

Care Concern (NW) Limited

# Care Concern (NW)

## Inspection report

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24 June 2022

29 June 2022

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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

Care Concern is a home care provider which offers domiciliary care and support for people within their own homes. The service was providing support to 318 people at the time of the inspection.

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 confirmed they received their medications on time. Some people said staff were sometime late, however this was not very often. Staff knew how to report safeguarding concerns and staff were recruited safely. People told us they felt safe receiving care from Care Concern (NW). Comments included, "I have a group of carers. They're all lovely. They always introduce themselves. You can have a giggle." Another person said they felt safe because "We mostly see the same people. They are on a rota so we know who is coming."

There were comprehensive risk assessments in place which were tailored to reflect each person's assessed need. and incidents and accidents were clearly recorded, and lessons had been routinely learned.

The registered manager understood their role and responsibilities and had reported all notifiable incidents to CQC. There were audits and quality checks in place, complete with action plans when there were shortfalls identified in care provision. Feedback from people was sought and any areas of concern were identified and investigated.

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.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

Rating at last inspection – The last rating for this service was good (published 25 April 2019)

### Why we inspected

We received concerns in relation to staffing, missed visits and oversight. As a result, we undertook a focused inspection to review the key questions of safe and well-led only. For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

The overall rating for the service has remained the same.

We found no evidence during this inspection that people were at risk of harm from this concern. Please see the safe and well-led sections of this full report.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Care Concern (NW) on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

#### Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

## 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.

# Care Concern (NW)

## 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 Health and Social Care Act 2008.

#### Inspection team

The inspection was completed by an inspector and two experts by experience who made phone calls to people in their homes. 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.

#### Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the 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.

At the time of our inspection there was a registered manager in post.

#### Notice of inspection

We gave the service 48 hours' notice of the inspection because some of the people using it could not consent to a phone call from the Expert by experience.

Inspection activity started on 24 June 2022 and ended on 29 June 2022. We visited the location's office/service on 24 June 2022.

#### What we did before the inspection

The provider was not asked to complete a Provider Information Return (PIR) prior to this inspection. A PIR is information providers send us to give some key information about the service, what the service does well and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with 18 people and their relatives about their experience of the care provided and we spoke with seven members of staff including the nominated individual/registered manager and the legal and compliance officer. The nominated individual is responsible for supervising the management of the service on behalf of the provider. We also spoke with two health and social care professionals who work closely with the service.

We reviewed a range of records. This included five 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 our last inspection we rated this key question good. At this inspection the rating has remained good. This meant people were safe and protected from avoidable harm.

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

- Risks to people were assessed and their care plans clearly set out how safety was monitored in line with their risk management plans.
- Each person had an environmental risk assessment in place which detailed important risks staff needed to be aware of before they entered the person's home.
- There was a system in place for recording, monitoring and managing accidents and incidents and learning from them.

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 MCA 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 Mental Capacity Act (MCA). In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS)

- We found the service was working within the principles of the MCA.
- Where appropriate, family had been consulted with around any best interest decisions.

Systems and processes to safeguard people from the risk of abuse

- The provider's systems and processes for safeguarding people from the risk of abuse were used effectively.
- People told us staff treated them well and that they felt safe with them. People also told us they would tell someone if they had any worries about their safety or the way they were treated. Their comments included; "I have a group of carers. They're all lovely. They always introduce themselves. You can have a giggle." Another person said they felt safe because "We mostly see the same people. They are on a rota so we know who is coming."
- Staff completed safeguarding training and had access to guidance on how to report any allegations of abuse. They knew the different types and indicators of abuse and told us they would not hesitate to report any concerns.

Staffing and recruitment

- Staff recruitment procedures were safely managed, all required pre-employment checks, such as DBS

checks were completed, and staff said their rotas were well organised. Disclosure and Barring Service (DBS) checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.

- People told us staff occasionally came late. We saw that improvement had been made with regards to call times and late calls between April and June. The provider was aware this had been an issue but had put provisions in place to rectify it.
- Staff said their call times were evenly spaced, and they did not have to 'cram calls in'.
- There were enough staff in post to provide a safe and consistent service. One family member said [Relative] has the same team of staff, that's why we have kept them, one has been providing care since 2011."
- Staff said they had clear communication from the registered manager around any changes to their rotas.

Using medicines safely;

- Medication was clearly audited and administered safely. Lessons had been learned from past errors to ensure reasonable steps had been taken to ensure the risk had been mitigated.
- Where the service was responsible for ordering and administering people's medication, there were clear assessments in place around this.
- Staff had been trained in medication administration and had their competency regularly checked.

Preventing and controlling infection

- The service had policies, procedures and processes for staff to follow to reduce the spread of COVID-19 and other infectious diseases.
- Staff told us they had access to enough supplies of PPE.

# 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 our last inspection we rated this key question good. At this inspection the rating for this key question has remained 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

- People received their support at a time which suited them; they received the support they needed to meet their needs.
- Staff told us they enjoyed working for the organisation. Comments included, "I have been here a long time- I always feel listened to."

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

- There was a registered manager in post at the time of inspection who was also the nominated individual.
- There was a robust management structure in place to support the staff, people who used the service and improve the quality of the service provided. This management model was subject to continuous review and scrutiny by the registered manager to ensure lessons were being learned.
- Notifications about specific events had been received and ratings from our last inspection were displayed in line with legal obligations.

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

- People's opinion of the service was obtained and analysed. Any negative feedback or issues were investigated and addressed in line with company procedure.
- Regular reviews took place for people using the service to ensure the support was meeting their needs and they were happy with the care provided.
- Staff felt communication from managers and support for themselves was good and they could raise any issue or concerns they had.

Continuous learning and improving care

- The registered provider had learned from past inspections and had continued to implement robust medication audits and processes.
- The service had to meet specific key performance indicators (KPIs) in all aspects of service delivery to maintain their preferred provider status. Reports were submitted every six months to demonstrate their performance to the local authority.

### Working in partnership with others

- The registered manager worked with the neighbouring local authorities and healthcare providers.
- Feedback from local authorities confirmed that commissioners had no current concerns about the service, and they spoke highly of the organisation and their responsiveness.