

Homecare Solutions Limited

Homecare Solutions Ltd

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:

Homecare Solutions Ltd is domiciliary care service based in Salford and provides care and support to people living in their own homes. At the time of the inspection there were seven people using the service.

People's experience of using this service:

We have made a recommendation to ensure the registered manager strengthens their quality assurance systems. Although we were told audits and quality assurance checks were completed, these were not always clearly documented.

Spot checks and competency assessments of staff carrying out their work were completed and staff meetings took place to enable staff to share their views about the service.

People told us they felt safe using the service and staff displayed good knowledge about how to protect people from the risk of harm. People told us they received their medicines as prescribed and staff were also recruited safely, with appropriate checks carried out when their employment commenced.

There were enough staff to care for people safely, with staff and people using the service telling us current staffing arrangements were sufficient and their rotas were well managed. Accidents and incidents were monitored and any actions taken to prevent future re-occurrence were recorded.

People received the support they needed to eat and drink. Staff told us they were happy with the level of training, support and supervision available to develop them in their roles.

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 said they felt treated with dignity and respect and staff promoted their independence as required.

No complaints had been made about the service, although we found appropriate systems were in place should any be received. A number of compliments were also made about the service from people who used the service and families.

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

Rating at last inspection:

This last inspection was in May 2017 (published May 2017) and the overall rating was Good.

Why we inspected:

This was a routine comprehensive inspection and in line with our timescales for previously Good rated services.

Follow up:

We will continue to monitor information and intelligence we receive about the service to ensure good quality care is provided to people. We will return to re-inspect in line with our inspection timescales for Good rated services, however if any information of concern is received, 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?

The service was safe.

Details are in our safe findings below.

Good ●

Is the service effective?

The service was effective

Details are in our effective findings below.

Good ●

Is the service caring?

The service was caring.

Details are in our caring findings below.

Good ●

Is the service responsive?

The service was responsive.

Details are in our responsive findings below.

Good ●

Is the service well-led?

The service was well-led.

Details are in our well-Led findings below.

Good ●

Homecare Solutions Ltd

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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Inspection team:

The inspection was carried out by one inspector.

Service and service type:

Homecare Solutions Ltd is a 'domiciliary care service'. It provides personal care to people living in their own homes.

The service had a manager registered with the Care Quality Commission. This means 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 carried out this inspection on 3 and 5 December 2019.

The inspection was announced on 29 November 2019 to ensure the inspection could be facilitated by the registered manager at the location office.

What we did:

Prior to the inspection we reviewed information and evidence we already held about this service, which had been collected via our ongoing monitoring of care services. This included notifications sent to us by the service. Notifications are changes, events or incidents that the provider is legally obliged to send to us without delay.

We also viewed the provider information return (PIR). 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 contacted the local authority for feedback about the service in advance of our inspection.

The first day of the inspection was spent at the main office reviewing records such as care plans, staff files, supervision/appraisal records, complaints and quality assurance documentation. The second day of the inspection consisted of speaking with people who used the service and relatives about the care and support they received. During the inspection we spoke with the registered manager, three care staff, two people who used the service and three relatives.

Documentation reviewed included three care plans, five staff personnel files, two medicine administration records (MAR) and other records about the management of the service to help inform our inspection judgements.

Is the service safe?

Our findings

Safe – this means 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.

Staffing and recruitment; Using medicines safely:

- There were enough staff to care for and support people who used the service. Staff said their rotas were well managed, organised and had sufficient travel between each care visit. People told us staff were on time and were contacted if staff would be late.
- Staff were recruited safely and we found all relevant checks had been carried out prior to them commencing their employment. The files themselves were disorganised however, with no clear filing structure in place to locate relevant documents easily. We spoke with the registered manager about this who told us they would review all staff files after the inspection.
- People told us they received their medicines safely. We looked at two medication administration records which were all completed accurately with no missing signatures. Staff had received medication training and had their competency assessed by management during routine spot checks. One person said, "The staff give me my medication and I would say it is on time."

Assessing risk, safety monitoring and management; Preventing and controlling infection:

- Risk assessments were in place covering areas such as mobility, use of electrical appliances, the home environment, personal care, eating and drinking and medication.
- Where any risks were identified, there were details about the measures to take to keep people safe. The risk assessments were hand written and the writing was difficult to read. We provided this feedback to the registered manager so they could consider keeping the documents electronically to ensure the information could be easily understood by staff.
- People were protected from the risks of the spread of infections. Staff confirmed equipment such as gloves and aprons were available in sufficient quantities and people confirmed these were always worn when personal care was being provided.

Systems and processes to safeguard people from the risk of abuse:

- People and their relatives told us they felt the service was safe. One person said, "Yes I feel I have a feeling of safety and re-assurance." A relative added, "Oh yes, very safe."
- Staff confirmed they had received training in safeguarding and were able to describe the different types of abuse that could occur and how to report concerns.
- A safeguarding policy and procedure was in place and provided information about how to escalate concerns.

Learning lessons when things go wrong:

- Systems were in place for when things went wrong. Accidents and incidents were monitored closely, with

details recorded about actions taken to prevent re-occurrences.

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.

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 (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.

