

Choices Home Care Limited

Choices Homecare Wakefield and North Kirklees

Inspection report

Unit 4, Suite 2, Benton Office Park
Bennett Avenue, Horbury
Wakefield
WF4 5RA

Tel: 01924260260

Date of inspection visit:
06 September 2022
09 September 2022

Date of publication:
27 September 2022

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

Choices Homecare Wakefield and North Kirklees is a service providing support for people in their own homes. The service was supporting around 100 people at the time of the inspection.

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.

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

People spoke positively about their experience of receiving care from this provider. One person's relative said: "They are brilliant. We have no complaints at all. The manager is also just brilliant. They are all just great." Another person said: "They all treat me with respect when they are here. I would say they are all well trained although they don't need to use any special equipment for me. When I call the office they always answer quickly and they are polite to me on the phone. I have a number to call if I need to query anything but so far I am ok." A third person told us: "The carers all show me compassion and are kind to me. I am happy with them. They are all polite."

The registered manager carried out regular audits of the service, and these identified where there were any shortfalls in order to ensure there was continuous improvement. Where incidents had occurred, the provider had made the legally required notifications to CQC, and where appropriate made changes to how care services were delivered.

Staff were positive about the support they received from managers. They described the registered manager as good, and gave examples of times when they had received a good level of support. They said they were confident to raise any concerns and felt issues were always addressed when they were raised.

Medicines were managed safely, with regular audits of people's medication taking place.

The provider took steps to involve people in their care. Some people could not remember being involved in putting their care plans together or in reviews of their care, but others told these took place regularly, and records confirmed this.

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. Care took place in accordance with people's consent, people confirmed staff always asked for their consent before undertaking care tasks. One person said: "They all treat me in a nice way and always ask my consent before they do things for me."

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection

This service was registered with us in August 2020 and this is the first inspection.

Why we inspected

This inspection was prompted by a review of the information we held about this service.

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.

Choices Homecare Wakefield and North Kirklees

Detailed findings

Background to this inspection

The inspection

We carried out this performance review and assessment under Section 46 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.

Unlike our standard approach to assessing performance, we did not physically visit the office of the location. This is a new approach we have introduced to reviewing and assessing performance of some care at home providers. Instead of visiting the office location we use technology such as electronic file sharing and video or phone calls to engage with people and staff.

Inspection team

This inspection was carried out by two inspectors and an Expert by Experience. 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 houses and flats.

Registered manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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. At the time of our inspection there was a registered manager in post.

Notice of inspection

We gave short notice of the inspection in order for the registered manager to provide us with the documentation we needed to look at.

Inspection activity started on 6 September 2022 and ended on 9 September 2022.

What we did before the inspection

We reviewed information we had received about the service since it was registered. We used the information the provider sent us in the provider information return (PIR). 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. We used all this information to plan our inspection.

During the inspection

We spoke with six members of staff, eight people using the service and three people's family members.

This performance review and assessment was carried out without a visit to the location's office. We used technology such as phone and video calls to enable us to engage with people and staff, and electronic file sharing to enable us to review documentation.

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.

Preventing and controlling infection

- The provider's records showed staff had received training regarding infection control, and staff confirmed they had received appropriate training and support around managing the risks of infection.
- Personal protective equipment (PPE) was available for staff to use. People using the service confirmed staff always wore PPE as well as practising good hand hygiene.
- Staff told us PPE was in plentiful supply and reported it was easy to collect additional stocks from the provider's office.

Using medicines safely

- People's medicines were managed safely.
- Records of medication administered were accurately maintained and audited.
- Training records showed staff had received training in medicines management, and competency checks were carried out by senior staff to monitor staff's practice.
- Staff told us they were regularly observed when administering medication to ensure they were doing so safely and in accordance with regulations. A staff member said: "I have been observed in practice for meds...the observation is to make sure that I am doing it correctly."
- People using the service described staff supported them with their medicines as required. One person's relative said: "They do give [my relative] meds and it's all recorded on their mobile phones."

Systems and processes to safeguard people from the risk of abuse

- People and their relatives said they thought the service was safe, and told us they had no concerns in this regard. One person said: "Of course I feel that I am safe with them all. They come on time and stay the time they should."
- Staff told us they were confident to raise safeguarding concerns and understood the process for doing so. One said: "I have had to raised safeguarding concerns about a service user. I got lots of support from manager."
- Where suspected safeguarding incidents had occurred, the provider had made the appropriate referrals and notifications, including to CQC. There was a central register of these incidents to allow the registered manager to monitor them and make changes where necessary.

Assessing risk, safety monitoring and management

- Risks, such as falls, malnutrition and personal safety were identified when people began to use the service, and appropriate risk assessments were put in place. These were tailored to people's individual needs and regularly reviewed.

- The registered manager kept records of safety incidents so they could maintain an oversight of where people were vulnerable to risk.
- Staff told us they always had time to read people's care records, including risk assessments, before they provided care to people. This ensured people received care in a safe way.

Staffing and recruitment

- Staff were safely recruited.
- Appropriate background checks had been carried out before staff started work. This included Disclosure and Barring Service (DBS) checks. DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions. Staff told us they underwent appropriate checks before they began their roles. One said: "You can't start in your role until DBS check has come back."
- People told us there were usually enough staff available and rarely experienced a late or missed call. They told us any staffing shortages were communicated to them by the office

Learning lessons when things go wrong

- Staff reported the provider was responsive when untoward incidents or concerns arose. One said: "I have raised concerns about a service user. The process went ok and I felt supported." Another told us: "I have not had to raise any concerns but I feel that the organisation is approachable."
- People told us that whenever they had raised concerns, the provider made appropriate changes to their care.
- Records showed changes were implemented following incidents or accidents.

