

Quality Home Care Limited

Quality Home Care Limited - Suite 1

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

About the service

Quality Home Care Limited - Suite 1 is a domiciliary care agency which provides assistance with personal care to people living in their own homes. At the time of this inspection 63 people were receiving support with personal care needs. 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 felt safe with the staff who supported them. Staff understood their responsibilities in relation to protecting people from the risk of harm. Where risks to people had been identified, assessments were in place to manage and mitigate these. People received their medicines when they needed them. People were supported by adequate numbers of staff who were safe and competent to work with them. People were protected from the risks associated with the control and spread of infection.

People were supported by staff who were well trained and competent in their role. People were assessed before they used the service to ensure their needs and preferences could be met. Staff understood the importance of ensuring people's rights were understood and protected. 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. People's health care and nutritional needs were monitored and understood by staff.

People and their relatives told us staff were kind and compassionate. People were treated with respect and their right to privacy was understood and respected by staff. People were fully involved in decisions about the care they received.

People received a service which met their needs and preferences. People's communication needs were assessed and understood by staff. People were provided with information in a format which met their needs. People felt confident that any concerns would be taken seriously, and action would be taken to address them.

The service was effectively managed by a team who were committed to providing a high standard of person-centred care. The provider promoted an open and honest ethos and learned from mistakes. Staff were motivated and well trained and there were effective systems to ensure staff remained competent in their role. People's views about the service were valued and there were effective procedures in place to continually monitor and improve the quality of service people received.

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

Rating at last inspection

The service was rated good at our last inspection (report published October 2016).

Why we inspected

This was a planned inspection based on the previous rating.

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 ●

Quality Home Care Limited - Suite 1

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

This inspection was carried out by one inspector. An expert by experience made telephone calls to people and their relatives. 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.

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 48 hours' notice of the inspection. This was because we needed to be sure that the provider or registered manager would be in the office to support the inspection. We also needed to obtain people's consent to contact them.

Inspection activity started and ended on 7 August 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 six people who used the service and three relatives about their experience of the care provided. We spoke with seven members of staff which included the registered manager, training manager, care staff and senior care staff. The registered manager was also the provider's director and nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider. We reviewed a range of records. This included three people's care records and medication records. We looked at three staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service were also 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

- People received safe care and support. One person said, "I feel very safe with them [staff] and they lock my door when they go so I feel secure."
- Staff were trained to recognise and report abuse, and they were confident action would be taken to keep people safe. A member of staff told us, "I have never witnessed any concerns, but I would report straight away."
- People were supported by staff who were familiar to them. Staff wore uniforms and photographic identification badges.

Assessing risk, safety monitoring and management

- Risks to people were considered and there were plans in place to manage and mitigate risks.
- Risk assessments and care plans were regularly reviewed to ensure they remained effective.
- People's equipment was regularly checked by staff to ensure it remained safe and well-maintained.

Staffing and recruitment

- People told us staff had never missed a visit and they arrived on time and stayed for the allocated time. One person said, "They never miss my calls and are usually on time." Another person told us, "The staff stay until they have done everything I need."
- People were protected by the provider's recruitment procedures which ensured only staff who were suitable to work with people were employed.
- There were sufficient numbers of skilled and experienced staff to meet people's needs.

Using medicines safely

- People were supported to take their medicines by staff who were trained and competent to carry out the task.
- One person said, "They [staff] give me my tablets with my breakfast every morning and there have been no problems."
- Medication administration records (MAR) provided information about people's prescribed medicines, the dose and time the medicines should be administered.
- The registered manager was implementing protocols for the use of medicines and creams prescribed on an 'as required' basis. This will help to ensure people receive a consistent approach from staff.

Preventing and controlling infection

- People were protected from the risks associated with the spread of infection.
- A relative told us, "The staff wear uniforms and use gloves and aprons."
- Staff were trained and had access to sufficient supplies of person protective equipment (PPE) and people told us staff used these when assisting them.

Learning lessons when things go wrong

- Records of any accidents or incidents were maintained and reviewed by the management team when they occurred. This helped to identify any trends.
- Where things went wrong, the management team were keen to explore the reasons and to take steps to reduce the risk of it happening again.
- There was a culture of learning from accidents and incidents which was shared with staff.

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.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people's outcomes were consistently good, and people's feedback confirmed this.

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.

- Staff had received training about the MCA and understood the importance of ensuring people's rights were protected.
- A relative said, "They [staff] say what they are doing, especially when hoisting."
- Care plans had been signed by people or their legally appointed representative confirming their consent to the care they received.

Staff support: induction, training, skills and experience

- People and their relatives were confident staff had the skills and knowledge to meet their needs. One person said, "I think they [staff] are very well trained and they support me very well indeed."
- Staff were positive about the training they received, and they were confident they had the right skills to meet people's needs.
- Before staff started working at the agency they completed an induction programme which gave them the basic skills and knowledge to work with the people who used the agency. They also received training to meet people's specific health needs.
- Staff with no previous care experience completed the Care certificate programme. The Care Certificate standards are recognised nationally to ensure staff have the skills, knowledge and behaviours to provide compassionate, safe and high-quality care and support.
- New staff worked alongside and shadowed more experienced staff before they worked alone with people. A relative said, "I think they [staff] are well trained and new ones shadow the regular ones for a while."

