

## Care4UHomecare Ltd

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## **Inspection report**

Unit 13A, Action House 53 Sandgate Street London SE15 1LE

Tel: 02039038477

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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

Care4UHomecare Ltd is a domiciliary care agency. It provides personal care to people living in their own homes. It provides a service to older people, including people receiving support at the end of their life. 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.

At the time of the inspection the provider was supporting five people.

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

One person's relative told us they continued to be happy with the current level of care and had a good working relationship with the registered manager. Where new staff had been recruited, they were reassured the registered manager worked with them to monitor their skills and experience.

New staff carried out shadowing and observation sessions before they started working to understand how people liked to be supported. Staff told us this gave them confidence to support people to the best of their ability.

Feedback was positive about the registered manager and people and their relatives were given opportunities to give feedback about their care.

The registered manager had made improvements and followed their action plan since the last inspection to ensure issues had been addressed and people received a good standard of care. Improvements were related to recruitment procedures and the management of people's assessed risks.

People were supported by staff who spoke positively about the registered manager and felt respected and valued as part of the organisation. Staff were well supported and were given feedback about their performance and advice and guidance to learn and improve.

#### Rating at last inspection and update

The last rating for this service was requires improvement (published 6 August 2021) and there were breaches of regulations. We also made a recommendation in relation to the management of people's medicines. The provider completed an action plan after the last inspection to show what they would do and by when to improve.

At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

#### Why we inspected

We carried out an announced comprehensive inspection of this service on 30 April 2021. Breaches of legal

requirements were found. The provider completed an action plan after the last inspection to show what they would do and by when to improve on breaches related to safe care and treatment and fit and proper persons employed.

We undertook this focused inspection to check they had followed their action plan and to confirm they now met legal requirements. This report only covers our findings in relation to the Key Questions of Safe and Well-led which contain those requirements.

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 changed from Requires Improvement to Good. This is based on the findings at this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Care4UHomecare Ltd on our website at 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 •
Is the service well-led? The service was well-led.	Good



# Care4UHomecare Ltd

**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

This inspection was carried out by one inspector.

#### Service and service type

Care4UHomecare Ltd is a domiciliary care agency. It provides personal care to people living in their own homes.

#### 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 provider a few days' notice because we were aware they were a small service and not always located in the office and we needed to ensure they would be available to assist us with the inspection.

Inspection activity started on 19 July 2022 and ended on 5 August 2022. We requested a range of documents related to people's care that were sent to us by the provider between 19 and 27 July 2022. We visited the office location on 21 July 2022 to see the registered manager and to review further records related to the service. We made calls to people who used the service, their relatives and care staff between 25 July and 1 August 2022.

#### What we did before the inspection

We reviewed information we had received about the service since the last 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.

We reviewed the previous inspection report and the provider's action plan that was submitted after the last inspection. We used all of this information to plan our inspection.

#### During the inspection

We reviewed a range of records related to three people's care and support. This included people's care plans, risk assessments, medicines records for two people and three staff files in relation to recruitment and training. We also reviewed records related to the management of the service, which included a training matrix, samples of people's daily logs and quality assurance records.

We spoke with six staff members. This included the registered manager and five care workers.

Due to the nature of some people's current health conditions, we were only able to speak with one person's relative, as the person was unable to fully communicate with us over the telephone.

After the inspection we continued to seek clarification from the provider to validate evidence found. We looked at further recruitment and supervision records, samples of staff rotas, medicines competency assessments and a range of policies and procedures.

We provided formal feedback to the registered manager via email on 5 August 2022.



## 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 we rated this key question requires improvement. The rating for this key question has improved to good. This meant people were safe and protected from avoidable harm.

Staffing and recruitment

At our last inspection the provider had failed to have robust recruitment processes in place to ensure persons employed had the right skills and experience. This was a breach of regulation 19(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 19.

- The registered manager had made improvements to ensure safer recruitment procedures were followed. For new staff that had been recruited since the last inspection, there was evidence of full employment histories in place. An interview preparation form had also been introduced to record the dates all relevant records had been received.
- The provider obtained appropriate references, right to work documents and Disclosure and Barring Service (DBS) checks were in place. The DBS helps employers make safer recruitment decisions and helps prevent unsuitable people from working with people who use care and support services.
- There were sufficient numbers of staff to meet people's needs. The provider was just about to implement a new electronic call monitoring (ECM) system to confirm visits had been made. The registered manager had regular correspondence with people, their relatives and care staff to ensure calls were completed.
- One relative told us they had no concerns around the timekeeping of visits and were kept updated if there were any changes to the schedule or if a care worker was running late.

Assessing risk, safety monitoring and management

At our last inspection the provider had failed to robustly assess the risks relating to the health, safety and welfare of people. Inconsistencies and lack of information within risk assessments created a risk to people's health and safety. This was a breach of regulation 12(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 12.

• The registered manager had made improvements and risks to people had been assessed, with care records being updated to provide guidance for staff to follow to support people's needs and help to keep them safe.

- Inconsistencies seen at the last inspection had been addressed to ensure important information had been included about people's care. Updated information regarding advice and guidance from an occupational therapist about safe transfers had been updated into one person's care plan. Information about risks related to pressure sores and guidance for staff had also been updated and included in people's care plans.
- All staff confirmed they completed shadowing and observation visits when they first started working, which gave them opportunities to see how people were supported. Comments included, "This was very helpful and it was explained very clearly what we had to do" and "We discussed the support in groups and explained how we could reduce any risks and what risks to be aware of."

#### Using medicines safely

At our last inspection we recommended the provider consider current guidance on supporting people with medicines in a home care setting and update their practice accordingly. We shared The National Institute for Health and Clinical Excellence (NICE) guidelines for managing medicines for adults receiving social care in the community with the registered manager after the last inspection. The provider had made improvements.

