

Your Care (UK) Ltd

# Your Care (UK)

## 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

Your Care UK is a small domiciliary agency based in Bolton. The service provides personal care to people living 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.

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

The service had effective systems for keeping people safe. General and individual risk assessments were in place and up to date. Recruitment was robust and staffing levels sufficient to meet people's needs. New staff undertook a thorough induction and an on-going training programme. Medicines systems remained safe.

Care plans in the office and in people's homes reflected people's current needs. The service continued to work effectively with other agencies.

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 service continued to treat people well. People's choices and preferences were recorded within their care files and they told us they felt respected and were happy with the service. People were encouraged to participate in care planning and delivery and their communication needs were adhered to.

There was an appropriate complaints policy and there had only been one recent complaint. This had been addressed with relevant actions.

Staff were well supported by the management team. Staff meetings and supervisions were held on a regular basis. A number of audits were carried out to help drive improvement to the service provision. The service continued to work well with other professionals to help ensure care and support were delivered in the most effective way for the individual.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

### Rating at last inspection

The last rating for this service was good (published 24 April 2017).

### 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 remained safe.

Details are in our safe findings below.

### Is the service effective?

Good ●

The service remained effective.

Details are in our effective findings below.

### Is the service caring?

Good ●

The service remained caring.

Details are in our caring findings below.

### Is the service responsive?

Good ●

The service remained responsive.

Details are in our responsive findings below.

### Is the service well-led?

Good ●

The service remained well-led.

Details are in our well-led findings below.

# Your Care (UK)

## 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. At the time of the inspection there were 30 people receiving support.

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. At the time of the inspection the registered manager was on maternity leave, so the inspection was facilitated by the acting manager and a director.

#### Notice of inspection

We gave the service 24 hours' notice of the inspection. This was because we wanted to ensure someone would be available at the office to facilitate the inspection and arrange visits to some people in their own homes.

#### What we did before the inspection

We reviewed statutory notifications and safeguarding referrals. We liaised with external professionals including the local authority commissioning team. We reviewed previous inspection reports and other 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

During the inspection we spoke with six members of staff including two directors, the acting manager, the administrator and two carers. We also spoke with a relative who had called into the office. We visited two people in their own homes and spoke with them and their relatives.

We reviewed a range of records including four care files held in the office and two held in people's homes. We also looked at personnel files for four staff members. We reviewed policies and procedures, training records, audits, meeting minutes and other records relevant to the running of the service.

#### After the inspection

We spoke with a further two relatives by telephone to gain 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.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- Systems for keeping people safe from the risk of abuse remained effective.

Staff were confident to recognise and report any signs of abuse and had regular training to ensure their skills and knowledge remained current. One staff member told us, "Safeguarding training has made me able to recognize and report concerns 100%."

- There were no recent safeguarding concerns, but any raised could be logged and monitored.

Assessing risk, safety monitoring and management

- There were appropriate health and safety policies and procedures and staff training in this area.
- The service ensured general, environmental risk assessments were in place and up to date.
- Individual risk assessments were completed for each person who used the service and these were regularly reviewed and updated.

Staffing and recruitment

- The staffing and recruitment policies and procedures were followed safely.
- We looked at four staff files which included all relevant documentation.
- Staff members, people who used the service and their relatives felt staffing levels were sufficient to meet the needs of the people who used the service.

Using medicines safely

- Medicines systems remained safe. Staff undertook initial training and regular refreshers.
- Staff competence in administration of medicines was assessed via staff spot checks.
- Medicines Administration Record (MAR) sheets were checked by the management team and any issues with completing them addressed with appropriate actions.

Preventing and controlling infection

- Appropriate policies and guidance were available for staff around infection prevention and control.
- Staff undertook regular training and refresher courses.
- Personal protective equipment (such as plastic aprons and gloves) were supplied to staff to use when delivering personal care to help prevent the spread of infection.

Learning lessons when things go wrong

- The service endeavoured to learn from any issues encountered.
- Accidents and incidents, safeguardings, complaints and reviews of care were recorded and actions completed. Any issues arising were used to learn lessons and improve practice.

# 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 good. At this inspection this key question has remained the same. 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

- Care plans in the office and in people's homes were comprehensive and included health and personal information. People's individual needs were outlined and staff guidance was included where needed.
- There was evidence of regular reviews of care and changes to care needs were clearly documented.

Staff support: induction, training, skills and experience

- Records evidenced that staff support was given in the form of a thorough induction programme, regular training and refresher courses.
- Staff supervisions were undertaken regularly and staff members told us these were helpful to them.
- People felt staff had the skills needed to support them or their relatives. One person said, "We have a team of seven carers, which is very important as they all understand [relative's] needs. They know how to use the oxygen, the settings to put it on."

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

- People's particular dietary needs were outlined within the care plans.
- Staff had training in nutrition and diet and food safety.

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

- The service continued to work effectively with other agencies.
- There was evidence within people's care files that agencies such as GPs, district nurses, social workers and others were contacted appropriately.
- Representatives from the service attended multi-agency reviews as required.