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- People were assessed before they used the service to ensure their needs and preferences could be met. A relative said, "We talked with staff when we started with them about times and the type of support my [relative] needs."
- Assessments of people's diverse needs were discussed prior to using the service. These included religion and sexuality.
- Assessments were used to formulate a plan of care. This provided staff with the information they needed to meet the person's needs and preferences.

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

- Where required, people received support to eat and drink at the times that suited them.
- Staff ensured people received food and drinks which met their needs and preferences. One person said, "I do my own meals, but the staff sometimes get my breakfast for me. They always check I've had enough to eat and plenty to drink."

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

- Staff worked well with external professionals to ensure people's health care needs were met. This meant the agency could make prompt referrals and seek advice where concerns were identified.
- Care plans were reviewed and updated to reflect any changes or recommendations from healthcare professionals.

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.

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 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 were treated with kindness and respect by the staff who visited them.
- One person said, "They [staff] are very kind and caring. They do everything I ask them and more."
- Another person told us, "They always listen to me and are very kind and considerate. They notice if I am not feeling myself."

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

- People and their relatives told us they were fully involved about the care they received.
- One person said, "I am fully involved with my care." Another person told us, "Office staff visit me quite often to make sure I am ok."
- People's diverse needs were recorded. Staff we spoke with demonstrated a good knowledge of people's personalities, individual needs and what was important to them.
- A person who used the service said, "They [staff] know me very well. They know what I like and what I don't. They take an interest in me too and what is happening with my family."

Respecting and promoting people's privacy, dignity and independence

- People told us staff always respected their privacy and dignity.
- One person said, "Staff always treat me with respect and never rush me. They are aware of my privacy when I am washing and dressing and always leave me with the commode and then come back."
- People were supported to maintain their independence. One person said, "They [staff] do help me to be independent. I manage some meals for myself and whatever else I can do. I am just very slow now."

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. 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 planning and delivery was person-centred. Person-centred planning is a way of helping someone to plan their life and support they needed, focusing on what was important to the person.
- One person told us, "The staff know everything I like and don't like. They are like family to me now."
- People and their relatives told us they were fully involved in the planning and review of the care they received. One person told us, "I have a care plan and the manager comes here to look at it and I am fully involved in it."

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.

- Care plans contained information about people's communication needs.
- The registered manager told us that documentation could be produced in accessible formats for people who required this. They also told us care documentation and information about the service had been produced in another language for a person who previously used the service whose first language was not English.

Improving care quality in response to complaints or concerns

- None of the people or relatives we spoke with had any concerns about the care they received.
- However, all confirmed they felt confident any concerns would be taken seriously.
- One person said, "I would talk to the manager, but I have never needed to." A relative told us, "We know how to complain but never needed to."
- Where concerns had been raised, records showed the provider had carried out an investigation and provided a response to the satisfaction of the complainant within agreed timescales.

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

- People and their relatives spoke highly about the care they received and of the way the service was run.
- One person said, "They are all very helpful and I think it is very well managed." A relative told us, "We know the manager and they are always very helpful. We asked to have the same carers for the morning call and they arranged it. It all seems to be well managed."
- Staff at all levels were committed to providing people with a high standard of care which was tailored to their needs and preferences. A member of staff said, "I love my job. Our clients get safe care and I can't think of anything they [the agency] could do better." A relative told us, "I think their [staff] attitude to caring is excellent. Very compassionate and understanding."
- The provider valued and responded to people's views.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- People were supported by staff who were trained and motivated to carry out their role.
- A member of staff said, "I really do love it here and am learning every day and the support is excellent."
- Staff received regular supervisions where they had the opportunity to discuss their role and performance.
- Staff training, skills and competence were regularly monitored through observations of their practice and regular refresher training.
- Staff were aware of the whistleblowing procedure and said they would use this if the need arose.
- In accordance with their legal responsibilities, the registered managers had informed us about significant events which occurred at the agency within required timescales.

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 provider promoted an ethos of openness and transparency which had been adopted by all staff.
- There was learning where things went wrong and open discussions with people and their relatives.
- Where there were concerns about a person's well-being, these were raised with appropriate authorities such as the local authority safeguarding team.

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

characteristics

- There were annual satisfaction surveys which provided people and their relatives to express a view about the quality of the service provided. The results of a recent survey showed a high level of satisfaction.
- People's views were sought daily when receiving support and through regular care plan reviews. One person said, "I am very happy with them [the agency] and am very grateful. There is nothing they could do better for me."
- There were regular meetings for staff where their views were encouraged. Staff told us they felt valued and their views were respected.
- There were policies in place to ensure people's protected characteristics were considered and understood by staff.

Continuous learning and improving care

- There were effective procedures in place to monitor and improve the quality and safety of the service provided. These included a range of audits, seeking the views of people who used the service and monitoring the skills, training and competence of the staff team.
- The provider's policies and procedures were regularly reviewed to ensure they complied with current best practice and legislation.

Working in partnership with others

- The agency worked in partnership with other professionals and organisations to achieve good outcomes for people.
- These included specialist healthcare professionals, hospitals, and commissioners.