

With Healthcare Limited

With Healthcare

Inspection report

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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

With Healthcare is a domiciliary care service, providing personal care and support to people 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 our inspection one person was receiving a regulated activity.

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

People were safe and protected from abuse. People were supported by a small team of staff who they knew. The provider checked new staff to ensure they were suitable to work in people's homes. People received the support they needed to take their medicines. The staff were trained in how to provide people's care in a safe way.

The staff were skilled and competent to provide people's support. People received the help they needed to enjoy their meals and drinks. The registered manager assessed the support people required to ensure the service was suitable to meet their needs. The staff included people in decisions about their care and respected people's rights. 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.

The staff treated people in a kind and caring way. People valued the service and the support the staff provided. The staff treated people with respect and helped them to maintain their independence and dignity.

The service was responsive to people's needs. The registered manager was committed to providing the support people needed. Where people requested changes to their support the registered manager agreed to the changes where possible. The registered manager planned people's care to ensure it met their needs. The staff knew people well and provided support to meet people's needs and to respect their wishes. People knew how they could raise any concerns and were confident the registered manager would resolve any issues they raised. The service provided the support people and their families needed as individuals reached the end of their lives.

This was a small service and the registered manager worked with the staff team to provide people's care. This gave the registered manager good oversight of the service. People knew the registered manager and were comfortable speaking to her. The registered manager was committed to providing person-centred care that focused on each individual and enhanced their life. The registered manager used formal and informal ways to gather people's feedback and used this to improve the service they received.

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 on 10/08/2018 and this is the first inspection.

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.

With Healthcare

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 was carried out by one inspector.

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 it is a small service and we needed to be sure that the provider or registered manager would be in the office to support the inspection.

Inspection activity started on 9 August 2019 and ended on 15 August 2019. We visited the office location on 9 August 2019 and contacted people by telephone to gather their views between 12 and 15 August 2019.

What we did before the inspection

We reviewed the information we held about the service. We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all of this information to plan our inspection.

During the inspection

We spoke with the registered manager and two care staff. We also spoke with the provider's nominated

individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

We reviewed a range of records. This included three people's care records and three staff files in relation to recruitment and staff training. We also looked at a range of records relating to the management of the service.

After the inspection

We spoke with one person who used the service, the relatives of two people who had used the service and one staff member by telephone to gather their views of the service.

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.

Systems and processes to safeguard people from the risk of abuse; Assessing risk, safety monitoring and management

- People were protected from abuse and avoidable harm. People and their relatives trusted and felt safe with the staff who provided their care. The staff were trained in how to identify and report abuse. The staff had completed training in how to provide people's care safely.
- The registered manager had identified and managed risks to people's safety. People's care records had guidance for staff about how to provide people's care in a safe way.

Staffing and recruitment

- There were enough staff to support people. People were supported by a small team of staff who they knew. The registered manager planned people's support to ensure they had time to get to know the staff who were caring for them. This helped people to feel comfortable and safe with the staff.
- The registered manager carried out thorough checks on new staff to ensure they were suitable to work in people's homes.

Using medicines safely

- People received the support they needed to take their medicines safely. The staff were trained in how to handle medicines safely. People told us they received the support they needed to take their medicines.

Preventing and controlling infection

- The registered manager protected people from the risk of infection. The staff were trained in preventing infection and food hygiene. The staff used personal protective equipment, such as disposable gloves and aprons, to reduce the risk of infection.

Learning lessons when things go wrong

- The registered manager was committed to the continuous improvement of the service. She had systems in place to ensure lessons were learnt to improve the service. The registered manager had good systems to share the outcome of incidents with the staff team.

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.

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

- People received the support they needed because the registered manager carried out thorough assessments of their needs before agreeing to provide their care. This helped to ensure the service would be able to meet individual's needs. The needs assessments had been used to develop individual care plans which guided staff on how to support people.

Staff support: induction, training, skills and experience

- The staff were skilled and competent to provide people's care. The staff completed a range of training to ensure they had the knowledge and skills to support people. People told us the staff were well trained. One relative said the staff were, "really good and skilled".
- The staff felt well supported. They were confident they had the skills and knowledge to care for people.

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

- The staff provided the support people needed to enjoy their meals and drinks and to eat and drink enough to maintain good health. Relatives we spoke with told us the staff "always" asked their family members what meal they wanted them to make and respected the choices they made.

