

Saroia Staffing Services Ltd

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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 effective?	Good ●
Is the service caring?	Good ●
Is the service responsive?	Good ●
Is the service well-led?	Requires Improvement ●

Summary of findings

Overall summary

About the service

Saroia staffing services is a Domiciliary Care Agency (DCA) and Supported Living Service registered to provide personal care. People were supported with their personal care and daily living needs to enable them to live in their own homes and promote their independence. At the time of our inspection, the service supported seven people, many of whom were on an end of life pathway.

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

Quality checks were in place to monitor the safety and effectiveness of care provided, However, these had not detected a small number of inaccuracies noted during our inspection. The registered managers made the relevant updates during the inspection. Daily notes were not being audited and did not often include people's emotional well-being. The registered managers had recently recruited a new manager to address these issues and help develop their electronic recording system.

A person receiving care and relatives, told us they were happy with the service provided and would recommend the service to others. They told us they and their family members were supported by a consistent staff team who understood how to keep them safe.

People were supported by staff who had been safely recruited and appropriately trained and supervised. People were protected against the risk of avoidable harm and abuse. People received safe and appropriate support to take their medications.

People received consistent care from a small group of staff who knew their care needs well. Staff treated people with dignity and respect and upheld their right to privacy. People were supported to have as much choice and control in their lives as possible, they were supported in the least restrictive way possible and in their best interests.

Staff spoke with compassion and respect about the people they supported. Feedback about staff was very positive. One relative told us; "The staff are absolutely lovely; they are a delight with [my relative]."

People's care was planned and reviewed around their needs, wishes and preferences. A person receiving care and relatives told us, they knew how to complain but had not had cause to do so. They told us the service regularly contacted them to ensure that everyone was happy with the service received and they felt confident to speak to staff and management about any concerns they had.

Staff described the registered managers as supportive and easy to contact. One staff member told us; "[The managers] are perfectly approachable, they always communicate well and guide us." A person receiving support and relatives told us they had confidence in the management team and felt comfortable to raise any issues or concerns.

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.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk
This service was registered with us on 21/06/2014, it was registered at new premises on 18/09/2019.
The last rating for the service at the previous premises was Good, published on 29/05/2019. This is the first inspection at the new location.

Why we inspected. This was a planned inspection based on the need for a rating at the service's new location.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

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 not always well-led.

Details are in our well-Led findings below.

Requires Improvement 

Saroia Staffing Services 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 Care Act 2014.

Inspection team

This inspection was completed by one inspector.

Service and service type

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

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 24 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the provider or registered manager would be in the office to support the inspection.

What we did before the inspection

We sought feedback from the local authority and professionals 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 with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all of this information to plan our inspection.

During the inspection

We spoke with the two registered managers, a director, and the office manager, as well as four staff members including a member of the night staff team. We spoke with one person who was using the service and two relatives. We reviewed a range of documents including two people's care records and multiple

medication records. We looked at two 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 contacted a professional who has worked with the service.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm. This is the first inspection for this newly registered service. This key question has been rated good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People received care that was safe. Staff told us how they kept people safe and what they would do if they had any concerns. They told us the registered managers/providers would take appropriate action if concerns were raised.
- The providers had policies and procedures in place to protect people from abuse. A person receiving care told us they were safe, and relatives also told us their loved ones were safe.
- A safeguarding concern had been dealt with appropriately and the service had liaised with other professionals in line with local safeguarding procedures.
- Staff received safeguarding training with annual refresher training.

Assessing risk, safety monitoring and management

- People's care plans included information and guidance to support staff in providing safe and person-centred care, which was tailored to people's specific care needs. We looked at a risk assessment for a person using a CPAP machine (continuous positive airway pressure). This is used to treat some forms of sleep apnoea. We noted the risk assessment did not include instructions for staff on what to do if they were concerned about the machine not working. However, staff told us they had had training on how the machine worked and were able to tell us what they would do if concerned. They also told us there was information at the person's home which contained further guidance.
- Care plans included information about people's specific health care needs, which supported to staff to know what signs and symptoms to look out for and what action to take to keep people safe.
- Before staff began to support people, environmental risk assessments were completed to consider risks to people and staff. These included any specialist equipment needed.
- Staff received training in moving and handling and health and safety.
- An emergency contingency plan was in place to provide safe care in the event of various events which could impact the service such as staff numbers being affected by COVID-19 or shortages in personal protective equipment (PPE) supply.

Staffing and recruitment

- Checks were completed on the suitability of potential staff. These included obtaining references and checks with the Disclosure and Barring Service (DBS). These checks supported the registered managers to help prevent the recruitment of unsuitable people and make safer recruiting decisions.
- After recruitment staff completed an induction to ensure they had the support, skills and information needed to care for people safely.
- Relatives and a person receiving care told us they were supported by small consistent staff teams. Staff told us there were sufficient numbers of staff to provide safe care. One staff member told us; "We have plenty

of staff, we don't have any problems, the director will step in if needed."

