

# Just Homes (Care) Limited Just Homes Care

#### **Inspection report**

Westfield Centre, Westfield Lane, South Elmsall Pontefract West Yorkshire WF9 2PQ Date of publication: 26 May 2022

Tel: 01977640333 Website: www.justhomescare.co.uk

Ratings

## Overall rating for this service

Is the service well-led?

Good

Good

# Summary of findings

#### Overall summary

#### About the service

Just Homes Care is a domiciliary care agency providing personal care to older people and people with a learning disability living in their own homes. Just Homes Care also provides care to people with a learning disability in six supported living houses. Not everyone who used the service received personal care. CQC only inspects or reviews 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 last inspection 25 people were receiving care from the service. During this review, 65 people were supported by the service.

#### Background to this report

At our previous comprehensive inspection at Just Homes Care on 24 and 27 February 2020 we identified concerns relating to well-led. We found that the registered manager had failed to submit statutory notifications in line with their regulatory requirement. This was a breach of Regulation 18: Notification of other incidents, Care Quality Commission (Registration) Regulations 2009) for which we issued a requirement notice. The key question well-led was rated requires improvement and the overall location rating was required improvement.

The full report of that inspection can be found by selecting the 'all reports' link for Just Homes Care on our website at www.cqc.org.uk.

Why we carried out this review

We carried out this review on 28 April 2022 to follow-up on the requirement notice and assess whether the provider has addressed the improvements required at our previous inspection. We did this using a 'desk-based' review process because evidence to demonstrate that the requirement notice had been met could be obtained and assessed remotely without needing an inspection visit to the location. This was not an inspection: the scope of this review did not include a visit to the service or an assessment of the outcomes for people using the service.

#### What we found

This report covers our findings in relation to the action taken by the provider to address the requirement notice issued at our last inspection. Details of the findings from this remote assessment can be found under the well-led section of this report.

Through this review we assessed that Just Homes Care has taken action to meet the requirement notice

issued after the last inspection. They are therefore no longer in breach of Regulation 18: Notification of other incidents, Care Quality Commission (Registration) Regulations 2009.

Rating at last inspection and update

Following the last inspection, this location was rated requires improvement. Although only the well led key question was rated requires improvement, if there is a breach of a regulation a location cannot be rated higher than requires improvement overall.

Through this review, we have assessed that Just Homes care provided assurance that improvements had been made to address all issues that resulted in the well-led key question being rated requires improvement. This includes an assessment that the service is no longer in breach of Regulation 18 which previously acted as a ratings limiter. The overall rating has therefore improved to Good.

### The five questions we ask about services and what we found

We always ask the following five questions of services.

#### Is the service well-led?

The service was well-led.





# Just Homes Care

# Background to this inspection

#### The review

We carried out this review under section 46 of the Health and Social Care Act 2008, which permits us to conduct a review of how a provider carries on a regulated activity. We can carry out a review under s46 without needing to do an inspection (site visit) but we must assess the performance of the provider and publish a report of our assessment. Any rating adjustment made following the review must reflect the outcome of our assessment.

How we carried out this desk-based review

The review was carried out by one inspector. No notice of the review was given to the provider, but the review included a discussion with the registered manager.

The well-led key question was reviewed to ensure that appropriate action had been taken by the provider to meet the fundamental standards of health and social care. For this desk-based assessment of evidence we:

- $\bullet \Box$  Reviewed the action plan completed by the provider after the last
  - inspection to show what they would do to improve and by when
- Spoke with the registered manager
- Reviewed relevant records relating to accident and incidents within the service

#### Service and service type

This service is a domiciliary care agency. It provides personal care to people living in their own homes. This service also provides care and support to people living in six 'supported living' settings, so that they can live as independently as possible. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for supported living; this inspection looked at people's personal care and support.

The provider's conditions of registration require this service to have a manager who is registered with the

Care Quality Commission. Both the registered provider and the registered manager are legally responsible for how the service is run and for the quality and safety of the care provided. At the time of this review the service had a registered manager.

# 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 requires improvement. At this review the rating has changed to good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

At our last inspection the registered manager had failed to submit statutory notifications in line with their regulatory requirement. This was a breach of Regulation 18: Notification of other incidents, Care Quality Commission (Registration) Regulations 2009.

Enough improvement had been made at this review and the provider was no longer in breach of Regulation 18.

• Following our previous inspection, the registered manager had submitted an action plan to the Care Quality Commission (CQC) which documented how they planned to ensure all notifiable incidents were reported to CQC.

• Under the Care Quality Commission (Registration) Regulations 2009 registered providers have a duty to submit a statutory notification to CQC regarding a range of incidents. We reviewed accident and incident logs for events that had happened at the service. We found that CQC had been informed of all notifiable events.