

Willow Tree Homecare Ltd

Willow Tree (Bournemouth)

Inspection report

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16 May 2019
23 May 2019

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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

Willow Tree Homecare Ltd is a domiciliary care agency and provides personal care and support to people in their own homes in Bournemouth and Poole.

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

People were protected from abuse and avoidable harm. People said they felt safe with staff, who had the training and skills they needed to provide care safely and effectively. People's opinion varied regarding whether they had regular staff who arrived when expected.

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.

People's physical, mental health and social needs were assessed. There were regular reviews to ensure care was meeting their needs. Staff were well supported through training and supervision. They were proactive in supporting people to manage their health.

People and relatives said they were involved in decisions about their or their loved one's care. Where people had preferences regarding the gender of staff who provided their care, this was not always respected. However when we raised an issue with the registered manager, this was rectified.

People, relatives and staff expressed confidence in the way the service was run. They described it as "well run". The registered manager was readily available to people, relatives and staff. They had an open and honest approach to complaints. Quality monitoring had improved.

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 requires improvement (published 11 July 2018).

In October 2018 we carried out a focused inspection to answer the question "Is the service safe?" and "Is the service well led?." This was in response to information of concern we received regarding several people in the Poole area who were not receiving their package of care during the period of 31 August 2018 to 15 September 2018. We found the service was not always safe and the service was not always well led.

The provider completed an action plan after the last inspection to show what they would do and by when to improve.

During this inspection the provider demonstrated that improvements have been made. The service is no longer rated as requires improvement overall or in any of the key questions.

The overall rating for the service has changed from requires improvement to good. This is based on the findings at this inspection.

Why we inspected

This was a planned inspection based on the previous rating.

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?

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.

Willow Tree (Bournemouth)

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

The inspection team consisted of two ASC inspectors and an Expert by Experience who made telephone calls to people, their relatives and staff. 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 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

We gave the service 48 hours' notice of the inspection. This was because we needed to be sure that the provider or registered manager would be in the office to support the inspection.

Inspection activity started on 15 May 2019 and ended on 23 May 2019. We visited the office location on 15 May 2019.

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. We used all of this information to plan our inspection.

The provider was not asked to complete a provider information return prior to this inspection. 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 took this into account when we inspected the service and made the judgements in this report.

During the inspection

We spoke with five people who used the service and three relatives about their experience of the care provided. We spoke with four members of staff including the registered manager and area manager.

We reviewed a range of records. This included ten people's care records and multiple medication records. We looked at five staff files in relation to recruitment and staff supervision. We also viewed a variety of records relating to the management of the service, including quality monitoring and complaints and compliments.

After the inspection

We requested further information from the registered manager related to the service. This was provided promptly.

Is the service safe?

Our findings

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

At the last inspection this key question was rated as requires improvement. At this inspection this key question has now improved to 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 said they felt safe with staff. A relative said "[persons name] seems comfortable and happy after they (staff) have been."
- Staff had a good understanding of safeguarding and whistleblowing procedures and knew how to identify and act on any concerns.
- Staff told us they had received safeguarding training and records confirmed this.

Assessing risk, safety monitoring and management

- Assessments were carried out to identify any risks to people and to the staff providing their care. This included any environmental risks in people's homes and risks associated with people's care needs. Risks were managed in consultation with people and their relatives.
- There was a contingency plan for dealing with unexpected or adverse situations, such as shortage of staff due to illness.

Staffing and recruitment

- There were recruitment checks before new staff started work, to help ensure people would be safe with them. These included criminal records checks and taking up references.
- The service had successfully recruited an additional 50 % of staff recently. This resulted in taking on new packages of care to enable work for staff. There were some concerns raised at the time about continuity and times for calls during this 'settling in period'. However, people described there being an improvement in receiving care as they expected.

Using medicines safely

- People spoke positively about the support they received with their medicines. One person described how "They [staff] give me my medication, cream my legs."
- The registered manager explained the medicines administration records (MAR) charts were audited when they were returned to the office. However, we saw some gaps on the MAR that had been checked and filed as being accurate. The registered manager said they would investigate with the member of staff concerned.

Preventing and controlling infection

- Staff had access to personal protective equipment such as disposable gloves and aprons and knew how to use this. Records showed staff had received training in this area.
- People told us staff wore protective items and disposed of them appropriately.

Learning lessons when things go wrong

- Accidents, incidents and complaints were recorded. The registered manager checked each individually to ensure necessary action had been taken for people's safety and welfare. They also reviewed them for themes that might suggest further action was required.
- Lessons learned were shared with staff through supervision or team meetings as appropriate.

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.

At the last inspection this key question was rated as requires improvement. At this inspection this key question has now improved to 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 physical, mental health and social needs were assessed, and were the basis for planning and delivery of their care.
- There were regular reviews of people's care to ensure it was meeting their needs. Assessments and care plans were updated as necessary.

