

Homecarers (Liverpool) Limited

Homecarers Liverpool Limited

Inspection report

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Homecarers Liverpool Limited is a domiciliary care agency providing personal care to 521 people at the time of the inspection. The service supports people living in Liverpool, Knowsley and Wirral.

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's experience of using the service was mostly positive. People were happy with the staff who visited them and felt safe with the support they provided. People received visits from regular staff most of the time. However, some people were unhappy at not being able to get through to the office to amend their service or report a late or missed call. We found that the number of office staff available to answer telephone calls had reduced during the current times. To manage a sudden outbreak of COVID-19; half of the office staff were working at home so that continuity of the service would be maintained. This meant that people were left waiting for their call, uncertain if the carer was due to arrive.

People spoke positively about the staff. Their comments included, "I like the help I get. I feel safe when they are helping me (having a shower)", "The service is brilliant. We have no problems.", "I'm happy with the support. I feel safe because the carers wear masks and gloves", "I feel safe around my carer, but it does worry me that it takes so long for the office to answer calls" and "I'm very happy. The staff are very clean, polite and respectful".

Staff had received additional training for infection control because of the COVID-19 pandemic. They had a regular supply of personal protective equipment (PPE) such as masks, aprons and people told us staff always wore this.

People using the service and staff were involved in the development of their care through regular reviews meetings and surveys. The latest survey showed that people were satisfied with their care.

Staff had been recruited safely. There were sufficient numbers of staff employed to support people. Staff received regular training and support. Staff told us they enjoyed working for the service.

The management team completed regular quality audits and where actions were identified these were addressed to bring about improvements. The service worked effectively with other professionals.

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 good (published 21/11/2017)

Why we inspected

This was a planned inspection based on the previous rating. We undertook a focused inspection to review the key questions of safe and well-led only. No areas of concern were identified in the other key questions. We therefore did not inspect them. Ratings from the previous comprehensive inspection for those key questions were used in calculating the overall rating at this inspection.

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?

Good ●

The service was safe.

Details are in our safe findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-Led findings below.

Homecarers Liverpool Limited

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

The inspection was carried out by an inspector and two Experts 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

Service and service type

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

The service did not have a manager registered with the Care Quality Commission. However, the current manager had submitted their application to be the registered manager at this service. 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. This was because we needed to be sure that the provider or manager would be in the office to support the inspection.

Inspection activity started on 3 November 2020 and ended on 6 November 2020. We visited the office location on 6 November 2020.

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 all of 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 31 people who used the service and 11 relatives about their experience of the care provided. We spoke with eight members of staff including the managing director, manager and care workers.

We reviewed a range of records. This included four people's care records and multiple 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.

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- The provider had effective safeguarding systems in place.
- Safeguarding concerns raised on inspection were reported and investigated.
- Staff understood their safeguarding responsibilities and said they would have no issue in reporting concerns to managers.
- The office is staffed from 7am to 10 pm each day. Twice daily hand overs take place to inform new team of any issues. Coordinators checked the Electronic Call Monitoring (ECM) system before leaving for any outstanding calls.

Assessing risk, safety monitoring and management

- Risk assessments were completed and regularly reviewed to ensure they reflected people's current needs.
- People said they felt safe. Most people had visits from regular staff but said that changes occurred when staff were on holiday or staff absence.
- Some people were not happy with their service. We followed these issues up with the manager during the inspection. Some of the issues were resolved; some were not accurately reported to us.
- People's comments included, "I trust the carers when they are here; I feel safe", "I feel safe in the carers company. They are very careful with COVID-19; they use apron, gloves and a mask" and "I am happy with the service; they (carers) always make sure I'm ok. They make me feel safe just being there and helping me with my medication".

Staffing and recruitment

- Staff had been recruited safely to ensure they were suitable to work with vulnerable people.
- There were enough staff to support people's needs. Recruitment of new staff was ongoing.

Using medicines safely

- People received their medicines at the right time.
- Medication Administration Records were completed appropriately.
- Managers regularly assessed staff's competence to administer medicines.

Preventing and controlling infection

- The provider's infection prevention and control policy and risk assessments had been updated to reflect the current situation during the COVID-19 pandemic.
- Personal protective equipment, such as gloves, masks, visors and aprons, was available to help staff maintain infection control.

- Staff had been advised and kept up to date with the requirements of which protective equipment (PPE) to wear

Learning lessons when things go wrong

- Incidents and accidents were recorded.
- Senior staff including the manager reviewed the records to identify what needed to be done to prevent reoccurrence and for any common themes and trends.

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 Good. At this inspection this key question has remained the same. 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

- Most people received their support to meet their needs at a time which suited them.
- Some people had found it difficult to contact staff at the office to report their late calls or amend their service since the outbreak of COVID 19.
- We followed these issues up with the manager and were reassured no one using the service was at risk.
- The manager told us in order to manage the service half of the office staff were working from home. This arrangement was part of the business continuity plan, in case of an outbreak of COVID 19 at the office premises.
- Staff told us they enjoyed working for the service. They spoke of a positive team morale and good support from managers. One staff said, "[Name of manager] is brilliant; always at the end of the phone." Another staff said, "Managers check on our welfare. You can always get in touch with them."
- The provider had a complaints process. Complaints were recorded and investigated according to the policy.

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

- Quality assurance systems were effective. Regular audits were completed; these included, reviews of medication administration records, accident and incident reports, care record reviews as well as call monitoring data.
- The manager and provider notified CQC of specific events as required as well as complying with duty of candour responsibilities.
- Ratings from the last inspection were displayed in the office and on the providers website as required.
- Relatives had access to the electronic system to see information recorded by staff about their family member. Relatives said this provided reassurance that visits taken place.

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

- People's opinion of the service was sought. Any negative feedback or issues were investigated.
- Regular reviews took place for people using the service to ensure the support was meeting their needs.
- Staff felt communication from managers and support for themselves was good.

Continuous learning and improving care

- The managing director, manager and designated compliance staff reviewed reports daily, weekly and monthly to monitor the service and drive improvement.
- Action plans from complaints, audits and the annual customer survey were completed to structure improvement of service provision.

Working in partnership with others

- The manager worked with the neighbouring local authorities and healthcare providers.
- Feedback from local authorities and other commissioners confirmed that any current concerns they had about the service in relation to late and missed calls were being discussed in an effort to resolve the issues.
- Staff described how they reported concerns and worked with healthcare professionals.