

Thames Homecare Service Ltd

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Inspection report

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21 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

Thames Homecare Service Ltd is a domiciliary care agency providing personal care and support to people in their own homes. At the time of the inspection the agency was supporting 190 people. Not everyone who used the service received personal care. In this service, the Care Quality Commission can only inspect the service received by people who get support with personal care. This includes help with tasks related to personal hygiene and eating. Where people receive such support, we also consider any wider social care provided.

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

People and relatives thought the service was good and spoke positively about their care and the staff who supported them.

There were enough staff to meet people's needs and staff supported people safely with their medicines. There were recruitment processes in place to help make sure only suitable staff were employed.

The provider assessed and supported people to manage risks to their safety and well-being. There were procedures in place for preventing and controlling the spread of infection. The service worked in partnership with other professionals to meet people's needs and help them to access healthcare services.

There were systems in place to continue to develop the service, monitor the quality of the service and recognise when improvements were required. People and staff were asked to give feedback about the service. Staff said they liked working for the provider and found managers were responsive and supportive.

Rating at last inspection and update

The last rating for this service was requires improvement (published 19 November 2020) At our last inspection we found breaches of the regulations in relation to safe care and treatment and good governance. The provider completed an action plan after the last inspection to tell us what they would do and by when to improve. At this inspection we found improvements had been made and the provider was now meeting these regulations.

Why we inspected

We undertook this focused inspection to check if the provider had made improvements and if they were now meeting the legal requirements. This report only covers our findings in relation to the key questions safe and well-led.

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 Thames Homecare Service 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 ●

The service was well-led.

Details are in our well-led findings below.

Thames Homecare Service 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

The inspection was carried out by two inspectors and an expert by experience. 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.

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

This inspection was unannounced. Inspection activity started on 14 June 2022 and ended on 4 July 2022. We visited the location's office on 16 June 2022 to start the inspection and requested access to a number of records but the registered manager initially refused the inspector to undertake the inspection. We worked with the registered manager to resolve this situation and returned to the location's office to continue the inspection on 20 and 21 June 2022.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. This included feedback from local authorities 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 annually with key information about their service, what they do well, and improvements they plan to make. We used all of this information to plan our inspection.

During the inspection

We spoke with the registered manager, the branch manager, an HR officer and the nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider. We looked at 10 staff files in relation to supervision, training and recruitment. We viewed care and risk management plans for five people and a variety of records relating to the management of the service. We spoke with 12 people or relatives of people who used the service. We emailed care staff to provide feedback about working for the provider and received 36 responses. We requested further evidence from the provider so as to clarify and validate the evidence we found.

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 requires improvement. At this inspection we have rated this key question good. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management

At our last inspection the provider had not robustly managed risks relating to the health, safety and welfare of people. 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 provider assessed and supported people to manage risks to their safety and well-being.
- People's risk management plans identified actions to mitigate risks presented by issues such as their moving and handling needs, personal hygiene, oral healthcare or skin integrity concerns. The provider reviewed people's plans regularly and when required, such as when a person's care needs changed.
- People's plans included some information for staff about health conditions a person lived with, such as diabetes, so they could recognise if a person was becoming unwell because of this. Staff also completed awareness training on supporting people living with diabetes.
- The provider also assessed risks in a person's home environment, such as fire safety, flooring and appliances to make sure staff could provide care safely.
- The registered manager had business continuity plans in place to help the service continue in the event of an emergency, such as or significant staff illness.
- People and relatives told us they felt people were safe. One relative commented, "My [family member] says they feel really well looked after" and another said their family member's skin sores had improved since the service had started supporting them.
- The provider had a business continuity plans in place to help cope in the event of an emergency, such as significant staff illness.

Using medicines safely

At our last inspection the provider had not always managed medicines support in a safe way. 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.

- Staff supported people to take their prescribed medicines and there were systems in place to make sure this happened safely.
- The provider had introduced a digital system for managing and recording medicines support since our last inspection. This provided staff with the necessary information for them to administer medicines safely. Staff completed medicine administration records to note when they had supported people with this. The provider audited these records regularly and took action to address issues this identified.

- Senior staff had completed risk management plans for supporting people to take their medicines appropriately. Care staff completed medicines support training and the provider had assessed their competency to provide this support.

Systems and processes to safeguard people from the risk from abuse

- There were systems in place to safeguard people using the service from the risk of abuse. The provider investigated safeguarding concerns and reported on these to the local authority.
- Staff completed training on safeguarding adults and whistleblowing and indicated that they knew how to respond to potential abuse concerns. Managers promoted staff awareness in team meetings.
- The provider had introduced a safeguarding 'champion' to support staff and people using the service with safeguarding concerns. A 'champion' is a member of staff with a sound knowledge of safeguarding practice who can promote a culture of raising concerns and supporting people who do so.

