

Nucare Agency Ltd

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Inspection report

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Ratings

Overall rating for this service

Good 

Is the service safe?

Requires Improvement 

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

Nucare Agency Ltd is a domiciliary care service which provides personal care to people living in their own homes. The service mainly provides support to older people, some of whom are living with dementia. At the time of our inspection, there were 47 people using the service.

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 receive personal care, we also consider any wider social care provided.

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

People and their relatives were happy with the service they received from Nucare Agency Ltd. Everyone said they would recommend the service to others. People told us they experienced a professional service which met their needs.

People felt safe when receiving care from the service. The provider completed a range of pre-employment checks to assure themselves staff were suitable to work at the service. Some of these checks were not robust enough, however, the provider addressed this issue during the inspection. There were enough staff employed to meet people's needs. Staff arrived at people's scheduled care visits on time and delivered person-centred care to each person.

Improvements were needed to some of the provider's risk assessment processes, to ensure all risks to people were thoroughly considered and mitigated. Accidents and incidents were managed appropriately. People received effective support with their medicines and there were suitable measures in place to prevent the spread of infections.

People's needs were assessed to check the service was suitable for them. People were involved in this process and they told us they received care which met their preferences. People were happy with the support they received with food and fluids. 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.

Everyone we spoke with told us staff were kind and caring. Staff treated people with dignity and respect, and they supported people to remain as independent as possible. People's relatives told us staff were very good at communicating with people and this supported them to remain involved in decisions about their care.

People were supported by staff who had a comprehensive understanding of how to deliver person-centred care. The service was flexible and responsive to people's changing needs. The provider had an appropriate complaints procedure in place and people knew how to complain if they needed to. The provider had systems in place to ensure people received compassionate and coordinated support at the end of their lives.

Without exception, everyone thought the service was well-organised and managed well by the registered manager and provider. Staff were supported to deliver high quality care. The registered manager and provider completed a range of checks on the quality and safety of the service to identify any areas where it needed to improve.

The service had an open, transparent culture. People, their relatives and staff all had opportunities to provide feedback about the service. Staff enjoyed their jobs and were all keen to deliver high-quality care. The service worked alongside other professionals to help ensure people received effective care and support.

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

Rating at last inspection

This service was registered with us on 1 March 2021 and this was their first inspection.

Why we inspected

This inspection was prompted by a review of the information we held about the service.

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?

The service was not always safe.

Details are in our safe findings below.

Requires Improvement ●

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 ●

Nucare Agency 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 Act.

Inspection team

This inspection was completed 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 homes.

Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with CQC 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 24 hours' notice of the inspection. This was because we needed to be sure the provider or registered manager would be in the office to support the inspection.

Inspection activity started on 31 August 2022 and ended on 1 September 2022. We visited the service's office on 31 August 2022.

What we did before the inspection

We reviewed information we had received about the service since it registered with CQC. We sought feedback from the local authority, professionals who work with the service and Healthwatch. Healthwatch is

an independent consumer champion that gathers and represents the views of the public about health and social care services in England. We used all this information to plan our 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.

During the inspection

We spoke with three people who used the service and 12 relatives about their experience of the care provided. We spoke with seven members of staff including the registered manager and the 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 five people's care records and a selection of medication records. We looked at three staff files in relation to recruitment. 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.

This was the first inspection of this newly registered service. This key question has been rated requires improvement. This meant some aspects of the service were not always safe and there was an increased risk that people could be harmed.

Staffing and recruitment

- Improvements were needed to the provider's recruitment process, to ensure new staff were subject to robust recruitment checks prior to being employed by the service. The provider completed a range of pre-employment checks to assure themselves staff were suitable to work at the service. However, they had not ensured they obtained a full work history for each staff member. The provider amended their recruitment practices immediately and we were assured future recruitment would be safe.
- There were enough staff employed and staff were allocated enough time during each care visit to meet people's needs effectively. People and their relatives told us, "They are on time and have never missed a visit", "They ask me if I am ready for them to help me. I never feel rushed by them" and "They stay for the full amount of time. They even stay a bit longer if necessary."

