

T2Z Care Services Ltd

T2Z Care Services

Inspection report

Building 8, Floor 4, The Carlson Suite
Vantage Point Business Village
Mitcheldean
GL17 0DD

Tel: 07498987626

Website: www.t2zcareservices.co.uk

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

T2Z Care Services is a domiciliary care service that provides personal care and support to people living in their own homes. The service supported 35 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 were protected from the risk of abuse, and the provider had systems and processes in place to safeguard people. People and relatives told us they felt safe and were positive about the staff who supported them.

Staff were recruited safely. Staff were trained to administer medicines safely using the providers new electronic care support system. Competency checks were completed to ensure staff were following safe medicine practices.

Risks to people were reduced because people's individual risks and needs had now been assessed and care and support appropriately planned. Staff had access to clear information about people's personal risks and how they should be supported.

Staff followed infection control procedures to reduce the risks of infection.

The service was well-led by a management team who were passionate about improving care and achieving the best possible outcomes for people. People, relatives, staff and professionals spoke positively about the leadership of the service. The registered manager was committed to the ongoing development of the service.

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

Rating at last inspection and update

The last rating for this service was requires improvement (published 10 March 2021) and there were two breaches of regulation. At this inspection found improvements had been made and the provider was no longer in breach of regulations.

Why we inspected

We carried out an announced comprehensive inspection of this service on 9 February 2021. Breaches of legal requirements were found. The provider completed an action plan after the last inspection to show what they would do and by when to improve safe care and treatment and good governance.

We undertook this focused inspection to check they had followed their action plan and to confirm they now met legal requirements. This report only covers our findings in relation to the key questions safe and well-led which contain those requirements.

The ratings from the previous comprehensive inspection for those key questions not looked at on this occasion were used in calculating the overall rating at this inspection. The overall rating for the service has changed from requires improvement to good. This is based on the findings at this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for T2Z on our website at www.cqc.org.uk.

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 well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

T2Z Care Services

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.

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

Inspection team

The inspection was carried out by one inspector and one 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.

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

This inspection was announced.

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 12 January 2022 and ended on 14 January 2022. We visited the office location on 12 January 2022.

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

During the inspection

We spoke with nine members of staff including the registered manager, office manager, care manager, care co-ordinators and care workers.

We reviewed a range of records. This included four people's care records and multiple medication records. We looked at three staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection

We spoke with eight people who used the service and ten relatives about their experience of the care provided. We continued to seek clarification from the provider to validate evidence found. We looked at care records and quality assurance records. We spoke with three professionals about their experience 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.

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.

Assessing risk, safety monitoring and management; Using medicines safely

At our last inspection effective control measures had not been put into place to manage people's risks, medicines and incidents placing them at risk of harm. This was a breach of regulation 12 (Safe Care and Treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 12.

- People's individual risks and needs had now been clearly assessed. Staff had access to clear information about people's personal risks and how they should be supported. A relative said, "[My relative] cannot walk. The carers use a stand aid to [support my family member] into a chair. [They] feel very safe with staff"
- Risks to people were minimised because staff were consistent and knew people well. One relative said, "We have got two super carers; very professional. [They] always contact me if there is an issue. They are proactive; they noticed a rash and ordered cream from the doctor."
- Medicines were now managed in a safe way. Medicine Administration Record (MAR) charts were on a computerised administration system which would flag up if a person's medicines were missed so action could be taken. Records showed people received their medicines as prescribed, and the management team completed regular audits to identify and resolve any issues.
- Staff had been trained in medicines management and had their competency assessed. Clear protocols were now in place to guide staff in the administration of 'as required' medicine.
- People and relatives told us they were happy with the support they received with their medicines. One person said, "[The carers] always make sure I take my tablets. If I'm nearly out, the carer phones the chemist and fetches them for me; I never run out."
- The provider had a computerised system in place, which alerted the office if staff did not attend a scheduled visit. This system ensured people received their visits.

Systems and processes to safeguard people from the risk of abuse

- People were protected from the risk of abuse, and the provider had systems and processes in place to promote and safeguard people. People told us they knew who to talk to if they had any concerns about their care. One person said, "I wouldn't have [the staff] if I didn't like them. I would soon telephone the office and speak with [the registered manager if I had any concerns]."
- Staff were trained in safeguarding adults at risk. Staff were aware of their duty to protect people from abuse. They knew how to report any concerns to the registered managers and to escalate their concerns if necessary, to external authorities. A staff member said, "I have training and there are policies and procedures sent out [when there are any updates]."

Staffing and recruitment

- Staff were recruited safely. Recruitment records included completed application forms with full employment histories, employment references, evidence that criminal record checks had been carried out, health declarations and proof of identification.
- Staff were deployed effectively to meet people's care needs. People told us they had a regular and reliable staff team. One person said, "[I have] regular carers, when one of them has a break, someone else I know comes. I've never been let down"
- Systems were used to minimise the risk of late or missed calls. These included robust monitoring. People told us staff usually turned up on time and stayed the agreed duration for the care call. One person said, "have two regular carers who are generally on time. If [they are] delayed on another visit, [they always] pick up the phone and let me know. They will stay longer if everything is not done."

