

Ark Home Care Limited

# ARK Home Care Ltd

## Inspection report

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## Ratings

Overall rating for this service	Good ●
Is the service safe?	Good ●
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: Smartcare Epsom is a domiciliary care service providing personal care and support for people in their own homes in Surrey. At the time of the inspection 46 people were receiving personal care regulated by the Care Quality Commission.

People's experience of using this service: The service had systems to ensure risks were managed and people were kept safe. People received effective care from a well-supported and trained staff team. We received positive feedback about how safe people felt with staff.

People received personalised care that was responsive to their needs and preferences. People were supported to have choice and control of their lives and staff supported them in the least restrictive way possible.

Staff understood the importance of respecting people's abilities and promoting independence. Staff had built positive caring relationships with people and their families. Through conversation, it was evident the staff employed at the service aimed to achieve the best possible outcomes for people.

Care plans were person-centred and evidenced the level of support people required according to their assessed needs and preferences. People supported by the service told us they were treated with respect by caring staff. Feedback from people, their relatives and healthcare professionals was positive.

Staff spoke positively about their employment and told us this had a positive effect on the people they supported. The provider and registered manager were focussed on continuous improvement.

Staff felt listened to and had opportunities to raise suggestions and be involved in the development of the service. The service worked in partnership with other organisations and healthcare professionals to ensure they followed best practice and people received care that met their needs.

The registered manager and management team used a variety of methods to assess and monitor the quality of the service. These included staff meetings, auditing of the service and surveys to seek people's views.

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: Good. The last inspection report was published 26 November 2016.

Why we inspected: This was a planned inspection based on the rating at the last inspection. The service remains Good.

Follow up: Going forward we will continue to monitor this service and plan to inspect in line with our inspection schedule for those services rated Good.

## 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 safe

Details are in our Safe findings below.

Good ●

### 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 ●

# ARK Home Care Ltd

## Detailed findings

### Background to this 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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

**Inspection team:** This inspection was carried out by two adult social care 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 service.

**Service and service type:** Smartcare Epsom is a domiciliary care service providing personal care and support for people in their own homes in Surrey. At the time of the inspection 46 people were receiving personal care regulated by the Care Quality Commission.

The service had a manager registered with the Care Quality Commission. 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.

**Notice of inspection:** We gave the service 48 hours' notice of the inspection visit because it is a domiciliary care service and we needed to be sure that the registered manager and other senior staff would be available to speak with us. We also needed to ensure that people's consent was gained for us to contact them for feedback about the service.

We visited the service on the 7 May 2019 and looked at records relating to the management of the service such as incident and accident records, meeting minutes, training records, policies, audits and complaints.

During the inspection we spoke with 12 people who received personal care from the service and we visited three people in their own homes. We also spoke with nine members of staff. This included a director, the registered manager and care staff. We reviewed a sample of people's care and support records. After the inspection we contacted healthcare professionals who had a contract with the service to obtain their views of the service provided and received three responses.

What we did: The provider had completed the Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. We reviewed other information that we held about the service such as notifications.

# Is the service safe?

## Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm

People were safe and protected from avoidable harm. Legal requirements were met.

Systems and processes to safeguard people from the risk of abuse

- People were protected from potential abuse and avoidable harm by staff that had regular safeguarding training and knew about the different types of abuse.
- Staff were confident any concerns they reported would be listened and responded to promptly.
- The provider had effective safeguarding systems in place. Staff understood the external agencies they could contact to raise concerns with if required.
- The service had notified any safeguarding concerns to the Care Quality Commission and notifications included details of actions taken to protect people.

Assessing risk, safety monitoring and management

- People told us they felt safe when staff entered their homes. One person told us, "[I feel] Very safe, basically that's what they do. I have (medical condition) and they support me by how I am feeling each day, they take me to appointments and motivate. In general, extremely nice people."
- Other comments we received included, "Yes, I do feel safe, I have no worries at all" and, "Yes [I feel safe], they are brilliant, they have been coming for two and a half years, five days a week."
- Staff understood where people required support to reduce the risk of avoidable harm. Care plans included information about the measures for staff to follow to keep people safe and reduce the risk of accidents and incidents.
- Staff generally worked with the same people, so they were familiar with their needs and plans to manage risk.
- Risks associated with the environment were assessed and recorded so staff could provide safe care to people.
- There was a lone working policy in place, which helped to keep staff safe.