Assessing risk, safety monitoring and management

- Risks associated with the use of bed rails had not been thoroughly assessed. The provider agreed to implement a more comprehensive assessment for any person using bed rails.
- One care plan we reviewed contained conflicting information about a person's mobility following a change in the person's needs. This increased the risk they could receive inappropriate support to mobilise. Despite this inconsistency in their care plan, we were satisfied staff people knew well and were given timely information about changes in people's needs.
- Most risks to people had been assessed and their care plans contained guidance for staff to follow so they could reduce these risks. This included risks associated with people's mobility, nutrition and hydration, skin integrity, exposure to infections and any risks associated with their home environment.

Preventing and controlling infection

- There were systems in place to support staff to control the spread of infection, however, there had been occasions where staff had not followed good practice guidance in respect of the use of face masks. We brought this to the provider's attention, and they addressed it immediately.
- Staff completed training in respect of infection prevention and control, and they had access to adequate supplies of personal protective equipment (PPE).
- People felt protected from the spread of infection. They told us staff were very good at washing their hands and disposing of PPE appropriately.

Using medicines safely

- Medicines were managed safely, and staff supported people to take their medicines as prescribed. People and their relatives were happy with the support they received with their medicines.

- Staff were trained in how to manage medicines safely. Their competence was kept under review to ensure their skills and knowledge remained up to date.
- The provider needed to make some minor improvements to people's care plans when staff supported people with medicines prescribed on a 'when required' basis, to ensure staff knew how to recognise when to offer those medicines. The registered manager agreed to address this.

Systems and processes to safeguard people from the risk of abuse

- The provider had suitable systems in place to protect people from the risk of abuse. All staff were aware of the need to raise any concerns immediately, so action could be taken to ensure people were made safe. Staff were confident the registered manager and provider would act on any concerns they raised.
- People told us they felt safe when being cared for by staff. A person commented, "Yes I do feel safe. They are lovely people and the care workers who come always ask me if I am feeling alright."
- People's relatives had no concerns about their family member's safety. Their comments included, "[My relative] is safe with them. They are very good with [my relative]", "We do feel that [my relative] is safe with this agency. They are very good at keeping us updated with how [my relative] is. They've made it so we feel less stressed and more comfortable knowing that [my relative] is being well looked after."

Learning lessons when things go wrong

- Accidents and incidents were managed appropriately. Staff knew when and how to report relevant events so action could be taken to address any concerns. Senior staff reviewed information about any accidents and incidents to ensure enough action had been taken to reduce the risk of a similar event occurring.

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.

This was the first inspection for this newly registered service. This key question has been rated good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

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

- People's needs were assessed before the service started to provide care to them. A personalised care plan was created following the assessment process, so staff knew what care each person needed and when.
- People and their relatives were involved in the assessment and care planning process. This enabled staff to identify people's preferences and ensure their care was tailored to their individual needs and choices.
- People and their relatives were very happy with the standard of care delivered by the service.

Staff support: induction, training, skills and experience

- New staff completed an induction to ensure they were well prepared, competent and equipped to deliver high quality care. The induction process included shadowing more experienced staff.
- Staff received a range of training to help ensure their knowledge was up to date. Staff were happy with the training they received. People and their relatives told us they thought staff had the right skills to support them effectively.
- Staff felt very well supported in their roles. They had opportunities to develop and gain further experience so they could provide good quality care. Comments from staff included, "It's nice to speak with the management and hear how everything is going and learn how I can do things better" and "Everyone is really supportive, and the [manager's] door is always open."
- The provider monitored staffs' competence via a range of competency assessments, spot checks and regular discussions with people using the service.

