- The service worked proactively in partnership with other organisations which ensured they followed current practice, provided a quality service and to ensure people they supported were safe. Staff attended local health and social care forums and were part of networks to improve the quality of social care.
- The service supports and encouraged staff to promote equality in how people were treated by the service and the community at large. We saw examples where they had worked to ensure people had equal access to healthcare.
- The manager listened and responded to the views of the people they supported and their family members through annual satisfaction surveys. People were also actively encouraged to comment on care plans and feedback to the management team through regular review meetings.
- Staff spoke positively about the support they received from the management team. They told us senior staff were very approachable and available for advice and support. One member of staff told us, "The manager is really good at listening. If we speak up about an issue there's never any blame. They always say tell us so we can help sort things out."