Preventing and controlling infection

- Staff had received training in infection control and COVID-19. Staff were kept well informed regarding Covid-19 and were kept up to date with all government guidelines about how to work safely during the pandemic.
- Staff had access to appropriate Personal Protective Equipment (PPE) to help to keep themselves and people safe. The registered manager told us that staff could access PPE from the office when they required additional supplies. One person told us, "They are wonderful carers, when my COVID test came back positive, the levels of care didn't drop, they have proper PPE to protect themselves."
- The management team undertook spot checks which included checking staff were using PPE in line with the provider's policy and current government guidance.

Learning lessons when things go wrong

- Staff understood their responsibilities to raise concerns and most staff told us they felt any concerns would be acted on and dealt with appropriately. One staff member said, "They go above and beyond for the clients. As soon as an issue arises they deal with it."
- The registered manager encouraged openness and transparency from staff so that lessons could be learnt, and improvements could be made. One staff member said, "I raised a suggestion re their on-call system and they updated the phone system as a result."
- The registered manager and management team were very responsive to concerns raised by people. One person said, "I complained to [the registered manager] about [something I was concerned about]. He dealt with it, [and made all the necessary improvements]." During the inspection we observed a concern raised to the management team. It was evident that they learnt from mistakes and treated them as an opportunity to make improvements.

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.

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

At our last inspection effective systems had not been fully established to assess and monitor the service being provided and accurate records of people's care requirements had not been always been maintained. This was a breach of regulation 17 (Good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 17.

- The registered manager had developed and strengthened their governance systems to strive for quality care and continuous development and improvement. This included effective audits in relation to care plans and risk assessments, medication, staffing and recruitment, training and development, and incidents and accidents.
- The registered manager was aware of present risks to the service in relation to COVID-19 issues and staffing. At times staff absence was higher than average. To minimise risks all office staff had also received mandatory training and had been supporting care calls when needed.
- People benefited from a clear management structure, consisting of the registered manager, office manager, care manager and care co-ordinators. They were clear about their roles and responsibilities and the majority of staff told us they were visible and approachable. A staff member said, "All the managers are brilliant. The registered manager is great too. You feel like you're being appreciated and it is noticed."

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

- The registered manager was open and transparent throughout our inspection and were clearly committed to providing good quality care. They talked passionately about continuously developing the service to ensure that people received the best possible care.
- Staff told us they felt supported by the registered manager and management team which had recently expanded. Some people and staff told us they could benefit from further clarity around the communication process so that they could be assured management would respond promptly. The registered manager acknowledged that the service had grown and was developing systems to ensure that management were consistently responsive.
- People and their relatives were positive about the service and spoke highly of the staff. A relative said, "We

couldn't visit [our family member] on Christmas day due to COVID-19 infection. The carers went beyond their duties, they cooked her a Christmas dinner, sang Christmas songs and made a lovely day for her". People told us, "I get very good care from caring carers", "I couldn't manage without them, everything is hunky-dory", and, "I look forward to seeing them, the carers always ask if there is anything I want them to do for me before they leave".

- Staff were knowledgeable about the people they supported and clearly committed to providing the best possible outcomes. A staff member said, "One of our clients is sadly end of life, and staff have rallied together to provide double ups so that he gets continuity of care. We all really care."
- The registered manager understood the impact of the pandemic upon staff and promoted their wellbeing in a variety of ways. Staff received their birthday as annual leave and were provided with a programme of resources which they could access independently.

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 understood requirements in relation to duty of candour and had an open and honest approach.
- Concerns and complaints were actively listened to and acted upon. A relative said, "They do a good job and always listen to me. They sent out a male carer once and [my family member] refused to have him in. I spoke to the registered manager, explained the situation and [they have] made sure that only female carers visit." Another relative said, "We had some teething issues when the service started. I spoke to [the registered manager]. They listened and said that it shouldn't be happening and then sorted it out."

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

- The provider conducted surveys of people and staff to assess their satisfaction. We reviewed recently completed questionnaires and noted the positive responses.
- People's satisfaction with the service was also reflected in thank you messages and cards received by the registered manager. One relative had written to the registered manager, "Thank you for all you and your team are doing for [my relative] in such challenging times".
- The provider was committed to the ongoing improvement of the service in the future and was passionate about influencing change within the sector to improve outcomes for people. They had recently led a pilot scheme and engaged with 15 district and county councils to offer a solution that could address the challenge of meeting a growing number of care calls with too few available staff within the industry.
- People were encouraged to share their experience to drive continuous improvement. One person said, "I'm very happy with the way the company is run. When I have spoken to [the registered manager] they have always listened and been as helpful as they can". Another person told us, "The [management team] are very understanding. They genuinely care; I would certainly give them a gold star."

Working in partnership with others

- The registered manager kept up to date with best practice by attending local forums with other care professionals. These forums allowed for information sharing, professional updates and discussion around how to implement best practice guidance.
- The provider worked in partnership with other organisations to support care provision and service development. Professionals spoke highly of T2Z. One professional said, "[The registered manager] engages with us really well. [They] run a transparent service which is fantastic. [They] are proactive with problem solving and work directly with us. [They] have worked hard to build a service that offers a good quality." Another professional told us, "We are very proud of our strong working relationship with T2Z."