

Durham Tees Care Ltd

Kareplus Durham

Inspection report

Pinetree Centre, Durham Road
Birtley
Chester Le Street
DH3 2TD

Website: www.kareplus.co.uk/durham

Date of inspection visit:
30 April 2021
05 May 2021
12 May 2021
18 May 2021

Date of publication:
07 June 2021

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 Durham is a domiciliary care service providing care and support to people living in their own homes. The service is registered to provide personal care to younger adults, older people, people living with dementia, people living with mental health issues and people living with physical disabilities. Personal care is help with tasks related to personal hygiene and eating. At the time of inspection two people were receiving personal care.

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

People said they received good care and staff were kind and caring. Staff treated people with dignity and promoted their independence. People said they were happy with the care provided.

Risks were identified and managed appropriately. Recruitment procedures were robust. There were enough staff to meet people's needs and people were protected from the risk of abuse. Staff had been trained in infection prevention and control and used personal protective equipment to help keep people safe. Calls were on time and lasted for the correct duration.

Staff had the skills and knowledge to carry out their role effectively. Staff training in relevant areas was up to date. People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

Care records were person-centred and reflected people's current needs. People were involved in decisions about their care. Staff were aware of people's communication needs and how best to support them. There was an appropriate complaints process in place, although no formal complaints had been received.

People's views and opinions of the service were sought and acted on. People told us the service was well-managed. Effective systems were in place to monitor the quality of care and support provided. We found the management team receptive to feedback and keen to improve and develop the service. The registered manager worked with us in a positive manner and provided all the information we requested.

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 25 November 2019 and this is the first inspection.

Why we inspected

This was a planned inspection as the service had not previously been rated.

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 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 ●

Kareplus Durham

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

One inspector carried out this inspection.

Service and service type

This service is a domiciliary care agency. It provides personal care to people living in their own homes.

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

This inspection was announced. We gave a short period of notice of the inspection because we needed to make arrangements to ensure the registered manager was available and to contact people to gather their feedback.

Inspection activity started on 19 April 2021 and ended on 18 May 2021. We visited the office location on 12 May 2021.

What we did before the inspection

We reviewed information we had received about the service since they were registered with us. This information helps support our inspections. We used this information to plan our inspection.

The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service

and made the judgements in this report.

During the inspection

We spoke with one person who used the service. We sought feedback from two relatives via email and received no responses.

We spoke with three members of staff including the registered manager, the care co-ordinator and the nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider. We sought feedback from two care staff via email and received one response.

We reviewed a range of records. This included two people's care records and three staff recruitment files. 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 protected from abuse and harm. Staff had completed appropriate training and had access to policies and procedures. They understood how to raise any concerns about poor practice.
- The registered manager and staff were clear about when to report incidents and safeguarding concerns to other agencies.
- One person told us they felt safe with the staff who visited them. They said, "I definitely feel safe as I love the staff. They're friendly and always smiling."

Assessing risk, safety monitoring and management; learning lessons when things go wrong

- Risks to people's safety and welfare were identified and well managed. People's care plans included risk assessments about current individual care needs and their home environment. Control measures to reduce such risks were set out in care plans for staff to refer to.
- Although no accidents and incidents had occurred, the provider had systems to ensure these could be appropriately recorded and lessons could be learnt. This included sharing the outcome of incidents with the staff team to further improve the safety of the service.
- Staff had completed relevant training to support them to record any safety issues appropriately.

Staffing and recruitment

- Recruitment procedures were safe and thorough. Staff files contained references and other appropriate background checks.
- There were enough staff to meet people's needs safely. People received consistent care from staff who knew them well. One person told us calls were on time and lasted for the correct duration.

Using medicines safely

- The service was not currently supporting anybody with their medicines. The registered manager had identified appropriate training for staff should this be needed in the future.

Preventing and controlling infection

- Staff had completed training in infection prevention and control and were provided with the personal protective equipment they needed.
- The provider had relevant policies in place to support effective infection prevention and control.

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 standards, guidance and the law

- People's care needs were assessed before they started to use the service. Care records included information about people's choices and preferences which staff respected.
- Care records included evidence of people's consent to their care and support. One person confirmed consent was sought appropriately.

