

Ms Gail Hartley

True Care

Inspection report

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Cumbria
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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

True Care provides personal care to people living in their own homes in the South Lakeland district of Cumbria. There were seven people receiving personal care at the time of our inspection.

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

People were protected from abuse. The staff knew how to identify and report concerns about people's safety. Risks to people's safety had been identified and managed. The staff had the information and guidance they needed to provide people's care in a safe way.

There were enough staff to support people. People received care from a small team of staff who they knew. The staff gave people the support they needed to take their medicines safely. The staff followed infection prevention and control procedures to protect themselves and people they cared for from the risk of infection. The provider had systems in place to ensure lessons were learnt from any incidents to further improve the safety of the service.

People received person-centred care that met their needs and took account of their wishes. The provider worked with the staff providing people's care. They listened to the views of people who used the service, their families and staff to identify how the service could be improved. People told us they would recommend the service. The staff worked in partnership with other services to ensure people consistently received the support they needed. We have made a recommendation about quality audits.

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, (report published 20 April 2018).

Why we inspected

We received concerns in relation to how the provider ensured people were protected against the risk of abuse. As a result, we undertook a focused inspection to review the key questions of safe and well-led only.

We reviewed the information we held about the service. No areas of concern were identified in the other key questions. We therefore did not inspect them. Ratings from previous comprehensive inspections for those key questions were used in calculating the overall rating at this inspection.

The overall rating for the service has remained good. This is based on the findings at this inspection.

We found no evidence during this inspection that people were at risk of harm from this concern. Please see the safe section of this full report.

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.

True Care

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 two inspectors.

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 registered provider was an individual who also managed the service on a day-to-day basis. Registered providers are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

Notice of inspection

We gave the provider a short period of notice of the inspection. This was because it is a small service and we needed to be sure that the provider would be in the office to support the inspection.

Inspection activity started on 4 February 2021 and ended on 12 February 2021. We visited the office location on 4 February 2021 and contacted people who used the service and staff by telephone after our visit.

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. 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 the provider and office manager and reviewed a range of records including the care records for three people and four staff files in relation to recruitment and training. We also looked at a range of records relating to the management of the service.

After the inspection

We contacted the relatives of three people who used the service to gather their views. We also contacted three care staff to gather their views of the service. We also reviewed additional training evidence we had asked the provider to send us.

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 were protected from abuse. Everyone we spoke with told us they were confident their relatives were safe. One person said, "[Relative] appears comfortable and content" with the staff who supported them. Another person said their relative was "happy, and well cared for".
- The staff were trained to identify and report abuse. They said they would be confident to report any concerns to a member of the management team.
- The staff told us the provider had stressed the importance of them reporting any concerns promptly and to appropriate agencies independent of the service. One staff member told us, "[Provider] is 'really hot' on safeguarding."

Assessing risk, safety monitoring and management;

- The provider had identified and managed risks to people's safety. People's care records included guidance for staff about how to provide their care in a safe way.
- The staff told us they had the guidance and information they needed to keep people they cared for safe.

Staffing and recruitment

- There were enough staff to support people. People received care from a small team of staff who they knew. New staff were introduced to people before they worked with them.
- All the staff we spoke with told us the care visits were well organised to ensure they had the time they needed to care for people.
- The provider followed safe recruitment procedures to check new staff were suitable to work in people's homes. All new staff had to provide evidence of their good character and were subject to a check against the records held by the Disclosure and Barring Service. The provider acted on advice about how to further improve their recruitment procedures.

Using medicines safely

- The staff supported people, as they needed, to take their medicines. People were supported to take their medicines as their doctors had prescribed. One person told us, "They [staff] make sure [my relative] has the medicines they need."
- Staff who handled people's medicines were trained in how to do so safely. The staff knew the people they supported well and knew how to support people with their medicines.
- People's medication records showed they had received their medicines as they needed. We discussed with the provider how records could be further improved.

Learning lessons when things go wrong

- The provider had systems to ensure lessons were learnt from any incidents to further improve the safety of the service. This included sharing information with the staff to ensure people were safe.

Preventing and controlling infection

- The provider and staff protected people from the risk of infection. The staff were trained in infection prevention and control. The provider had ensured there was appropriate personal protective equipment, (PPE), to protect staff and people using the service from the risk of infection. The staff had been trained in how to put on and remove PPE in the correct order to reduce the risk of infection.
- One relative told us the office manager had discussed with them the steps the service had taken to protect people during the COVID-19 pandemic. They said this had reassured them their relative was safe.

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

- The provider had developed a positive culture which placed people at the centre of their care. Relatives we spoke with told us the provider went "above and beyond" to ensure their relatives were well cared for. They said they would recommend the service. One person said, "I'd definitely recommend them, we couldn't do without them."
- People were included in decisions about how their care was provided and received person-centred care that met their needs. People's preferences about how they were supported were recorded in their care records. The staff told us they had the information they needed to ensure people received care which took account of their wishes.
- The provider worked with the staff delivering people's care. People told us they knew the provider and care manager and would be confident speaking to them if they had any concerns or wished to make changes to their relative's care. All the staff told us the provider supported them to provide a high standard of care. They said they would recommend the service.

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 understood her responsibilities under the duty of candour. She was aware of the need to be open and transparent with people if incidents occurred where the duty of candour applied.

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

- The provider and staff were clear about their roles and responsibilities. The staff told us they were very well supported by the provider and office manager.
- The staff told us the provider was committed to providing a high-quality service and set high standards for them to work to. One staff member said, "[Provider] runs 'a tight ship'."
- We found the standard of record keeping varied. Some records had not been fully completed and some had not been completed in line with the provider's guidance for staff. This had not impacted on the quality or safety of the service provided.

We recommend the provider seeks advice about auditing of records.

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

characteristics

- The provider asked for people's views about the service and made changes, as required, in response to the feedback received.
- This was a small service and the provider worked with the staff delivering people's care. This gave them the opportunity to continuously assess the quality of the service and to informally seek people's views about their care. One person told us, "[Provider] always asks if everything is alright."
- The provider had revised care records to ensure they were accessible for people and to take account of individuals' equality characteristics.

Working in partnership with others

- The provider worked cooperatively with other services to ensure people received the support they needed. The staff knew the health services that supported people and liaised with them appropriately to ensure people received the care they required.