Using medicines safely

- At the time of the inspection most people were supported by relatives to take their medication, in accordance with their preference. One person was supported to take their medication by the service. Medicines were managed safely, and staff received training to administer medicines safely and they had their competency reviewed.
- During the inspection it was noted the medicines summarised in the care plan did not include a homely remedy the person had elected to use. This was shared with one of the registered managers, who updated this information during the inspection.
- The registered managers completed regular checks on medicine administration records to ensure they were being given safely.
- The person receiving support to take their medication told us they were happy with the support given. They told us; "I get [my medication] the way I want it, when I want it."

Preventing and controlling infection

- We were assured the provider was using personal protective equipment (PPE) safely. This included providing specific masks for staff supporting aerosol generating procedures.
- Relatives told us staff wore the correct PPE at all times, and staff told us they were provided with a sufficient ongoing supply. One staff member told us; "We have enough PPE, we have extra."
- Staff told us they had all had infection prevention training and received updates when government guidance on the recommended use of PPE changed.
- Staff told us they were testing for COVID-19 in line with government guidance and described how they shared the results with the registered managers.
- A COVID-19 policy and procedure were in place which had been updated in line with government guidance.

Learning lessons when things go wrong

- The provider had systems in place to record, investigate and learn from incidents and accidents. At the time of the inspection, there had been very few incidents.

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 is 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 care needs were assessed before they received a service. This meant the service ensured the person's needs could be met, and they had the resources needed to provide safe and effective care.
- At the time of our inspection, the service was in the process of developing electronic recording and monitoring systems. A summarised version of people's care plans was available to staff, and full comprehensive care plans were gradually being added to the system. Staff were already recording daily notes electronically, which meant care could be monitored virtually in real time. The registered manager told us problems were still being ironed out in this introductory phase.

Staff support: induction, training, skills and experience

- Staff told us they completed an induction which included shadowing experienced staff members. This gave staff time to get to know the person they were supporting and learn about their role.
- Staff told us they received all the training they needed to feel confident and competent in their role. They also completed regular updates and training specific to people's individual needs, including end of life support and dementia awareness.
- Staff told us they received regular supervision and we viewed documentation which evidenced this.
- The person receiving care, and relatives told us they felt staff were suitably trained and experienced.

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

- Where people needed dietary support, their care plan outlined the support they needed.
- Daily notes demonstrated staff monitored people's food and fluid intake in line with guidance from health professionals.
- Staff told us they had been given specialist training to support people with a percutaneous endoscopic gastronomy (PEG). This allows food, fluid and medication to be put directly into the stomach bypassing the mouth. However, at the time of our inspection no one needed this support.

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

- Staff worked alongside other health and social care professionals to ensure people received timely and effective support. This included care home staff, district nurses and end of life care teams.
- Staff provided waking night support to a person to enable them to remain safe in their care home with a condition which required monitoring.

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

- People's care plans included information about their physical and healthcare needs, which could impact

upon their wellbeing. Case notes showed people's symptoms were monitored and recorded, however we noted a lack of monitoring of people's emotional wellbeing. We discussed this with the registered managers. They advised this was lacking in the new electronic daily note recording system, and they were working on addressing this to enable staff to record this information more clearly.

- Staff were able to describe specific ways in which people may require support dependent upon their specific conditions and circumstances.
- For those who were receiving end of life care, staff emphasised the importance of focusing on comfort and working alongside family members.

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 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.

- Staff received training on the Mental Capacity Act. Staff told us they always sought consent before helping people with their care or daily activities.
- Where possible people were fully involved in decisions about their care and their capacity to do this was respected. One person receiving support told us "I have no restrictions."
- Policies and procedures were in place and had recently been reviewed.

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

- People and relatives told us they had developed positive relationships with staff who knew them well. Relatives told us their loved ones were treated well. One person told us; "It's a good company and they have a caring attitude; I am very lucky."
- Weekly calls were made to people and their relatives to ensure they were happy with how care and support was being provided and to give people a chance to raise any issues or concerns.
- The registered managers ensured people were offered the option of male or female staff to support them, according to their preference. One person told us they felt confident to request different staff if they did not feel happy with those supporting them.
- Relatives told us they were actively involved in decisions about the care of their loved ones. One relative told us; "Changes have been made because of our circumstance; I was involved in those decisions."

Respecting and promoting people's privacy, dignity and independence

- A person receiving care and relatives told us they were treated with dignity and respect. One person described ways in which the staff ensured their dignity was respected whilst receiving personal care. A relative told us; "[The staff] are very respectful."
- Staff told us about how they protected people's privacy and were careful to check about consent and who was next of kin before sharing information with relatives about people receiving care.
- Staff described ways in which they supported people to maintain independence by doing as much as they could for themselves. One person was supported to pursue their hobbies and interests and told us they were happy with the way this support was given.
- Discussion with staff showed they knew people well and knew how they wanted to be supported.

Is the service responsive?