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

- People's nutrition and hydration needs were met. When people were supported with food and fluids, their care plans contained guidance about what staff needed to do for each person, whilst promoting their independence.
- If people required a special diet due to medical or cultural reasons, this was clearly recorded in their care plans so staff knew what support to provide.
- People were happy with the support they received with their meals and drinks. A person commented, "They make sure I've always got water and they leave me with a drink of tea."

Staff working with other agencies to provide consistent, effective, timely care

- Staff worked closely with other organisations to deliver effective care and support. We received positive feedback from social care professionals about how the service engaged with them. A social care professional commented, "They are receptive to queries I put to them and they engage well. They are good carers and extremely supportive to families."

Supporting people to live healthier lives, access healthcare services and support

- Staff proactively supported people to access healthcare services when people needed additional support. They made referrals to other organisations and requested immediate support if people experienced an issue with their health.
- People and their relatives said staff were good at recognising when to seek support from healthcare professionals. Comments from relatives included, "They liaise with other services such as the District Nurse. They go above and beyond... they always stay with [my relative] and phone for the doctor or an ambulance as necessary" and "If they feel there is a problem with [my relative], they ring the doctor or District Nurse. Once or twice they have phoned for an ambulance and each time it's been appropriate, so they have saved [my relative's] life. They do keep a close eye on [my relative] which is marvellous for me."

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 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 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.

- The provider had suitable systems in place to work within the principles of the MCA. They asked whether people had appointed anyone else to make decisions on their behalf, for example by making a power of attorney. This information was recorded on each person's care plan. We advised the provider to keep a copy of these documents to ensure they have clear information about the decisions each attorney is authorised to make.
- Staff understood the importance of supporting people to make their own decisions and obtaining consent from people before care was delivered. People told us staff always asked for their consent before they provided any care.

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.

This was the first inspection for this newly registered service. This key question has been rated good. 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 well, and they told us staff were kind and caring. People and their relatives commented, "They are very gentle and kind with her" and "They are very professional and caring. They never make him feel uncomfortable or embarrassed. We look forward to the carer workers coming. They are bright and cheerful. It's a wonderful service."
- Staff had developed a good rapport with people and people felt well-supported by staff. People told us, "We have great conversations and laughs [with the care workers]. I don't see many people so it's great to have their company" and "They are a really nice team and [my relative] really likes them. We have recommended the service to others and we feel confident with them."
- We were satisfied care and support was delivered in a non-discriminatory way and the rights of people with a protected characteristic were respected. Protected characteristics are a set of nine characteristics that are protected by law to prevent discrimination. For example, discrimination based on age, disability, race, religion or belief and sexuality.

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

- There were effective systems in place to support people to make decisions about their care and express their views. The assessment and care planning process ensured people remained actively involved in decisions about how and when they were supported by staff.
- People's relatives told us staff were very good at communicating with people to ensure they were effectively supported to express their views. Relatives commented, "I've seen them with [my relative], and they are lovely and clear in the way they communicate with them", "I have heard how they talk to [my relative]; they talk as though [my relative] is part of their own family" and "[My relative] has dementia, but they know how to explain things to them. They are very clear in the way they communicate."

Respecting and promoting people's privacy, dignity and independence

- People were treated with dignity and respect and their right to privacy was promoted. Comments from people and their relatives included, "They are very respectful to me and my home. They clear up after themselves and put things back" and "They come out of the bathroom to give [my relative] privacy and keep checking that they are ok."
- Staff supported people to remain as independent as possible. This helped to ensure people retained their skills. People's relatives told us, "It never feels that the care workers are rushing [my relative]. They will encourage [my relative] to do the small things they can still do for themselves, such as cleaning their teeth" and "They help keep [my relative] independent. They are a support, rather than just taking over; they don't molly-coddle them."

Is the service responsive?