- There were procedures in place to ensure medicines were given safely and inconsistences seen at the last inspection had been addressed. Information about people's medicines were included in their care plans and care workers completed medicine administration record (MAR) charts.
- Staff completed medicines training and had their competency assessed and signed off when the registered manager was assured they were confident to manage this task. Staff were positive about the training and support they received to ensure they understood best practice.
- Medicines records were returned to the office to be checked and staff told us they received regular reminders about their responsibilities related to medicines. One care worker said, "We discuss the MAR chart and what to do. She is very clear with us about what needs to be done. She also checks them."
- One relative said, "With their medicines, I feel this is managed appropriately and there have been no issues or deterioration in their health."

Systems and processes to safeguard people from the risk of abuse

- The provider had an appropriate safeguarding policy in place and staff continued to have a good understanding of their safeguarding responsibilities. New staff confirmed they completed safeguarding training during their induction and longer serving staff received an annual refresher.
- There had been no safeguarding incidents since the last inspection. Staff told us they felt the training was very helpful and were confident any concerns they raised would be dealt with immediately.
- One care worker said, "It is important for us to know about protecting vulnerable adults from any kind of abuse or harm. [Registered manager] is supportive with this and takes it very seriously."
- One person's relative said, "I do feel they are getting a safe service and am not concerned about anything in this sense. They give me reassurance."

#### Preventing and controlling infection

- There was an infection and prevention control (IPC) policy in place and staff confirmed they completed the relevant training and discussed IPC and COVID-19 issues on a monthly basis. Staff were sent regular reminders to ensure they knew how to keep people and themselves safe and reduce any risk of COVID-19.
- The registered manager had systems in place to ensure staff were following the current government guidance for COVID-19 testing requirements. The registered manager continued to support some care shifts and carried out spot checks to provide advice and ensure staff were following best practice.
- Staff remained positive about the support from the registered manager since the last inspection and

confirmed they always had enough supplies of personal protective equipment (PPE). One care worker said, "She is always reminding us about testing, wearing our PPE and washing our hands. The training was really good."

• A person's relative told us they had no general concerns about staff awareness and practice of IPC measures. They said they had previously raised with the registered manager a concern about a staff member not wearing a mask and the issue was addressed immediately. They added, "She pulled them up on this and followed it up, which was good to see."

Learning lessons when things go wrong

- There were systems in place for the reporting of any accidents and incidents and staff told us they were regularly reminded about the importance of reporting and recording any incidents that occurred during their work.
- Although there had been no incidents or accidents related to people's care since the last inspection, care workers told us they received feedback from spot checks if any improvements could be made. One care worker said, "It is done in a supportive way so we can learn from it."



## 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 requires improvement. At this inspection this key question has improved to good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care

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

- There were systems in place to monitor the service to ensure people were receiving the care they needed and any areas of improvement could be identified. The registered manager had taken on board the feedback from the last inspection and worked through their action plan to ensure the issues were addressed.
- The registered manager carried out regular spot checks and telephone monitoring calls to get feedback from people and their relatives to observe staff performance, competencies and to understand the level of care being provided.
- Staff confirmed unannounced spot checks were carried out to check on areas such as timekeeping, record keeping, safe use of PPE and if people were happy with their care. One care worker said, "She will give us feedback and tell us where we can improve."
- The registered manager collected and reviewed people's daily records and MARs to ensure care workers were completing them in line with best practice. Care workers confirmed they had regular reminders about their responsibilities and discussed this during team meetings and supervision.
- Although there had been no notifiable incidents since the last inspection, the registered manager had a good understanding of their regulatory responsibilities and knew when notifications had to be submitted to the CQC.
- One relative told us the registered manager helped out with care shifts when needed to cover any absences. They said, "She is involved when needed and gets to see the care given and provides feedback when it is needed. Things are going well."

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- One person's relative was positive about the registered manager and worked hard to ensure there remained a good working relationship. They added, "I do feel comfortable raising any issues or concerns with [registered manager] and feel she responds appropriately. She listens to us and will address anything."
- We saw a recent compliment from another relative that highlighted the positive culture of the service. It stated, 'The carers are marvellous. They chat in a friendly way, don't talk down to them. We didn't want carers at first but the current carers have won us over.'
- Care workers continued to praise the registered manager for the caring and supportive working environment. Comments included, "She is on top of everything and looks out for us", "It can be hectic but she is very patient. The key thing is she will take time out to support us and work out any issues" and "She is

a very good listener. She really cares about her clients and her carers."

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

- The registered manager gave people and their relatives opportunities to give feedback about their care and keep them updated with the service. Samples of feedback forms were positive and did not highlight any concerns.
- One relative said they had regular communication with the registered manager, over the phone, via email and text messages. They added, "She is available and will get back to me without me having to chase them up."
- Staff commented positively on the communication they had with the registered manager and how they were always kept updated about the service. Staff highlighted virtual team meetings and regular video calls to keep them updated was beneficial to their role.
- Staff we spoke with were passionate about working for the company and felt valued in their role. One care worker said, "One of the best things about working here is she treats us well and always respects us."

Working in partnership with others

- We saw the registered manager worked closely with the NHS Continuing Healthcare (CHC) and shared any updates or changes in people's health and wellbeing, especially those that were receiving care at the end of their life.
- The registered manager told us they had been involved in a number of provider forums throughout the COVID-19 pandemic but these were no longer taking place. They were also involved in registered manager networks.

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

• Even though there had been no incidents with the people they supported, the registered manager knew the importance of being open and honest with people and their relatives and updating them with any issues or concerns.