Staffing and recruitment

- The provider deployed enough staff to support people safely. Relatives gave us positive feedback about their care visits. They told us that care staff were on time and they had not experienced any missed visits. They said the provider called them if a care worker was running late or needed to be changed.
- The provider used a digital system to enable them to monitor care workers arriving and leaving people's homes in real-time. This helped the registered manager to make sure staff arrived on time and stayed for the duration of care visits.
- Almost all the people and relatives we spoke with told us regular staff visited them which meant they could develop relationships of trust with staff who they referred to as "friends". Relatives told us, "My [family member] always knows who is coming to see [them]," and "My [family member] has had the same carer for quite a while, I asked for this and the agency agreed. It is good for [the person] as they have dementia."
- Staff told us there were enough staff rostered to support people safely. They said they had enough time to travel between their care visits and to support people without rushing. A relative commented, "The care is not rushed [and] always at my [family member's] speed, which can be slow."
- The provider followed appropriate recruitment processes with new staff to make sure they only offered roles to fit and proper applicants. This included establishing their employment history and completing Disclosure and Barring Service checks. These provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.

Preventing and controlling infection

- The provider had arrangements in place for preventing and controlling infection.
- The provider supplied staff with personal protective equipment (PPE) so they could support people safely, such as masks, gloves, aprons and hand sanitiser. Staff told us they always had enough PPE. The provider stated they had stocks to be able to meet the service's ongoing requirements and cope with a potential disruption in supplies. Staff confirmed they had received training on how to use the equipment safely. The provider conducted regular checks on staff to make sure they wore this.
- Staff completed lateral flow tests in line with Government guidance for homecare staff to identify if they had contracted COVID-19. The registered manager had encouraged staff to take up COVID-19 vaccinations and reported that they had done so.
- The provider had introduced an infection control 'champion' to support staff. This was a member of staff who had received additional infection and control training and who could visit other staff in the community to support them with any PPE issues.

Learning lessons when things go wrong

- The provider had systems in place for recording and responding to incidents or accidents.
- Staff documented information about what happened and actions taken in response to this. Investigation reports of incidents or quality concerns included recording statements from staff involved, working with the relevant local commissioning authorities and identifying lessons learnt from these.
- We saw the provider had developed management tools that provided a strategic overview and analysis of incidents, accidents, safeguarding concerns and complaints. This helped managers to monitor the service and recognise if there were trends or themes to these events that could indicate where improvements were required.

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 requires improvement. At this inspection we have rated this key question 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

At our last inspection the provider had not always robustly managed systems to demonstrate ensure safety and quality was effectively managed, that there was continuous learning and complete, up to date records of care were maintained. This was a breach of regulation 17(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 17.

- The provider carried out a range of checks to monitor safety and quality and make improvements when needed.
- The provider maintained clear records of relatives who had the legal authority to make decisions about a person's care if they lacked the capacity to do this. However, it was not always clearly recorded when the provider considered this was required. We discussed this with the managers so that could update their recording practices.
- The quality assurance checks included periodic audits of different aspects of service provision, such as infection control practice and PPE management, staff completing training, safe recruitment, and medicines support.
- Senior staff conducted quarterly checks on care staff as they worked in people's homes. These included checks of a care worker's timeliness, use of PPE, their communication and approach with the person, and how they followed the care plan. The checks recorded actions taken in response to any issues that were noted.
- Care coordinators carried out regular telephone questionnaires calls with people and relatives to check they were happy with the quality of their service. These included asking if they were treated with dignity and respect, if care staff stayed the correct amount of time, and if office staff listened and responded to their requests.
- The provider notified the CQC of significant events as they are legally required to do.

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

- People and relatives spoke positively about their care and support. A relative commented, "My [family member's] carers are like good friends." A person told us, "I have always found the staff very helpful and approachable."
- Staff told us they liked working for the provider and felt supported by their managers. Remarks from care

workers included "They're very in touch with carers and if any issues come up they're easily resolved" and "Proud to be part of it and help people."

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

- People, relatives and staff were involved in the service.
- As well as telephone questionnaires, the provider conducted six monthly satisfaction surveys with people and their relatives. This enabled them to give formal feedback about their care. The survey records we saw showed that most respondents were happy with the service.
- People and relatives we spoke to knew how to raise issues to the provider and could contact the office staff when they needed to. People and relatives told us either staff responded to their concerns or they had raised an issue and were waiting for a response.
- Managers held regular team meetings for both care workers and office-based staff.

Records of these meetings showed managers discussed various practice issues and policies to promote staff awareness of them, such as adult safeguarding and equality & diversity. Managers also provided feedback and actions from audits that had been completed and 'do and don't' practice reminders for staff. These meetings gave staff opportunities to contribute to the running of the service. A care worker told us, "I am able to express my needs and questions freely [and] that encourages learning." New staff were also asked to provide feedback about their induction experience.

- Records showed staff received regular supervisions with their line managers, which staff confirmed. Supervisions included feedback from people about their care.

Continuous learning and improving care

- There was a focus on maintaining continued improvements in the service.
- The provider implemented service improvement and development plans to enable this. For example, the provider had developed systems to provide a strategic overview of incidents and concerns. Also, they had also introduced digital care and risk management planning systems since our last inspection, which enabled them to monitor and improve the service's performance, such as helping to keep people's plans up to date.
- Managers explained they were in the process of implementing a new digital system for managing how the service responded to complaints or quality concerns. This would enable staff to document and respond to issues more quickly while managers could monitor and ensure investigations are completed in a timely manner.

Working in partnership with others

- The service worked in partnership with other health and social care agencies, such as social workers, GPs, and nurses. This helped people to receive joined-up care to meet their needs.