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.

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, whether any restrictions on people's liberty had been authorised and whether any conditions on such authorisations were being met.

- People told us staff obtained consent before carrying out any care tasks, and care records showed people's consent was formally obtained when the care package was being designed.
- People's care plans showed assessments of their mental capacity were carried out and appropriate action taken where needed.
- Staff demonstrated good awareness of consent and mental capacity in relation to people that they support. Staff had conversations with people about their personal care and how they prefer to receive it.

Staff support: induction, training, skills and experience

- Staff told us they received a good level of induction and training before they began their roles. They described shadowing experienced staff before carrying out care alone, and had copies of their training manuals which they could refer back to when required.
- People told us they thought staff were well trained. They confirmed staff knew how to use any equipment they needed. One person said: "They all appear to be well trained and know what to do for me"
- The provider's training records showed a wide range of training was offered across relevant areas.
- The provider's staff surveys showed that the vast majority of staff reported themselves as "satisfied" or "very satisfied" with the quality of management support and training they received.

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

- People told us the care they received was in accordance with their needs and choices. One person said: "I

was involved with the care plan when I started with them in March. I think there is a copy here and they write everything up on their phones. If I wanted to download the app I could read it all but I don't bother to. My care has been reviewed twice since March."

- Records showed the management team monitored care to ensure it was in line with current guidance. This included spot checks of care visits, where senior staff assessed how care was being delivered, to ensure it met expected standards.

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

- There were details in each person's care file showing that their needs in relation to nutrition and hydration had been assessed.
- People's care records showed where staff were required to provide them with food and drink, it reflected their expressed personal preferences.
- People told us staff prepared food that they liked. One said: "They do a sandwich for me as they only have a 20 minute call and that's not long enough to cook a meal but a sandwich is fine with me."

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

- Records showed staff worked with external professionals to ensure people's needs were met.
- People told us the provider worked alongside their social workers and other professionals.
- Many people used the local authority's emergency care call system, and records showed staff always checked this was in use and people could use it.

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.

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

- People had been involved in their care, and praised the staff. One person said: "I was involved with my care plan and it is here in the file if I ever need to read it." Another person told us how they weren't keen on one staff member, but they told the office about this and the staff member no longer provided care to them.
- Records showed people's views and decisions about care were incorporated in the way they were cared for. Relatives were also involved in this where appropriate.
- Staff told us they checked people's preferences before providing care. One staff member said: "If I was given a new service user then I would look in care plan and notes. I would use the app and read everything in advance of going and then introduce myself and find out how they like their care delivered."

Ensuring people are well treated and supported; equality and diversity

- People and their relatives told us staff treated them well. One person said: "I have regular staff most of the time and they all know me and what sort of things I like to talk about. They are all very caring, nice people." Another said: "The carers all show me compassion and are kind to me. I am happy with them. They are all polite."
- Care plans we checked showed information about people's cultural needs.
- Staff told us the care they provided was personal to each individual, with one telling us: "I ask them and have a conversation with them about their care."

Respecting and promoting people's privacy, dignity and independence

- People told us staff treated them with respect. One person said: "They are kind towards me." Another said: "I have regular staff most of the time and they all know me and what sort of things I like to talk about. They are all very caring, nice people."
- Staff gave examples of how they protected people's dignity and privacy, such as ensuring people were dressed well, and covering them with towels when providing intimate care.
- Relatives told us staff supported people to be independent, with one contacting the provider to thank them for enabling their relative to maintain independence in their own home.

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.

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.

- The provider had appropriate arrangements in place to provide information in accessible formats, not only for people using the service but also for staff.
- People told us staff communicated in a way appropriate to them. One person described how they did not like the way a care worker communicated with them so they raised this with the office and no longer received care from that person.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control

- Each care record we looked at held information about people's preferences, and was highly detailed.
- Staff knew the people they provided care to, and the provider strived to maintain continuity of care, so that people's preferences and interests were understood.
- People told us staff promoted choice, and records of care visits showed staff ensured people's choices were upheld.

Improving care quality in response to complaints or concerns

- The provider's policies and procedures relating to the receiving and management of complaints were clear and set out steps people should take if they wished to make a complaint.
- People's relatives told us they would feel confident to complain if they needed to, and described the office staff as responsive, though they stressed they had felt no need to raise any complaints.
- Records of complaints received showed the provider had taken appropriate action where required, including disciplinary action, or changing the way care is provided.

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 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; Continuous learning and improving care

- Staff had a good understanding of their roles and responsibilities, and were motivated to provide good quality care.
- The provider's systems enabled the registered manager to monitor and improve the quality of the service.
- We checked care notes, and found they were clear and evidenced the care provided to people. These were regularly audited to ensure care was of high quality.
- We checked records of incidents, and found CQC had been notified, as required by law, of any notifiable incidents.

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

- People and their relatives told us care met their needs so that good outcomes were achieved. One relative said: "The manager is very helpful and approachable. She has been particularly helpful about [arranging additional care to meet my relative's needs.]"
- The provider's records showed that if things went wrong, they were open and honest with people.

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

- Surveys completed by staff showed they reported high levels of satisfaction with management support.
- Records showed people were regularly contacted for their feedback. People confirmed this, with one saying: "The manager is lovely and very approachable. She does a review every year and I think I do a feedback form yearly too."