Staffing and recruitment

- There were sufficient numbers of staff to meet people's needs. The provider aimed to ensure consistency and continuity for people when scheduling staffing. People said this helped them in both knowing current staff and meeting new staff.
- Comments from people who used the service included, "They are not the same staff every day, but I have a regular bunch, so I know them all" and, "They vary which is rather nice because I see different faces and chat to different people. I don't leave the house, only for hospital appointments, so it's nice to see different people with different points of view."
- The service had a stable staff team with an additional bank of staff which included office-based personnel to ensure any unplanned absence could be covered at short notice.
- Staff had been recruited safely. All required pre-employment checks had been carried out including

criminal record checks and obtaining references from previous employers.

#### Using medicines safely□

- People received support with their medicines as required and the support provided was documented on Medicine Administration Records (MARs).
- Staff received training in the safe use and administration of medicines. There were systems to ensure staff competency and audit medicine administration.
- People we spoke with told us their medicines were administered safely. Comments we received included, "They do help with medication and make sure that I take them" and, "They get the medication ready with a glass of water and I take them, but they supervise me taking it."
- We saw evidence the service continually developed records to reduce risks associated with medicines. New MARs had recently been introduced that required additional information to be completed by staff in relation to medicine administration times.

#### Preventing and controlling infection

- Suitable measures were in place to prevent and control infection.
- Staff wore clean uniforms and understood the importance of promoting good standards and hygiene.
- Staff had received training in infection control and knew their responsibilities.
- There was a sufficient supply of gloves and aprons for staff available. Staff told us they always had access to this protective equipment.
- People we spoke with told us that staff always wore protective equipment when needed and we made observations on home visits to support this.
- People commented, "They wear gloves because they have greased my legs and that's basically what they do" and, "Yes, they use gloves and have aprons on all the time."

#### Learning lessons when things go wrong

- Management were keen to develop and learn from events. Accidents and incidents were recorded and analysed by the registered manager or a senior member of the staff team.
- There were effective quarterly governance systems in place to monitor reported accidents or incidents to establish patterns or trends.
- Learning from incidents took place through investigations and this information was used to update people's care records where needed. This information was shared with the staff team.

## 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

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

- Assessments of people's needs were comprehensive, expected outcomes were identified and care and support was reviewed.
- The service carried out pre-admissions assessments of people before they started with the service. This was to check if people's needs could be met.
- Staff applied learning effectively in line with best practice, which led to positive outcomes for people and supported a good quality of life. This was reflected in the comments we received.
- Staff had access to a library of information and guidance specific to some people's individual health needs. This had been produced by the registered manager from published national guidance.

Staff support: induction, training, skills and experience

- People received effective care and treatment from competent, knowledgeable and skilled staff who had the relevant skills to meet their needs.
- People told us staff were competent. Comments we received included, "Oh yes, they seem to know what it's all about and what they have to do – yes, it's all very good", "I would say they are trained, they are competent" and, "They are skilled and well trained."
- The provider had an effective system to monitor all staff had regular and refresher training to keep them up to date with best practice and skills to meet people's needs.
- Staff felt well supported and had supervision and an annual appraisal to discuss their further development. Some staff had previously been given the opportunity to undertake nationally recognised training with Sterling University.
- All of the feedback we received from staff relating to standard of training provided was positive.
- New staff had completed a comprehensive induction. All staff had completed the Care Certificate to understand the national minimum standards.

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

- At the time of our inspection there were no people assessed as at significant risk of malnutrition, and staff did not support any people with any form of specialist nutrition equipment.
- People's care plans detailed their food and drink preferences where relevant to ensure they received consistent support.
- Staff supported people with food preparation and with eating if required.
- People said they received the right level of support. Comments included, "They prepare my breakfast and get me up, then lunch time and back again in the evening, they are all good girls. I have my beaker with squash and I eat my chocolates" and, "I get my meals from a company and they will heat them in the

microwave or sometimes make me a sandwich, it just depends on how I feel."