Our findings

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

This was the first inspection for this newly registered service. This key question has been rated good. 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; Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- People received person-centred care which met their needs. People's care plans contained enough information to support staff to deliver personalised care to each person.
- The service was flexible and responsive to any changes in people's needs. This helped to ensure people received the care they needed, when they needed it. People told us, "They are so flexible with the care. They are brilliant", "I'm really content and happy. They are so responsive to all my needs" and "They have been responsive and flexible. For example, [my relative] was getting four care visits per day, but as they improved, we decided we could cancel the teatime visit. The service implemented that with no problem."
- Staff respected people's routines and interests. They supported people to access the community and take part in activities that were of interest to them.

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- The provider had a suitable policy in place in respect of the Accessible Information Standard. They used appropriate tools to share information about people's communication needs with other organisations, when this was necessary.
- People's communication needs were assessed and met. People's care records contained information to support staff to communicate effectively with people.

Improving care quality in response to complaints or concerns

- The provider had a suitable policy and procedure in place about how and when people could complain about the service.
- People knew how to complain and felt able to raise any issues or concerns with the provider. However, they all told us they had never needed to complain.

End of life care and support

- The provider had systems in place to support people at the end of their life to have a comfortable, dignified and pain-free death.
- The service had received numerous compliments from relatives of people who had received support from

the service at the end of their lives. They described a compassionate staff team who provided effective support to the whole family. For example, "The care and compassion shown to [my relative] was second to none. The whole team provided first class care, with such respect... You all cared for [my relative] but also the whole family... This is just what you need at end of life."

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.

This was the first inspection for this newly registered service. This key question has been rated 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

- The service had an open, transparent culture and a desire to continuously improve. Staff were confident any concerns or issues they raised would be dealt with appropriately by the registered manager and provider. A staff member commented, "I feel like I've got a voice. They listen and do something every time [I speak to the management]."
- Staff morale was positive. They told us they were treated well, and they enjoyed their jobs. Comments from staff included, "Management treat us as equals" and "It's a very good company and it is professionally run."
- The provider incentivised staff to deliver good quality care and good practice was rewarded. For example, a care worker of the month scheme recognised staff practice and offered rewards to staff when they had made a positive contribution to the service and people's experience of it.

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

- Staff were clear about their roles and responsibilities. They confirmed they received enough support from the management team to deliver a good quality service. A staff member commented, "They are very good, they look after staff. Management is very good."
- The registered manager and provider regularly completed a range of checks on the quality and safety of the service provided. This supported them to identify any areas which could be improved.
- Everyone we spoke with told us the service was well-organised and managed effectively. Comments from relatives included, "The management are fantastic, and all the staff are very competent", "The management are very good and flexible" and "All the staff communicate well with each other, so it doesn't matter who you speak to. I feel that they are on top of things."

Working in partnership with others

- Staff worked closely with health and social care professionals and other organisations to ensure people received effective care and support. People's relatives described the positive effect this had on them. Their comments included, "They [staff] look at the bigger picture and think of other services we could access, such as giving us the contact details for a mobile hairdresser" and "They take the initiative and don't just leave everything to us."
- The service worked in partnership with people using the service and their family members, to develop the most effective support package for each person. People and their families experienced a professional, good-

quality service which they had confidence in. Comments from relatives included, "I think we have landed on our feet with this agency. I feel so appreciative of how kind they are. I am always able to get in touch with somebody in the office if I need to. There is nothing they could improve. They are wonderful and have taken a lot of stress off me" and "They have been extremely helpful to us and, yes, I would recommend them."

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

- People, their relatives and staff had opportunities to give feedback about the service. They were actively encouraged to do this via surveys, the complaints and compliments process and during regular checks of the quality of people's care.
- The provider and registered managed acted on the feedback they were given to make changes to the service. Staff commented, "Management act on our suggestions" and "You can communicate with [the management]. You go in with a problem and come out feeling fine."

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 had a suitable policy in place in respect of the duty of candour. At the time of this inspection there had not been any incidents which required the provider to take action under their duty of candour policy.