Our findings

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

This is 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

- Care plans were person-centred. They contained information about people's specific needs and preferences. Discussions with staff showed they knew about people's needs and how they like to be supported.
- The registered managers regularly reviewed care plans to check the information was accurate. Changing needs were identified regularly during weekly telephone check ins. This ensured people were receiving care that continued to meet their needs.
- Relatives spoke positively about feeling supported by the service. One relative told us; "[The carers] check on the care we receive to make sure we are happy." A person receiving support told us they were happy with the support they received to maintain social relationships. They also said; "I am one hundred percent in charge."

Meeting people's communication needs

Since 2016 onwards, all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- People's communication needs were considered as part of their assessment and care review process.
- Most of the people receiving care were on an end of life care pathway, some were not able to communicate verbally. In these instances, close relatives were regularly consulted to ensure people were receiving care in the way they wanted.
- Staff were able to describe ways in which they communicated with people none verbally as well as verbally to ensure they understood their wishes clearly.

Improving care quality in response to complaints or concerns

- Relatives told us how they could provide feedback about their loved one's experiences of care and the service provided in a range of accessible ways. They could provide feedback during weekly check in calls, contribute to care plan reviews and if needed could use the complaints process.
- Relatives and a person receiving care told us they had not had cause to make complaints but had found the management team had listened to any issues or concerns raised. One relative told us; "I asked if [the carers] could come earlier, and they do, which really helps."
- The service had a complaints policy in place, but at the time of our inspection they had not received any formal complaints.

End of life care and support

- People's decisions, preferences and requests in relation to end of life care had been sought and were recorded in their care plans.
- Staff were guided to liaise with the district nursing team if people needed pain management support.
- Staff spoke with compassion and empathy about supporting people on an end of life pathway. One staff member told us; "It is lovely to look after them, I really enjoy my job, I have the skills and knowledge I need to make them comfortable."
- Relatives told us they were happy with the care provided to their loved ones who were on an end of life pathway. One relative told us; "The carers make such a difference."
- Staff received training to help support people during their end of life journey.

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 is the first inspection for this newly registered service. This key question has been rated requires improvement.

This meant the service management and leadership was inconsistent. Leaders and the culture they created did not always support the delivery of high-quality, person-centred care.

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

- Risk assessments were in place to support staff to ensure care was provided safely and effectively. We noted that care file audits had not identified a CPAP (continuous positive airway pressure) machine risk assessment did not include guidance for staff on what to do if they were concerned the machine was not working. We spoke with the registered managers; they advised all staff received training on how the CPAP machine worked before providing support to the person and they all knew what to do if it was not working. Staff we spoke with confirmed this and advised additional guidance about who to contact if the CPAP machine was not working was at the person's home. The registered managers gave assurance that all staff would receive the training and guidance needed to monitor the CPAP machine safely, even in the event of staff shortages.
- Daily notes were not being audited to ensure information being recorded was sufficient. Notes also lacked information about people's emotional wellbeing. We spoke with the registered managers who advised a new team member had just been recruited and part of their quality improvement role would be to monitor and audit daily notes to improve their quality and work with the new electronic recording system, to support people with an efficient and accurate recording system.
- Staff told us, and the registered managers confirmed, staff meetings had been infrequent. The registered managers told us this had been due to difficulties around meeting during the pandemic and plans were in place to hold more staff meetings in the coming months.
- Regular checks had been implemented by the registered managers to ensure people and relatives were happy with the quality of the service.
- Spot checks and observations of care being provided were completed to monitor the quality of care provided. Written records of these checks were completed to show any improvements or changes staff needed to make and to enable ongoing oversight of staff progress and development.

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

- Relatives and a person receiving care told us they received good quality care from staff with the right knowledge and skills to perform their responsibilities well. One relative told us; "They treat [my relative] like the best medical staff do, with care and affection, you would think [my relative] was their family member." Relatives consistently said they were happy with the service received.
- The registered managers promoted a positive culture and set of values which informed the care provided by the service. They were committed to providing a good quality 'person centred' service, which was

reflected in the staff's values.

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

- Relatives and a person receiving care told us they felt able to raise any issues they had with the service. Staff told us the registered managers were always contactable if they needed any guidance. One staff member told us; "[The managers] are easy to get in touch with, I am listened to, and if we ask for something, we get it."
- The registered managers understood the need to investigate and respond to concerns and complaints, and when appropriate make referrals to other organisations such as the Local Authority.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Continuous learning and improving care; working in partnership with others

- The person receiving care and relatives all told us the service checked in with them regularly to ensure they were happy with the care received. They told us they felt comfortable with speaking to staff and sharing feedback. One relative said; "The manager has telephoned me regularly to ask how care is going and if there is anything I need."
- All staff received training on equality and diversity and in discussion demonstrated they understood people's protected characteristics.
- The registered managers described a number of ways in which lessons learned had been used to improve service provision. For example, they had found effective communication across the staff team was challenging and had split the team into smaller groups with a team lead for each. They found this had significantly improved communication.
- The service was working in partnership with local stakeholders such as the local authority and end of life care teams. One local stakeholder told us; "Saroia staffing services is a very supportive, flexible and caring company. They will go that extra mile for our patients and the NHS to ensure that they can either keep patients at home or avoid hospital admission."