

Whispers Care Solutions Limited

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Inspection report

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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

Whispers Care Solutions Limited is a domiciliary care provider. At the time of this inspection 167 people received personal care support from the service. The service supported younger and older people, some of who were living with dementia, within their own homes. The service also offered a complex care service for people with more higher levels of need working with multidisciplinary teams.

Not everyone who used the service received personal care. CQC only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do, we also consider any wider social care provided.

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

People felt safe using the service. Systems were in place to protect people from abuse. There were enough staff to keep people safe, although some people felt calls were not always on time and raised concerns about the continuity of care workers who provided their care.

There were plans in place for foreseeable emergencies. Risks concerned with people's health care and the environment were assessed and reduced as far as was practicable. However, some risk management records would benefit from being more comprehensive and complete.

People were supported to take their medicines safely. Staff were provided with training and checked to ensure they were following correct procedures.

Most staff felt supported by the provider and registered manager and could visit the office to discuss any concerns. Staff were enthusiastic about their jobs and showed care and understanding for the people they supported.

There were effective systems in place to monitor and improve the quality of the service provided. This helped ensure people received personalised care in a way that met their individual needs.

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. Policies and systems in the service supported this practice.

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

Rating at last inspection and update

The last rating for this service was good (published 23 November 2018).

Why we inspected

We received concerns in relation to staffing concerns. As a result, we undertook a focused inspection to review the key questions of safe and well-led only.

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

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating. The overall rating for the service has remained good based on the findings of this inspection.

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.

Whispers Care Solutions Limited

Detailed findings

Background to this inspection

The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Health and Social Care Act 2008.

Inspection team

The inspection was completed by 1 inspector and an Expert by Experience contacted people and relatives by telephone. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

This service is a domiciliary care agency. It provides personal care to people living in their own houses and flats.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

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

Notice of inspection

This inspection was unannounced.

What we did before the inspection

We used the information the provider sent us in the provider information return (PIR). 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 this information to plan our inspection.

During the inspection

We spoke with 2 people who used the service and 9 relatives about their experience of the care provided. We spoke with 15 members of staff including the registered manager and nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider, senior care staff and care staff.

We reviewed a range of records. This included 6 people's care records and multiple medicines records. We looked at 5 staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at training data and quality assurance records. We spoke with 5 professionals who regularly visit the service.

Is the service safe?

Our findings

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

At our last inspection we rated this key question good. At this inspection the rating has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People and relatives told us they felt safe when staff visited them in their homes.
- The registered manager understood their responsibilities to safeguard people from abuse. Safeguarding and whistleblowing policies were in place to support staff.
- Staff understood the procedures for keeping people safe and knew how to recognise signs of potential harm or abuse. Staff were confident appropriate action would be taken if they raised any concerns. One staff member told us, "Whistle-blowing I have great confidence if I had to report anything it would be dealt with in a good timely manner and appropriate actions taken."
- Staff informed us they had received safeguarding training.

Assessing risk, safety monitoring and management

- Staff demonstrated an understanding of assessing risk and were aware of individual risks associated with providing care to people and assessments were undertaken to assess any risks to people and to the care workers who supported them. The provider was taking action to ensure all environmental risk assessments were comprehensively completed
- Professionals felt the service managed risks well. One professional told us, "The client's needs are complex and there are known risks which the Whispers staff have managed well, with support and training from us and from the therapists. The support workers appropriately and effectively managed a couple of incidents when the client's health deteriorated quickly requiring medical attention." Another professional told us, "From the start of them working with the local authority they identify any potential risks and inform us immediately, discussions will be held as to the most appropriate way to manage the risk, it may be an unsafe discharge and the client is returned to hospital, if its related to moving and handling then we will allocate equipment or ask for an occupational therapist to visit."
- A business continuity plan was in place to support the running of the service in the event of an emergency.

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The MCA requires that, as far as possible, people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the Mental Capacity Act (MCA).

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.

- One professional told us, "Whispers managers and support workers have been aware of mental capacity and consent. The client has a community DoL application in progress that has been filed with the Court of Protection, and we are waiting for the Court to process the application."

Staffing and recruitment

- Recruitment processes were mostly followed that meant staff were checked for suitability before being employed by the service. This included checks with the Disclosure and Barring Service (DBS). DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.
- People and their relatives felt there were sufficient staff to meet their needs. Most people were happy with the time of their calls. However, some felt that they were not always aware which staff member would be attending. One relative told us, "We don't know who's coming, we know a few of them. We never know if there is a change of carer. Some know her needs and are pretty good, but there has been a lot of changes".
- Other people were more positive. One person told us, "They come 4 times a day for half an hour. I get regular ones. They know my needs and are well trained as they really look after me. They are very caring." A relative told us, "They come twice a week for 4 hours per time. It's always the same lady that comes. We are getting a shadow for her over Christmas when she is on holiday so that they know the routine. Very well trained, nothing fazes her. [Person name] smiles when she comes in and they have a chat. She is very caring and loving."
- The provider told us they supplied an emergency bridging service with the local authority to help people back into their homes more quickly. As this was a short term emergency service it was not time specific and could not guarantee a time of call.