Staff support: induction, training, skills and experience

- Staff said they were well supported through training, supervision and conversations with the registered manager. Comments made included, "We had workshops on different diseases with a test at the end. We covered diabetes and Parkinson's." Another member of staff said, "I've had two lots of supervision so far. They are constantly asking if I need help and I can always go directly to management."
- New staff had an induction and were expected to attain the Care Certificate if they did not have qualifications and experience in care work. The Care Certificate represents a nationally accepted set of standards for workers in health and social care. A recently recruited member of staff said, "I had five days in the office covering things like health and safety and then two shifts shadowing with a senior."

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

- Staff assisted some people to eat and drink. Care plans made it clear whether people needed support from staff, and if so what assistance was required.

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

- Care plans addressed any support people needed to manage their health.
- The service was proactive about referring to health professionals if there were any concerns about people's health. Care records contained details of contact with occupational therapists and community nurses.

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. Where people may need to be deprived of their liberty in order to receive care and treatment in their own homes, the deprivation of liberty safeguards cannot be used. Instead, an application can be made to the Court of Protection who can authorise deprivations of liberty. We checked whether the service was working within the principles of the MCA.

- The registered manager and staff had training about the MCA. They understood people had the right to make their own decisions about their care unless they lacked the mental capacity to do so.
- People's consent to their care as set out in their care plan was recorded in their care records.
- Staff told us how they supported people to make decisions about their care and support. People confirmed that staff asked them before supporting them in tasks or with personal care.

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 the last inspection this key question was rated as requires improvement. At this inspection this key question has now improved to 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

- People's assessments and care plans set out clearly what was important to them, including protected characteristics such as religion where these were relevant.
- Training records showed that all staff had received training in equality and diversity.
- People said when asked if staff arrive when expected; "Sometimes they are a bit late," and "More or less." Another said continuity of staff and times had improved.
- People and relatives described the staff as being "Most of the staff are great." "Very polite and helpful. They do what they can." And; "There are two really good carers, I can't fault them. They fit in where they can."

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

- People were able to express their needs and choices and staff understood their way of communicating.
- People were encouraged and supported to maintain contact with those important to them including family and friends.

Respecting and promoting people's privacy, dignity and independence

- Regular spot checks on staff considered how they respected and promoted dignity, such as closing curtains when providing personal care.

Is the service responsive?

Our findings

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

At the last inspection this key question was rated as requires improvement. At this inspection this key question has now improved to 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

- The service had a system of reviewing support plans regularly with the person it related too, this ensured the person was involved so that it was relevant, up to date and reflected the person's needs.
- Staff opinions varied as to whether they had enough time in between visits. Comments made included; "I do a walking round and we are given times in between clients but it is not always enough." And "Yes. I have enough time because all my visits are really close." One person said staff were "Very much in a rush and then leave." Another said; "When I started with the agency it wasn't regular times but it's got a lot better now."
- One person said; "A couple of times I had to cancel a visit but they are accommodating and moved the time."

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.

- Assessments and care plans detailed people's communication needs and how staff were to support them with these.

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

- People were encouraged to pursue interests and participate in the local community, where this formed part of their contract with the service."

Improving care quality in response to complaints or concerns

- Complaints had been responded to. People and relatives were confident that when they had raised any issue they were listened to and action taken to resolve the problem.
- We raised the concerns raised by one person regarding call times and preference of same gender carer. The registered manager arranged to meet with the person to discuss and the situation was rectified.

End of life care and support

- During the inspection the service was not supporting anyone who was anticipated to be close to the end of their life.
- People's assessments and care plans reflected their preferences for 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.

At the last inspection this key question was rated as requires improvement. At this inspection this key question has now improved to 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

- Staff meetings incorporate the corporate values of the service and the service has incentive schemes such as 'refer a friend' regarding recruitment. As a result of feedback from people, staff had been nominated as 'carer of the month'.
- People said; "I've had no problem with this agency. They have been brilliant."
- People described the registered manager as being "Very good."

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 registered manager was aware of their responsibilities under the duty of candour and this was promoted to staff via staff meetings and supervisions. One member of staff said if they are unable to attend a staff meeting; "We all get the minutes by e-mail."
- The registered manager had an open and honest approach to complaints and to people's care generally.

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

- People, relatives and staff expressed confidence that the service was well run. Comments made included; "If I had any issues they are very on the ball. I get support from the management usually by phone. They always make sure you are ok. They ask if I need any extra training. I feel I can phone them any time." And; "The manager [name] is great and approachable."
- The registered manager monitored the quality of the service provided through a range of audits. They acted on any areas identified as needing improvement.
- Legal requirements, such as displaying the rating from the last inspection and notifying CQC of significant incidents, were met.

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

- People and their relatives made the following comments when asked for their feedback about Willow Tree; "Excellent carers," and "Absolutely fantastic." Where comments had been made about a specific member of staff, they received an employee commendation report for positive feedback. Staff told us this made them feel valued and appreciated.
- The registered manager participated in local networks for providers and registered managers.