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

- The registered manager worked with other services which supported people to ensure they received good care that met their needs. Some people were supported by community healthcare teams. The registered manager had established good relationships with the healthcare teams and followed any guidance they gave.

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.

- The focus of the service was to provide high quality care that met people's needs and respected their rights. The registered manager and staff understood their responsibilities under the MCA. They gave people choices about their care and respected the decisions people made.
- There was no one being supported by the service who required restrictions on their liberty to receive 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.

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.

Ensuring people are well treated and supported; respecting equality and diversity; Respecting and promoting people's privacy, dignity and independence

- The staff treated people who used the service and their families with kindness, consideration and respect. People and their families valued the support provided by the service. One relative said, "[Relative] looked forward to them coming. [Relative] wouldn't speak to me but they got a smile from [Relative]."
- The staff spoke about people in a respectful way. They showed they knew people well and treated people as individuals and respected their diversity.
- The staff supported people to maintain their independence. They knew how to promote people's privacy and dignity while providing their care.

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

- People were placed at the centre of all decisions about the care they received. The staff and registered manager asked people and their families for their views about the care provided and respected the decisions people made. One relative told us, "They [staff] always asked and involved [Relative] in decisions."

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.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- People and those who knew them well were placed at the centre of planning their care. People had been asked what support they wanted and the registered manager planned their care to take account of their wishes. The staff provided care to meet people's needs and to respect their choices. People told us, if they asked for any changes to their planned care, the registered manager agreed to the change if possible.
- The registered manager reviewed people's care plans as their needs changed. This ensured they provided accurate and up-to-date information to guide the staff on how to provide people's support. The care staff told us they received information promptly if the support people needed changed.

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 registered manager ensured people received information in appropriate formats to meet their needs. She assessed people's communication needs to identify how they needed information to be provided. This was recorded in people's care records to guide staff on how to share information with people.

Improving care quality in response to complaints or concerns

- People knew how they could raise concerns about the service and were confident the registered manager would take action in response to any issues they raised. No one we spoke with had made a formal complaint about the service provided. One relative told us, "I'd have spoken to [registered manager] if I had any concerns." One person who received support from the service said they had raised a concern with the registered manager and said, "[The registered manager] resolved it immediately."

End of life care and support

- People received the support they required as they reached the end of life. The registered manager and staff worked with other agencies to support people who were reaching the end of their lives. The registered manager understood the importance of supporting people's families as well as the individual. Relatives told us the care provided by the service had supported them to spend time with their family member without worry or stress. One relative told us, "The staff were lovely, really caring and willing to help. They took all the strain off me."

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.

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

- The registered manager had developed a positive culture which placed people who used the service at the centre of their care. People were involved in all aspects of their care and received high-quality, person-centred care that met their needs and promoted their rights.
- People told us this was a good service and said they would recommend it. One person told us, "I'd give them 100%." A relative said, "I have recommended it [the service] to everyone. I can't praise them enough."

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

- The registered manager and provider understood their legal responsibilities. They informed us of significant events, such as the death of a person using the service, as required.
- People told us the registered manager was "open" with them. They said the registered manager had given them clear information about all aspects of the service when the agency agreed to provide their support.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Continuous learning and improving care

- The registered manager had systems to gather the views of people who use the service and their relatives. This was a small service and the registered manager worked with care staff to provide people's support. This meant people knew her well and people said they were comfortable speaking to her. The registered manager had good oversight of the quality of the service because she worked in people's homes and was available for people to share their views.
- People we spoke with told us the registered manager and care staff asked if they were happy with the support they received. They said the registered manager always asked for their views when she visited their homes or contacted them by telephone. One relative told us, "[Registered manager] always kept in touch."
- The registered manager was committed to providing a good quality service. She used ongoing feedback from people to further improve the service provided. She was developing a formal survey to gather people's views. She aware the systems to gather people's feedback would need to be more structured as the number of people using the service increased.
- All of the staff we spoke with told us the registered manager listened to them and said they could share their views about how the service could be further improved. The staff said they could share their views as they worked with the registered manager or by visiting the service offices.

Working in partnership with others

- The staff worked with other appropriate services to ensure people consistently received care that met their needs. One relative said the registered manager was "very good" at working with other services that supported their family member. They told us staff from a healthcare service had been "very pleased with the care the agency provided".