

Sunshine Care (Yorkshire) Limited

Sunshine Care (Yorkshire) Limited

Inspection report

4 Park View
Queensbury
Bradford
West Yorkshire
BD13 1PL

Date of inspection visit:
11 March 2019
02 April 2019

Date of publication:
29 April 2019

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: Sunshine Care (Yorkshire) Limited is a domiciliary care agency situated in the Queensbury area of Bradford. It provides personal care to people living in their own houses and flats. At the time of the inspection it was providing a service to 17 people who lived in the locality.

People's experience of using this service:

People and relatives told us the service was caring and well-led.

They said they received safe and good quality care from a small and consistent team.

People told us the length and times of visits were reliable, effective and flexible.

Care was personalised to meet people's individual needs and preferences.

Medicines were managed safely and people's health care needs supported. We have made a recommendation to the provider that they review the checking of medication competency of staff.

Staff were knowledgeable, experienced and committed to providing high quality, person centred support.

The registered manager provided people with effective leadership and was visible and approachable.

People's views were welcomed on the running of the service.

Systems were in place to assess, monitor and improve the service. We have made a recommendation to the provider that systems to record audits were reviewed to provide more detail.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service supported the practise.

The service met the characteristics for a rating of 'good' in all key questions.

More information is in the full report.

Rating at last inspection:

At the last inspection on 10 and 16 August 2016 the service was rated good.

Why we inspected:

This was a planned inspection to confirm that the service remained Good.

Follow up:

We will continue to monitor the service to ensure that people receive safe, high quality care. Further inspections will be planned for future dates.

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 effective?

Good ●

The service was effective

Details are in our Effective findings below

Is the service caring?

Good ●

The service was caring

Details are in our Caring findings below

Is the service responsive?

Good ●

The service was responsive

Details are in our Responsive findings below

Is the service well-led?

Good ●

The service was well-led

Details are in our Well-Led findings below

Sunshine Care (Yorkshire) 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. 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:

The inspection was carried out by one inspector.

Service and service type:

The service is a domiciliary care agency providing care for people who live in their own homes.

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:

The inspection was announced. We gave the provider a few days' notice about the inspection site visit. This was because we needed to plan with the provider to speak with people who use the service. We visited people in their own homes on 11 March 2019. We visited the office location on 2 April 2019 to see the manager and staff; and to review care records, policies and procedures

What we did:

We reviewed information we had received about the service since the last inspection in August 2016.

We asked the service to complete a Provider Information Return. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We reviewed this prior to our visit.

We asked for feedback from the local authority and commissioning teams.

We spoke with the registered manager and four staff.

We spoke with four service users and five relatives. This included two home visits to people who use the service.

We spoke with one health professional.

We reviewed parts of six people's care records and other records and audits relating to the management of the service.

We asked the registered manager to send us further documents after the inspection. This was provided in a timely manner and this evidence was included as part of our inspection.

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 said they felt safe and trusted the service.
- Staff said they had received safeguarding training. They had a good understanding about how to raise concerns. Staff could give a range of examples when they would raise a concern.
- Safeguarding referrals had been made appropriately.

Assessing risk, safety monitoring and management; learning lessons when things go wrong

- Risk to people's health and safety were assessed and appropriate care plans and risk assessments put in place. These were detailed and provided staff with information to ensure care was carried out safely. We observed staff following plans when they were providing support.
- Risk assessments covered medication, manual handling and the environment.
- We saw there was a low level of reported accidents and incidents. Staff knew how to report any concerns if they occurred.

Staffing and recruitment

- Staff were recruited safely.
- Staffing levels were maintained and people received regular and timely support.
- People confirmed they were happy with call times.
- Support to people was provided by a small and well-established team. This meant people received consistent support which fostered trusting relationships.
- The service operated over a small geographical area. This was valued by staff and people. One staff member said, "We are not too big or impersonal – we provide the personal touch." One relative said, "They are wonderful and they offer a connection and continuity."
- Staffing levels were robustly assessed prior to new packages of support being offered.

Using medicines safely

- Medicines were managed safely.
- Staff received training in medicines management and administration. Medication Administration Records (MAR) were clear and well completed. Spot checks were completed on staff administering medication. We recommend the provider develops more comprehensive medicines competency assessments in line with best practice guidelines

Preventing and controlling infection

- Staff completed training in infection control.
- Staff confirmed they had access to aprons and gloves when supporting people with personal care or preparing food. Information about infection prevention was included in people's care plans.

- We observed staff supporting people wearing the appropriate protective equipment.

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

- People's needs were assessed before offering a service.
- People's care plans described the support required for each call and reflected their personal choices and preferred routines. Care plans and call times gave time for people to chat.
- Staff said care plans were clear and updated if people's needs changed. We saw all staff received a weekly information sheet. This ensured they were updated about any changes.
- Staff said call times were of a sufficient length. One staff member said, "We do not rush."

Staff support: induction, training, skills and experience

- People received effective care and support from competent and skilled staff who had the relevant qualifications and skills to meet their needs.
- Staff spoke highly of the range of training they received.
- Staff had regular supervisions and an annual appraisal with the registered manager in which they could discuss issues and personal development.
- People and relatives were confident in the abilities of staff.

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

- People's eating and drinking needs were recorded in care plans. People's preferences were clearly recorded. We saw one care plan stated, '[The person] likes toast with a very thin layer of jam and coffee not too milky.'
- People who needed help with food said food preparation was good.
- We saw one person was following a diet to increase their weight and staff understood the importance of fortifying food and recording how much the person was eating and drinking.