Using medicines safely

- Medicines were managed safely and there were appropriate arrangements in place for the recording and administering of prescribed medicines.
- Staff had received training in the safe handling of medicines and an assessment of their competency to administer medicines had been assessed in line with best practice guidance. One staff member told us, "I have knowledge from experience on medications but when starting with Whispers was given amazing training and guidance with this and always know if I have questions or concerns I can call the office and raise them and this will be dealt with immediately."

Preventing and controlling infection

- There were appropriate policies and procedures in place to control the spread of infection.
- Staff demonstrated understanding of infection control procedures and had ready access to personal protective equipment (PPE), such as disposable gloves and aprons. One staff member told us, "We wear PPE at all calls and change gloves between personal care and food preparation."

Learning lessons when things go wrong

- Records were maintained of accidents and incidents that had occurred. There was evidence that the provider reviewed these to ensure that appropriate action had been taken to reduce any on-going risk, and to debrief the staff involved.

Is the service well-led?

Our findings

Well-led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

At our last inspection we rated this key question good. At this inspection the rating has remained good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- People and their relatives were happy with the service. One person told us, "They do a good job and do everything well. I would recommend. I've had care with a previous care company and `Whispers` are better, 100% Better!" A relative told us, "I don't know how they can improve as the whole care side is excellent."
- Professionals praised the service. One professional told us, "I find Whispers a professional and engaging care agency, who work well with vulnerable clients. I find them reliable with a good level of care experience." Another professional said, "I have a great deal of professional confidence that whispers will provide a professional care at home service, with kind and well trained carers. On the cases I have reviewed. I find their whispers provider support plans personalised, comprehensive, concise and well written."
- The service worked in a person-centred way to meet the needs of people and care plans were person centred. One staff member told us, "I have no concerns with the way Whispers works, I love my job and always pick up extra hours. It is a well led and well-run company for our clients meeting their needs and all our staff, go above and beyond for our clients."
- Throughout the inspection it was evident that the leadership team were all extremely passionate about their role and took ownership of ensuring improvements were continually made to the quality and safety of the care provided.

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

- People and professionals were happy with the management of the service. One professional told us, "If any issues arise, their managers or seniors contact us, and they are quick to address any issues raised with them. During emergencies where someone they are providing care to becomes unwell or has a crisis, Whispers are quick to contact us and to put in additional support hours, doing their best to adjust rotas to fit in urgent changes, which is not always easy to do with little notice." Another professional told us, "We have had no concerns raised regarding this provider this year. I consider this service to be safe and well led with a strong and responsive management team."
- Most of the staff felt management were approachable and supported staff. One staff member told us, "The manager of Whispers [managers name] is incredible, she is always on hand 24 hours of the day to answer the phone. Recently I had to hand back a shift she was understanding, empathetic and supportive during this time. I have never had a manager like her she is approachable, kind and caring towards all staff and

clients."

- The registered manager and senior staff used a series of audits to monitor the service. These included audits of medicines and care records.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- The provider sought feedback from people or their families using a quality assurance survey. This was sent out annually seeking their views. The latest survey was mostly positive.
- We saw many compliments about the service from people, relatives and professionals.
- The provider worked in partnership with other professionals. One professional told us, "I find them professional and also happy to take suggestions on and to work as a team. I feel they have always got the client's best interests at heart and deliver good care." Another professional said, "The managers have been open and keen to work collaboratively."
- Senior staff were supported by team meetings. Staff meetings are an open forum amongst staff and are usually held to discuss concerns about people who used the service and to share best practice. However, no team meetings were in place for care staff. Staff we spoke to felt this would be beneficial and we passed this on to management. One staff member told us, "I do believe there should be a meeting for all staff to attend to raise concerns but understand the time for this cannot always be met and we are always promoted to email any issue into enquiries." Staff were updated via an app on their phones for any updates on the service.
- Most staff felt valued and listened to, for example 1 staff member told us, "I have emailed the training manager about the use of barrier creams, the knowledge of pressure damage and treatments and how I thought it was important for staff to recognise this to prevent further harm, help heal and improve skin health. This was in the compliance email the following week and the training manager emailed me back with thanks for raising it." Another staff member told us, "I can honestly say it's the best care company I have worked for."
- Most staff felt valued, and awards were given for staff who went above and beyond to show appreciation.

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 notified CQC of all significant events and was aware of their responsibilities in line with the requirements of the provider's registration.
- The provider had appropriate policies in place as well as a policy on Duty of Candour to ensure staff acted in an open and transparent way in relation to care and treatment when people came to harm.