

Momo & Tarek Care Limited

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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

Momo & Tarek Care Limited is a domiciliary care agency which provides personal care to people in their own homes. At the time of our inspection the service was providing the regulated activity personal care to four people living in Coventry. CQC only inspects the service being received by people provided with 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 and their relatives spoke positively about the service they received. Staff and the management team knew how to keep people safe and protect them from harm. Staff were recruited safely. Risk associated with people's care and their home environment were identified, assessed and well managed. Staff were trained in medicine management and knew how to support people to take their medicines safely. The prevention and control of infections were managed in line with government guidance and the provider procedures.

People and their relatives had confidence in the ability of staff to provide effective care. Staff development was supported through an induction when they started work and ongoing training to help them provide effective care to people. People had access to healthcare professionals to ensure that their ongoing healthcare needs were met.

People received person centred care and had developed positive relationships with staff who they described as 'caring'. Staff had a good understanding of the care and support people needed and provided this safely with care, kindness and compassion. People's right to dignity and privacy were respected and their independence was promoted.

Care plans were developed in partnership with people to ensure they reflected people's preferences, religious and cultural beliefs and values. People and their relatives knew how to make a complaint. The management team encouraged people, relatives and staff to provide feedback about the service. Feedback was used to drive forward improvement and learn lessons.

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.

The registered manager had systems and processes in place to learn from incidents and events at the service. There were processes in place to monitor and review the quality of the service provided, for example, audits of care records. The provider had a contingency plan in place, to minimise any risks to the service running safely in the event of, for example adverse weather conditions. Staff felt supported by the management team, who worked in an open and transparent 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 22/06/2020 and this is the first inspection.

Why we inspected

This was a planned inspection to provide a rating for the service.

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 effective?

Good ●

The service was effective.

Details are in our effective findings below.

Is the service caring?

Good ●

The service was caring.

Details are in our caring findings below.

Is the service responsive?

Good ●

The service was responsive.

Details are in our responsive findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-Led findings below.

Momo & Tarek Care 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

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 houses and flats. 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 24 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the provider or registered manager would be in the office to support the inspection.

What we did before the inspection

We reviewed information we had received about the service. 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. We used all of this information to plan our inspection.

During the inspection

We spoke with two people who used the service and three relatives about their experience of the care provided. We spoke with four members of care staff. The registered manager was unavailable during the inspection due to unplanned leave, so we spoke with the deputy manager.

We reviewed a range of records including four people's care records. We looked at three staff files in relation to recruitment and staff supervision and reviewed records relating to how the service operated and was managed.

After the inspection

We looked at staff training records and 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 and relatives felt safe with staff. One person told us, "I feel safe and well supported, I trust her (staff member)."
- Staff received training in safeguarding adults and demonstrated they understood their responsibilities to report any related concerns to the management team. Staff were confident any issue reported would be addressed.
- The deputy manager understood their responsibility to report concerns to the local authority and to us (CQC) to ensure any allegations or suspected abuse were investigated.

Assessing risk, safety monitoring and management

- People's care and support needs were assessed before the service started, to ensure these could be met.
- Risks associated with people's care and their home environments had been assessed and regularly reviewed. Up to date risk assessments informed staff how to provide safe care.
- Staff demonstrated a good understanding of how to manage risks. One staff member said, "[Person] is at risk of falls. I recently arrived to find they had fallen, I immediately checked for injuries and reassured them." The staff member explained they had waited with the person until the ambulance arrived and then updated the person's care records.
- The provider had a contingency plan to minimise any risks to the service running safely in the event of, for example adverse weather conditions.

Staffing and recruitment

- People received their care calls at the agreed times. One person said, "Staff are always on time."
- Staff were recruited safely and there were enough staff to provide people's planned care calls.
- The provider had an electronic system in place to monitor the time staff arrived and left people's homes. The management team checked staff had arrived at each care call via the provider electronic system to ensure people had received their planned care. This ensured any late or missed care calls were quickly identified and addressed.

Using medicines safely

- At the time of this inspection, the service was not supporting people with their medication. However, staff have received training to administer medication safely, if people's needs changed.

Preventing and controlling infection

- People told us staff wore personal protective equipment (PPE). One person said, "They all wear PPE to

keep us safe."

- Staff received training in infection control and demonstrated they understood the importance of this, to keep people they supported safe. One staff member described how they, 'regularly washed their hands and changed PPE during care calls.'
- Staff accessed PPE from a stock held at the office.

Learning lessons when things go wrong

- The registered manager had systems and processes in place for recording and reviewing accidents and incidents to identify patterns and trends to prevent reoccurrence. There has been no recent accidents and incidents recorded.