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 DoLS 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, and whether any conditions on authorizations to deprive a person of their liberty had the appropriate legal authority and were being met.

- The service continued to work within the principles of the MCA.
- Consent forms were signed by the person who used the service or their representative. Where this was the representative there was a clear explanation of why they had signed for the person.
- Staff undertook training in MCA. Their knowledge and understanding of decision making and best interests was good.

# 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 good. At this inspection this key question has remained the same. 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

- The service continued to treat people well and with respect. There was a clear policy and staff had training in equality and diversity.
- Information in care files guided staff to treat people with respect at all times.
- People told us their diversity was respected. One person commented, "I generally have the same carers and we get on like a house on fire." A relative said, "We have the same staff unless they are on holiday. Then they still send someone who knows [relative]." A second relative told us, "They are honestly brilliant, they send an extra carer when needed and all the carers are known to us. They are like family and are totally trustworthy."

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

- Documentation evidenced that people were encouraged to participate in care planning and delivery.
- People's communication needs were recorded. Staff at the service had a range of language skills and these were matched with people to aid communication. Where verbal communication was an issue, there was guidance for staff around interpreting people's body language and gestures.
- A service user guide, including information about the service and staff, was available for people who used the service and their relatives.

Respecting and promoting people's privacy, dignity and independence

- There was guidance within care files around respecting people's dignity and encouraging independence. Staff we spoke with were able to give examples of how they managed to retain people's privacy and dignity.
- People felt their dignity and privacy were respected by staff. A relative told us, "Yes, they are polite and respectful. Another said, "They show respect and definitely ensure [relative] has their dignity."

# 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 good. At this inspection this key question has remained the same. 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's choices and preferences were recorded within their care files. People were given the choice of the gender of their care staff, language spoken by staff and times of visits. A staff member said, "Choices and preferences always given, we know service users well and we are not pressured by time to do the care required. Therefore we can give choices."
- People told us they felt their choices were respected. One person told us, "The carers speak [relative's] language [Gujarati]. [Relative] has a good natter with the carers and really enjoys it." Another said, "The fact that the carers speak [relative's] language is really helpful, and they [care staff] know [relative] really well."
- The service was extremely flexible with visits. One person said, "We were given a choice of times and they agreed the times to suit us. The carers are always on time." Another told us, "I asked for extra help when [partner] was in hospital and they are really flexible. When I needed them they came straight away." A third commented, "If we need them someone will come immediately."

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 service was able to accommodate people's communication needs. Information could be made available in a number of languages and formats to make it accessible to as many people as possible.

Improving care quality in response to complaints or concerns

- There was an appropriate complaints policy and there had only been one recent complaint. This had been addressed with relevant actions.
- People we spoke with told us they had no complaints or concerns, but were confident any concerns would be addressed promptly. One person said, "I don't worry that they won't listen. Any little thing gets sorted out really quickly." Another told us, "Any problems are sorted out as soon as possible. I have no complaints or concerns, I wouldn't change them [the service]."

End of life care and support

- The service currently did not support anyone who was nearing the end of their life. They told us they would work with other agencies, such as district nurses, in the event of someone becoming end of life and would

access training as needed.

# 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 good. At this inspection this key question has remained the same. 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 service continued to be very inclusive and supported people in a positive way.
- People were extremely positive about the service. Comments included, "Very good service, I would say it is number one, first class. I could not manage without this service"; "Very happy with the service, wouldn't change. We had other agencies before but they were unsatisfactory"; "We have had different agencies, but this is the best one. I was getting fed up" and "I am 100% happy with the service. We as a family could not have coped without them. I can't praise the service 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

- The management team were aware of the duty of candour and were open and honest about all aspects of care delivery. Any issues were thoroughly investigated to help ensure they were not repeated.

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

- Notifications were submitted to CQC as required.
- The management team were clear about their roles and responsibilities.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- The staff team were from diverse backgrounds and felt they were fully respected by the management. One staff member told us, "The management are very good people. Any issues you can come to the management. They solve issues very fast and very fairly. There is no racism within the company." Other comments included; "I can always get hold of the office or an on call manager"; "Good service to work for, we are well supported by management."
- Staff members regularly popped into the office and felt comfortable to discuss anything with the management team.
- Staff meetings were held on a regular basis and staff supervisions were carried out every three months
- The management team carried out regular visits to people who used the service to check on their satisfaction with care delivery.

Continuous learning and improving care

- A number of audits were carried out, including care plan audits and medicines audits. Any issues identified were addressed with actions to help drive improvement to service provision.
- Staff spot checks were undertaken to help ensure their practice remained acceptable. Any shortfalls were addressed promptly.
- Questionnaires were sent out to people who used the service every year. The 2019 questionnaires were positive about all aspects of the service. Comments included; "In my opinion everything is perfect"; "All carers are very good and excellent to me" and "I am very happy with the service. Best service ever."

#### Working in partnership with others

- The service continued to work well with other professionals to help ensure care and support were delivered in the most effective way for the individual.