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

- The registered manager told us they had good relationships with local professionals and they worked in partnership with other professionals which promoted people's well-being and independence.
- Care records we reviewed evidenced where communication had been undertaken with professionals, for example an occupational therapist, to discuss people's needs.
- A relative we spoke with told us, "Yes, they are (very good), if there is something wrong, they get in touch with their office and tell them, and they get the GP out to look at him."
- One person we spoke with told us, "Sometimes they do offer to make GP appointments but most times I do it myself."
- We heard staff communicating with people on the telephone during the inspection, during one call staff supported a person by offering to call their GP for them.

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 Act 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 were asked for their consent before they received any care and treatment. For example, before assisting people with personal care and getting dressed. Staff involved people in decisions about their care and acted in accordance with their wishes.
- Staff understood the importance of obtaining consent prior to any care intervention. Staff carried booklets issued by the provider detailing the principles of the MCA.
- There was a system to record if people had a registered Lasting Power of Attorney in place. The registered manager told us they would revise the current process to ensure a copy of the document was obtained or seen during the pre-admission assessment.

# 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

People were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported

- People received care from staff who developed positive, caring and compassionate relationships with them.
- The registered manager and staff we spoke with were committed to ensuring they provided high quality, person centred care.
- People told us staff knew them well and we received consistently positive feedback. Comments included, "I have a very good relationship with them (staff), we are on very friendly terms – yes, I feel very comfortable" and, "Its friendly, we natter about this and that – they are always interested with what I do. They are a group of friendly people who come to see me."
- The service had received compliments from people or their relatives. An example of one compliment read, "Excellent service, I look forward to seeing you all. The carers listen to me and are very supportive."
- People were treated with kindness and were positive about the caring attitude of staff. People and their relatives were highly complementary in discussions with us about the care they received.

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

- People were involved in day to day decisions and in regular reviews of their care. People and their relatives confirmed staff involved them when people needed help and support with decision making.
- People and relatives told us they felt their views were listened to and respected.
- Comments from people about expressing their views to staff and feeling listened to were positive. One person told us, "I have a care plan and the senior one comes in to go through the plan, and she will ask if everything is okay."
- People were supported by staff to make decisions and staff knew when people wanted help and support from their relatives.

Respecting and promoting people's privacy, dignity and independence

- Staff felt people's privacy and dignity was respected and people told us they felt this was the case. Comments we received included, "They are very good and very respectful to me" and, "Yes, I do definitely (feel dignity is respected), when I am washing my front, they look away – they wash my backside and put the cream on as I sit for most of the day. I am not embarrassed, and they make me feel comfortable."
- A relative we spoke with commented, "They always put a towel around him when he comes out of the shower and will make sure the doors are closed in the bedroom when they are getting him dressed, so yes very much respected."
- The observations we made between people and staff when we visited people were positive and there were evidently good relationships between people and staff.

- People were encouraged to be as independent as possible, support plans detailed the level of support people needed.
- People's confidentiality was respected, and people's care records were kept within their own home or securely within the providers registered office.

## Is the service responsive?

### Our findings

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

People's needs were met through good organisation and delivery.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control

- Care plans were personalised to the individual and recorded details about each person's specific needs and how they liked to be supported.
- Care plans were subject to a periodic review. This was completed at a scheduled frequency or when a change in a person's needs was identified.
- People commented, "We always discuss any change with the people who come here, they certainly do understand what I need" and, "If for any reason I want them to alter the time (of the care appointment) they will."
- Staff understood people's specific needs. They had built up relationships with them and were familiar with their preferences.
- In addition to care reviews, 'Client Contacts' were completed by senior and office staff to check people's needs were being met and if they required any additional support.
- We saw evidence the 'Client Contacts' had been effective in ensuring people's needs were met as one had resulted in a risk being identified that led to an increase in district nurse visits.
- Daily records were completed which detailed the level of care and support people had received and assisted in identifying any changes in people's health and well-being.
- There was information in place to enable the provider to meet the requirements of the Accessible Information Standard (AIS). This is a legal requirement to ensure people with a disability or sensory loss can access and understand information they are given. Each person's care plans included a section about their individual communication needs.
- We saw an example of how the service had supported one person to better understand their care appointments by using pictures to show appointment times and what care the staff would be providing to support them.

