

Wyndsor Home Care Ltd

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Inspection report

21 Otley Close Heron Grange Worcester Worcestershire WR4 0BJ

Tel: 01905613725

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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

Wyndsor Care is a domiciliary care agency registered to provide personal care to people living in their own homes. 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. At the time of the inspection, the service supported 9 people.

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

Risks to people's safety and well-being were assessed, mitigated, and managed. Staff had completed training to enable the safe administration of medicines. The provider's recruitment policy was followed, and recruitment practices were safe. The manager had safeguarding systems in place, and staff were well-informed of what to do if they had any concerns. Care plans and risk assessments provided information for staff to enable them to keep people safe.

Staff were knowledgeable about infection prevention and control (IPC) and the use of personal protective equipment. People using the service told us the team always wore gloves and aprons where needed.

People and their relatives were supported to be involved in assessing their care needs and their preferences for the service provided to them. Staff received induction training, so they had the relevant knowledge and skills. Staff supported people to prepare meals and to eat and drink. People received support in keeping with the principles of the Mental Capacity Act 2005 (MCA).

People told us their privacy and dignity was always respected, and they felt they could express their views. The registered manager had oversight of the service because they worked closely with staff.

For more details, please see the full report, which is on the CQC website at www.cqc.org.uk Rating at last inspection: The last rating for this service was good (published on 13 March 2020).

Why we inspected

This inspection was undertaken due to the length of time since the previous visit'

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 is 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 Detail are in our caring Findings below	
Is the service responsive?	Good •
The service was responsive Details are in responsive findings below	
Is the service well-led?	Good •
The service was well led Details are in our well led section below	



Wyndsor Home Care 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). We checked whether the provider was meeting the legal requirements of the regulations associated with the Act and looked at the quality of the service to provide a rating.

Inspection team

The inspection team consisted of 1 inspector.

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, the quality and safety of the care provided, and compliance with regulations. A registered manager was in post at the time of this inspection.

Notice of inspection

We gave the service 48 hours' notice of the inspection. This was because it was a small service, and we needed to be sure that the provider or registered manager would be available to support the inspection.

Inspection activity started on 1st November 2023 and ended on 10 November 2023

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. information to plan our inspection. We did not ask the provider to send us the provider information return. 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.

During the inspection

We reviewed a range of records. This included 5 people's care records to see how their care and treatment were delivered. Other documents included 5 recruitment files to check that suitable staff members were recruited and received suitable training. We also looked at records relating to the management of the service. We spoke with 4 staff members, the registered manager. We obtained the views of 4 people using the service and their relatives. People and their relatives told us that the service was very good, and the staff were experienced.



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 as Good. At this inspection, the rating remained the same. This meant people were safe.

Assessing risk, safety monitoring and management

- •Risks to people's safety and well-being were assessed, mitigated, and managed well. Information and updates were made regularly, so staff had up-to-date information.
- •Risk assessments detailing how to respond to people's health conditions were in place. One person told us, "The staff know what they are doing."
- External organisations assessed people who required mobility aids to ensure they continued to have safe and appropriate equipment.
- Staff had completed the relevant training to support people safely. People using the service had care plans which staff followed to ensure the person's needs continued to be met.
- Risk assessments were in place, and staff knew how to support people.
- Reviews were regularly held to ensure that when people's needs changed, the care records were updated, and a new care plan was completed.

Using medicines safely

- Staff had access to information to enable safe administration of medicines.
- •All staff had completed the appropriate training on medicines management.

Staffing and recruitment

- Recruitment practices were safe. Disclosure and Barring Service (DBS) checks were obtained before staff started work. These checks provide information, including details about convictions and cautions held on the Police National Computer. This information helps employers make safer recruitment decisions. We saw the relevant information, including references from previous employers, had been completed.
- •There were enough staff to keep people safe. People using the service and their relatives told us, "Staff come on time; there must be a good reason if they don't come on time." another person told us "If the team are running late, the manager contacts us to let us know."

 Systems and processes to safeguard people from the risk of abuse
- Staff had completed training in safeguarding which supported them to recognise signs of abuse and to whom to report.
- Staff told us they would not hesitate to report concerns to the manager no safeguarding had been raised because no concerns had been identified.
- People using the service and their relatives were positive about the service provided. People we spoke with told us they felt safe with the staff and the management team.

Preventing and controlling infection

- The provider had processes in place to prevent and mitigate the risk of cross-contamination. Staff were provided with PPE (personal protection equipment), and people using the service confirmed that staff wore appropriate PPE.
- •Staff completed training in preventing and controlling infection.
- Staff told us they were provided with uniforms, aprons, and gloves.

Learning lessons when things go wrong

- Staff knew how to report any incidents, accidents, or events. The provider ensured that incidents and accidents were recorded, investigated, and reviewed.
- •The information was then used to monitor the service to prevent recurrence.
- Details of action taken were available that showed appropriate action had been taken and measures put in place to mitigate future occurrences.



Is the service effective?

Our findings

Effective – At the last inspection, we rated this question as good. At this inspection, the rating has remained the same. This meant the service was effective.

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

- People told us they were fully involved in conversations regarding care and their needs; a full assessment took place to ensure the provider could meet them. We found that the protected characteristics under the Equality Act had been considered when planning people's care, including who was influential in their lives and how they wished to be supported.
- The assessment process in place meant staff were provided with the information they required to meet people's individual needs effectively. A staff member told us, "We have the information we need to meet the person's care needs as they wish."
- •We saw detailed care records where the person's voice was included." Staff told us the manager would support them and ensure they had support when needed.
- The manager completed observed practice regularly to ensure the staff were supported and any changes needed; for example, further training was completed.