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 as 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; Staff support: induction, training, skills and experience

- People and their relatives had contributed to the assessment of people's care needs, to ensure that they reflected the person's health, wellbeing, communication, religious and cultural needs and how they wished to be supported.
- Information gathered during assessments was used to develop care plans. People had signed their care plans. This demonstrated people had been involved in developing these.
- People and their relatives had confidence in the ability of staff to provide effective care. One relative said, "The staff are professional, respectful and kind."
- The registered manager ensured new staff received an induction and worked with an experienced staff member until they were confident to be included on the staff rota, to work unsupervised.
- Staff spoke positively about their training. One staff member described their training as 'very good'. The staff member added, "It gave me the skills and confidence to care for people."
- The management team carried out spot checks of staff practice to ensure that they were providing care, in line with their training.

Supporting people to eat and drink enough to maintain a balanced diet; Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- Staff had a good understanding of people's dietary needs and followed recommendations made by health care professionals. For example, staff told us a health care professional had recommended adding a thickening agent to one person's drink.
- The service has established effective working relationships with other professionals involved in people's care, including GP's and district nurses. This supported people's health and wellbeing.
- The registered manager ensured staff had access to information about professionals involved with each person so that they could be contacted if support was needed.

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

- People and their relatives confirmed staff worked within the principles of MCA. One person told us, "They [staff] always ask me what they can do to help, asking if it's okay before supporting me with anything. They respect my decisions."
- Staff ensured people were involved in decisions about their care, by having regular discussions with them.
- Staff had received MCA training and demonstrated an understanding of the principles. One staff member told us, "All the people I support have capacity and have the right to make their own decisions, which I need to respect. Even, if I feel they are unwise, I cannot ignore them."

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

- People said staff were caring and treated them with dignity and respect. A relative described staff as, "Very good, very caring."
- Staff spoke with care and compassion about the people they supported.
- Staff felt supported in their roles. One staff member told us, "I feel valued and cared about, by the managers."
- Managers supported staff through team meetings, one to one support and being available over the telephone. Staff stated they could approach the managers at any time.
- The providers' policies and procedures promoted inclusion and diversity and reflected protected characteristics as defined by the Equalities Act 2010.

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

- People and their relatives were contacted regularly by the management team to see if changes were needed to the service. One person told us, "I feel able to approach the manager to discuss any concerns in relation to the care I receive."

Respecting and promoting people's privacy, dignity and independence

- People's right to privacy was respected. One relative said, "The staff always knock and say hello and respect that they are coming into our home."
- Staff promoted people's independence. One person told us, "Staff support and encourage me to become more independent, as this is what I want, as I get stronger."

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

- Care plans were personalised, detailed and up to date.
- Care records contained detailed information to help staff meet people's needs including their life histories and things that were important to them.
- Staff told us if people's needs changed, they were called by the manager to inform them and care records were updated.

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.

- Staff understood how people preferred to communicate. For example, one staff told us a person needed to be reminded to wear their hearing aids and staff needed to speak slowly and give them time to respond.
- The deputy manager demonstrated a good understanding of the AIS. They told us when a service referral was received, they ensured information was made available in the appropriate format for the person. For example, large print text or in the person's first language.

Improving care quality in response to complaints or concerns

- People and their relatives knew how to complain. One person said, "I would pick up the phone straight away to the manager, if I needed to."
- Staff understood their responsibility to support people to raise any concerns or complaints.
- Records showed the service had only received one complaint which was managed in line with the providers procedure.

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

- People and relatives were encouraged to provide feedback about the service and were confident their views would be listened to and feedback acted upon. One relative told us, "The manager phones me regularly to check we are happy with the service and to check if any changes are needed."
- Staff gave positive feedback regarding the open, honest and supportive culture of the service. One staff member said, "I think they are a very good company to work for, the managers are very supportive."
- The registered manager held regular meetings with staff to discuss service delivery. Meeting minutes showed areas such as training, call times and new referrals were discussed.
- Staff had a good understanding of equality issues and valued people as individuals. One staff member said, "I really enjoy getting to know the person, their likes and interests. Respecting them for who they are, so they feel able to talk to me and trust me."

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 had a registered manager who was supported by a deputy manager. People, relatives and staff had access to an on-call duty manager, out of office hours.
- Staff understood what the management team expected of them and they demonstrated a commitment to providing good care, during our conversations with them.
- Managerial oversight of the service was good. The deputy manager demonstrated an understanding of the regulations and their responsibilities. For example, they had informed us about important events within the service.

Continuous learning and improving care; Working in partnership with others

- The management team worked to continually improve the service and ensure people were happy with the service provided. One relative said, "The manager does listen and has always been happy to make any changes that I have asked for. They are very good."
- The management team completed audits and checks to monitor the quality of the service provided and to identify any shortfalls so these could be addressed. This included checks of care records and care call times and durations.
- The registered manager and staff team work closely with health professionals to ensure people receive

safe, consistent care and support.