Staff support: induction, training, skills and experience

- Staff had the skills and knowledge to carry out their role effectively. Staff had completed training in relevant areas to ensure they could carry out their role safely and competently.
- One person told us they were happy with the support they received. They said, "The staff seem well-trained. If they're not sure of anything they always check first."
- Staff had the opportunity to discuss their training and development needs at regular supervision meetings. Staff told us they felt well supported.

Supporting people to eat and drink enough to maintain a balanced diet

- Staff supported people with eating and drinking where the care package required it. One person told us, "Staff always listen to what I say and respect my decisions."

Staff working with other agencies to provide consistent, effective, timely care; supporting people to live healthier lives, access healthcare services and support

- People's records included contact details for GPs and immediate family members, and information about individuals' healthcare conditions. This helped staff recognise any deterioration in health so they could contact people's relatives and health and social care professionals.
- Staff supported people to attend appointments with health professionals where appropriate. One person told us, "If I have a hospital appointment, they're always flexible and will change my call time so staff can take me."

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 when this is in their best interests and legally authorised under the MCA. When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty. We checked whether the service was working within the principles of the MCA and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- At the time of the inspection nobody using the service was subject to restrictions of their liberty under the Court of Protection, in line with MCA legislation.
- One person told us they were involved in decisions about their care.

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

- People were supported by a kind and caring staff team. One person spoke positively about the service and the care provided. They said, "It's a caring, friendly and respectful service. I can tell the staff absolutely anything. They always listen to what I say, and I can ask for their advice if I need it. The staff treat me like their equal; they never ever talk down to me. The staff are definitely caring and always treat me with dignity."
- People told us staff supported and encouraged them to maintain their independence, which was important to them. People told us how much they valued the service as it enhanced their life.
- Care plans reflected people's communication needs, for example, if a person had a hearing impairment, and how staff could support them with this.

Respecting and promoting people's privacy, dignity and independence

- People, and where appropriate families, were consulted about the care they needed and how they wished to receive it. People told us they were involved in developing their care plans and their views were listened to and respected.
- People's information was stored securely and used appropriately in line with the provider's policies and government 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 ensure people have choice and control and to meet their needs and preferences

- People received care and support that was focused on their individual needs, preferences and the things which were important to them.
- The management team and staff understood the importance of promoting equality and diversity and respecting individual differences. Staff we spoke with knew people's needs and preferences well.
- Staff were responsive to people's changing needs. One person said, "Whenever I don't feel well, I tell the staff and they do something straight away."
- Care plans reflected people's current needs.

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 was meeting the AIS. People's communication needs were assessed and appropriate measures were put in place to support them.
- Care plans contained relevant information about people's communication needs and information could be provided in different formats if this was required.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- People were supported to attend events and activities they valued, if this was in line with their care plan.
- Care records included information about important relationships.

Improving care quality in response to complaints or concerns

- One person we spoke with knew how to complain, although they had never needed to. The service had not received any formal complaints since opening. Appropriate procedures were in place to handle complaints and informal concerns.

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

- Staff were committed to promoting positive outcomes for people who used the service. Staff were familiar with the aims of the service and the quality of care expected.
- Staff knew people well and encouraged people to make decisions about their care and support. One person told us they were satisfied and happy with the service.
- Staff were committed to providing high standards of care and support. Staff told us the registered manager was approachable and supportive.
- Care records were person centred and people had been involved in their development and review.

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 registered manager understood their responsibilities regarding the duty of candour.
- Good relationships had been developed between management, staff and people using the service and their relatives. When improvements were identified these were discussed in staff meetings.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; continuous learning and improving care

- The registered manager undertook a range of regular audits and checks to help ensure high standards were maintained. All aspects of the service, including spot checks on staff practice were monitored. When shortfalls were discovered, improvements were actioned.
- The registered manager was open and responsive to our inspection feedback. They were passionate about the service and committed to continuous improvement.

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

- Feedback from people who used the service and their families was regularly sought and acted upon. One person told us the service was well-managed.
- Staff said they had plenty of opportunities to provide feedback.

Working in partnership with others

- The service worked in partnership with other professionals and agencies to enable effective co-ordinated care for people.