Improving care quality in response to complaints or concerns

- There were known systems and procedures in place. A complaints policy and information for people on how to raise a concern was within people's records in their homes.
- People and relatives said that they felt able to speak to the registered manager or staff at any time. Comments we received included, "No, I have no complaints. I would obviously speak to a member of staff that answers the phone or I would speak to [registered manager] if there were any concerns" and, "Yes, I feel comfortable raising any issue, at my age I should be able to do that don't you think."
- We saw evidence that complaints received were taken seriously and used to help improve the service where possible. Where matters had been raised, we saw records that evidenced the actions that had been taken and if any further action was required.

## End of life care and support

- At the time of our inspection, the service was supporting one person whose health was in decline and they were approaching the end of their life.
- The service had provision for staff training in end of life care, and staff had commenced learning about end of life care provision and records evidenced where training was planned.
- The registered manager told us they would work closely with families and external agencies, such as GPs and community nurses, to support people.
- The service had very recently launched a specific end of life care plan for people, and this was being reviewed to ensure it was personalised and detailed the services responsibilities for when a person was being supported at the end of their 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

The service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Planning and promoting person-centred, high-quality care and support with openness; and how the provider understands and acts on their duty of candour responsibility

- The registered manager and staff clearly understood the needs and preferences of people they supported.
- A health professional we spoke with described the registered manager as, "Being very much at the forefront of care for her clients."
- People told us care was personalised and commented positively on the quality. This reflected the management and approach to planning and scheduling care within the service.
- People, relatives and staff expressed confidence in the management team. Staff said they felt the service was open, transparent and honest. Staff communication with the registered manager and other senior staff was encouraged.
- Comments we received included, "The managers are very approachable, I can contact them anytime. They are all very nice and have never had to complain" and, "I would say they are a friendly bunch of people who cares for your needs, very attentive, very friendly, basically a very good company that I would recommend to others."
- A healthcare professional told us, "I have found management and staff a pleasure to work with, they are professional, prompt and effective in what they do and I wouldn't hesitate to use them in future."
- The provider and registered manager ensured they were fully trained to ensure they could support staff at short notice if required.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- The service had clear lines of responsibility and accountability. The registered manager, management team and staff were experienced, knowledgeable and familiar with the needs of people they supported.
- The registered manager and director were actively involved in the day to day running of the service including working hands on, alongside staff where required.
- There was good communication maintained between the registered manager, director and staff. In addition to supervision, the service completed regular 'In Touch' calls with staff to ensure wellbeing and support was provided and promoted.
- Staff were positive about their employment and the service management. Comments included, "I wouldn't want to work for any other company" and, "They (provider and registered manager) are very supportive in both my work and personal life."
- A healthcare professional told us that one of the main strengths about the Smartcare philosophy was how the registered manager looked after the staff.

- The providers current Care Quality Commission rating was displayed at their registered office and statutory notifications had been sent as required.

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

- The service regularly sought the views of people. The management team continued to consult with people about their care and about the service. People were empowered to feedback their views on the service.
- People told us they felt confident to comment on the care and support they received. One person said, "They have asked for verbal feedback and I have nothing bad to say about the staff, they are very, very good and we appreciate their help" and, "I have not answered a questionnaire but when the lady goes over the books, she will ask at that time but its verbal feedback."
- The service had systems to seek the views of staff on their employment through a survey. Results of this survey showed staff were positive about their employment. Where staff had highlighted areas to improve care provision, for example more travel time between visits, this had been actioned.
- The service had systems and procedures in place to monitor and assess the quality of their service. There had been a survey sent out to people. The results of this review were positive.
- Where people had highlighted matters in the survey, this had been addressed by the service and adaptations made to care provision where needed.

Continuous learning and improving care, working in partnership with others

- The service had a quality assurance system in place. Audits were regularly undertaken by the registered manager. An effective quarterly 'Service Review' governance system reviewed all aspects of care provision and service management.
- We saw that where elements of the governance system or surveys had evidenced areas for improvement, the service had responded to this and changes were made. This showed a desire to continually improve the service.
- The provider was a board director of the Surrey Care Association. This ensured continual learning was achieved through business network meetings where information and experiences were shared. There was also engagement with the NHS and local authority.
- In the event of bad weather or a major incident, the provider had a business continuity plan in place. The provider told us during the inspection they had sourced snow chains during a previous period of adverse weather to ensure care delivery continued.