Staff working with other agencies to provide consistent, effective, timely care; supporting people to live healthier lives, access healthcare services and support

- Care plans contained clear information about people's health needs. Staff had a good understanding about how and when to contact other agencies.
- People confirmed they felt supported with their health needs. One relative said, "They notice things and talk to me and we get the G.P. I can't fault them."
- The service worked closely with health professionals to meet people's needs. We spoke with a health care professional who confirmed staff were proactive about seeking advice and support on a range of issues. They stated, "I have a lot of trust in [the registered manager] and her team. They are amazing."
- People and relatives said communication was good and that messages were passed on. One relative said, "They are brilliant. I can phone the out of hours telephone number and they always get back to me. I am

really impressed"

Ensuring consent to care and treatment in line with law and guidance

The Mental Capacity Act 2005 (MCA) provides a legal framework for making 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 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 with appropriate legal authority. Applications must be made to the Court of Protection when people live in their own homes. None were required for the people supported by the service when we inspected.

- We saw the service was acting within the legal framework of the Mental Capacity Act (MCA) People's capacity to consent to their care and treatment was assessed. People had been involved in decisions relating to their care and we saw evidence they had consented to their care and support.
- Staff gave us examples about how they talked with people to gain their consent. One staff member said, "I treat people as I would like to be treated. I always ask if it's okay before I do anything." We observed staff asking people for consent before providing support.
- The registered manager understood the principles of MCA and how to protect people's rights.

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; respecting equality and diversity

- Staff were kind and caring.
- We observed warm and positive interactions between people and staff.
- People's care plans were clear and detailed about their communication needs.
- We received a range of positive feedback from people and relatives. One person said, "They [the staff] go over and above and the last thing they always say is, "Is there anything else I can help with?"
- We saw the service had received many thank you cards and compliments about the care and support people had received. One letter stated, 'We could not be more impressed by their professionalism and humanity.' They also commented that the life of the person and their relatives had been improved by the care provided.

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

- Staff had formed good relationships with people who used the service and engaged positively with people. We saw staff offered choices and promoted independence.
- Staff valued the importance of having good relationships with relatives
- People said they felt listened to and included in their care.

Respecting and promoting people's privacy, dignity and independence

- People were supported in a respectful and dignified manner. One person said they felt awkward initially when they were being supported with personal care but staff quickly helped them feel comfortable and relaxed.
- Staff were conscious of maintaining people's dignity and gave a range of person-centred examples of how they respected this. One staff member said, "I value everyone as a person – everyone is different."
- People and relatives gave examples about how they had been supported in a respectful and dignified manner. One person said, "We have a laugh, but they are all very respectful. I've got to know them all now. They are smashing."

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

- People's needs were assessed prior to offering a service and the information used to formulate detailed plans of care. Care plans were reviewed regularly and there was evidence of updates made to reflect changes in people's required care and support.
- We saw that people were offered choices. This included clothes they wished to wear and meals and refreshments.
- The service identified people's communication needs by assessing them. Staff understood the Accessible Information Standard. Care documentation explained what communication aids people required as part of their daily lives.
- Visit times and call lengths were specified in people's care plans. We saw people received calls at consistent times of day. We saw the service was responsive and flexible to people's needs. One person said, "They fit in around me brilliantly." Another person told us they had recently changed call times due to an appointment and this was responded to promptly.

Improving care quality in response to complaints or concerns

- A clear complaints procedure was in place. We saw there had been no complaints made.
- We saw there was a copy of the complaints procedures in people's files and this was discussed when people started to use the service.
- People told us they knew how to complain and would feel comfortable talking to the staff or the registered manager if they had any concerns. One relative said, "I have raised a few minor issues and they have all been resolved on the same day."
- We saw changes had been made to people's care plans because of suggestions they had made.

End of life care and support

- At the time of the inspection the service was not supporting anybody who was receiving end of life care.

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 service was well run and organised.
- The registered manager was committed to providing high quality, person-centred care.
- The service had a clear statement of purpose.
- Audits and checks were in place. The manager carried out regular home visits to review care plans and get feedback from people and relatives. Regular spot checks were carried out which included checks on medication, call times and record keeping. We recommend systems for recording the details of the checks are improved in line with best practice guidelines.
- People who used the service said they would recommend the service. Several people described the service as going "over and above" on a day to day basis.
- Staff told us morale was good and they worked well together as a team.

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

- The registered manager was clear about their role and responsibilities and had a very good knowledge of the service.
- Staff praised the registered manager and said they were supportive and approachable. Comments included, "[The manager] is genuinely nice and cares for staff."
- The registered manager regularly went out on visits to support people and staff.
- People and relatives knew the registered manager by name and said they were very helpful and responsive. One relative said, "[The registered manager] makes sure everyone is aware of what is happening – it is the reminders about the smaller things that make a difference."
- People and relatives said they would recommend the service.

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

- The views of people and relatives were sought by regular face to face quality reviews. The registered manager had carried out an annual survey and the feedback was positive. There had been 11 surveys returned which confirmed staff treated them with respect and dignity and offered choices.
- Staff had regular supervisions. One person said, "[The registered manager] is always there if we have any concerns"
- Staff meetings were held periodically. These were used to discuss quality issues and ongoing developments in the service.

Continuous learning and improving care;working in partnership with others

- The registered manager understood their legal responsibilities
- The registered manager was committed to learning and improving care. They worked in partnership with others to promote best practice.