Staff support: induction, training, skills, and experience

- People were supported by staff who received a full induction that prepared them for their role.
- •Staff told us they would work with the manager until they felt comfortable working alone.
- Staff told us, and records confirmed, that they had training opportunities to provide adequate care for people.

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

- Staff supported people, where required, to make their meals and were aware of their dietary preferences.
- Records demonstrated that staff encouraged people to eat and drink to maintain a healthy diet.

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

- •People were supported by staff who knew their healthcare needs and knew when to request support from other healthcare providers. For example, one person told us that the staff contacted the GP when they were not feeling too well. Relatives were also contacted to support the person.
- Three people we spoke with told us that the staff were excellent and would contact their relatives/ doctors if needed.

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 the mental capacity to make 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.

- •We checked whether the service was working within the principles of the MCA and found that they were.
- •Staff asked for consent before doing any care activities with people using the service. A staff member told us, "We encourage people to make decisions about their care; for example, we ask, do you want help, or can you do it by yourself? It is their choice. You always ask first and obtain people's consent." People speaking using the service with confirmed staff asked for consent.



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.

At our last inspection, we rated this key question as Good. At this inspection, the rating has remained the same. This meant people were supported, treated with dignity and respect, and involved as partners in their care.

Ensuring people are well treated and supported, respecting equality and diversity

- Staff told us that they respected people's wishes, which promoted respect. This meant people were supported, treated with dignity, and involved in their care. Daily records showed people's diversity. All the people we spoke with gave a positive view of their care.
- •All the people we spoke with told us the staff were excellent and very caring. One person told us, "The staff are marvellous.

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

- •Staff supported people to be involved with their care.
- •A staff member told us, "During personal care, I constantly ask if my actions are okay and always allow the person to direct me where possible. I talk to people in a good way and chat with them appropriately, which means they then have a better day."
- People told us they were happy with the staff team and the management; they felt they had good communication with the management and staff.
- •People and relatives told us they can express their views. A family member told us, "When expressing a view about the service to a member of staff, they listened and worked with us, so my relative is happy." Another relative told us, "I am very grateful for the help; the staff are all so nice, and they make [name of person] feel comfortable."

Respecting and promoting people's privacy, dignity, and independence

- •People's privacy and dignity were respected. The staff gave people a choice and respected their wishes.
- Staff told us that the person using the service is always consulted about any care they have.
- People were complimentary about the staff and management.



Is the service responsive?

Our findings

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

At our last inspection, we rated this key question as Good. At this inspection, the rating has remained the same. 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

- Care planning included information provided by the person using the service to ensure the care provided was personal to the individual and based on their preferences. Rotas showed people were given an allocated time staff to attend the person's home.
- •One person told us," I am thrilled with the care I received. The staff go beyond what they are expected to do. It is the best agency I have ever had. I am thrilled.''
- •People told us that the staff would arrive on time and the time scheduled. The manager told us that the staff would contact her if they were going to be late, and people who spoke with us told us lateness was rare. One person told us, "If I have an appointment, the agency will accommodate my visit later".
- People's personal history and interests were recorded.
- •The manager supported person-centred care and was responsive to people's views and care needs.
- The manager ensured all people had regular reviews of their care needs, to ensure all information was up to date
- Relatives told us that their relatives and people using the service were involved in any decisions about their care.

Meeting people's communication needs

Since 2016, all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard.

The Accessible Information Standard tells organisations how to help ensure people with a disability or sensory loss can communicate in the best way for them. In some circumstances, their carers get information in a way they can understand.

- People's communication needs had been assessed and this was documented in their plan of care.
- •The management told us, "Communication passports are completed for all service users to enable staff to identify any areas of difficulty. The company can provide all information in a relevant and suitable format to meet the individual's needs.
- Care plans can be recorded on audio, and copies given to the individual; easy-to-read documents are also available for policies and procedures if required.
- People said they understood the staff and that communication was good. The manager confirmed that arrangements would be made, for example, if a person requires information in a different language.



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 as Good. At this inspection, the rating remained the same:

Managers and staff were clear about their roles, understood quality performance, risk and regulatory requirements, and continuously learned and improved all care.

- The management was worked alongside care staff. This allowed them to observe the quality of their care and give feedback to staff.
- •There was a system in place to ensure safe care and treatment. Quality assurance work had taken place. We found that care plans contained enough information to ensure people's needs were met and risks had been identified.

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

- The registered manager demonstrated a passion for good care. And had a clear vision of the service the manager wanted to provide
- •There was evidence of an established system, promoting a positive culture within the staff team. All staff members said they enjoyed their work and felt the manager supported them. One person using the service told us, "The staff team are brilliant."

How the registered manager understands and acts on their duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong the registered manager was clear about their responsibility.

•The manager understood and Acted on the duty of candour. There were systems in place to ensure any concerns were recorded and lessons learnt. They worked in collaboration with other healthcare professionals in supporting people.

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

• People and relatives spoke positively about management's engagement with them. They explained that the registered managers periodically contacted them by phone or visited them depending on what was best for people and their relatives. One person told us, "The manager always contacts us to see how the staff are doing. I like our chats.'' "[Names of Manager's] is brilliant and listen to me.

Continuous learning and improving care

• The provider had a clear vision for the direction of the organisation in terms of growth and felt that, at present, they are happy with the organisation to remain a small agency.

Working in partnership with others

Records showed collaboration between the registered managers and health and social care professionals.
Registered managers told us they worked with other providers, professionals, and healthcare professionals.