- Staff had completed training regarding the MCA and DoLS.
- People's capacity was monitored and people's decision-making capabilities were recorded in their care plan. The registered manager told us this would be kept under review if people's circumstances changed.
- We saw examples during the inspection where decisions had been taken in people's best interests due to them lacking the capacity to make their own choices. This process involved relevant professionals and family members.

Staff support: induction, training, skills and experience:

- An induction programme was provided when staff first commenced employment to ensure they had a thorough understanding of what was required within their role. The care certificate was also completed by staff who had not worked in a care role previously.
- A training matrix was used which showed the different courses staff had completed which included moving and handling, safeguarding, health and safety, first aid and dementia.
- Staff spoke positively of the training provided and said enough was available to support them in their roles.
- Staff supervisions and appraisals were carried out and gave staff the opportunity to discuss their work and receive feedback about their performance.

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

- The care and support people needed to receive from staff had been captured as part of the initial assessment process and was recorded within care plans.
- When a package of care commenced, staff carried out an assessment of each person to ensure they were able to meet their needs.
- People told us they were involved in this process and were able to contribute towards the support they received and express their views.

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support: Supporting people to eat and drink enough to maintain a balanced diet:

- Staff provided people with the support they needed to eat and drink. This usually involved staff assisting people with food and drink preparation, or leaving them something to eat for later in the day.
- People's care plans provided details about their nutritional needs and the support staff were required to provide.
- The feedback we received from people who used the service and relatives was that they were happy with the support provided in this area.
- People who used the service told us staff had at times, assisted them to healthcare appointments, if they were unable to attend on their own.
- The service worked with other healthcare professionals as required such as district nurses to ensure people received the healthcare they needed.

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:

- Due to Homecare Solutions only being a small domiciliary care service, people benefited from a small but consistent staff team. People told us this was what they liked and meant more caring relationships could be developed.
- People who used the service spoke positively about the standard of care provided and said staff treated them well. Comments from people included, "I have found them to be okay and they are providing good care to me. The staff are very good and always turn up on time. Things are going well from my point of view."
- Feedback from family members and relatives was also positive. One relative said, "The staff know how to do things and dad is very happy. There is a regular carer who knows dad very well and he seems very happy." Another relative added, "We have used them for about seven weeks and they have been very good. I have been very satisfied overall and they are very polite." A third relative added, "They have been excellent. They help mum to have a bath and she seems very happy. We couldn't wish for a better member of staff than we currently have."

Respecting and promoting people's privacy, dignity, independence and equality and diversity:

- People who used the service and relatives told us staff always treated them well and with dignity and respect. One relative said, "The staff are nice and pleasant and treat dad well. He seems very happy with them."
- Staff were aware of how to promote people's independence and we saw people's care plans took into account things people were able to do for themselves and where they may need support. One person said, "I am quite independent, but need staff to help me with somethings. If I can do something, then they let me get on with it."
- At the time of the inspection there was nobody using the service who had any specific equality and diversity requirements, however the staff team were aware of things to be aware of should this change.

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

- People who used the service said they felt involved in the support they received and were able to contribute where necessary and this was usually done as part of the review process. One relative said, "I was invited to a meeting right at the start and was informed about what would happen."
- Questionnaires were also sent, seeking people's views and opinions about the service they received so that the feedback could be used to improve the service.

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 meet people's needs, preferences, interests and give them choice and control; 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:

- Each person who used the service had their own care plan in place which covered areas such as washing and dressing, food and drink, medication, religious and social interests. The care plans detailed the care and support people required from staff. Similar to the staff files, care plans were disorganised and would also benefit from a structured filing system to ensure the information was easier to find. We provided this feedback to the registered manager.
- People took part in activities that interested them and met their needs. Some people managed their social activities themselves, while other people had social support as part of their package of care. People were supported by staff to access the local community and participate in activities and pastimes of their choice.
- People were encouraged to maintain relationships where possible. People's relatives were involved in the care and support people received as necessary.

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.

- Support plans contained information about people's communication needs such sight, hearing and people's abilities to read and write.
- The registered manager confirmed they could provide documents in different formats if required such as large print if people were unable to read smaller writing. Although there had not been a requirement to use them, interpreter services were also available as needed.

Improving care quality in response to complaints or concerns:

- No complaints had been made about the service since our last comprehensive inspection.
- People knew how to provide feedback about the care they received and information about how to make a complaint was available in the service user handbook.
- A complaints policy and procedure was also available.
- The service also collated any compliments which had been received where people had expressed their satisfaction with the service provided.

End of life care and support:

- Due to Homecare Solutions being a domiciliary care service, end of life care and support was not provided directly. However, the registered manager told us staff would work closely alongside other relevant healthcare professionals as necessary to provide the care and support if people required.
- Nobody was in receipt of end of life care at the time of the inspection.

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:

- People told us the staff knew them well and responded to their needs in a person-centred way. People said they knew the registered manager who often helped out with care visits and made the effort to speak with them and have a chat.
- All the staff we spoke with told us they liked working for the service and staff worked well together. We also received positive feedback about the management team at Home Care Solutions.
- One member of staff said, "Working conditions are good and the managers are mindful of staff welfare." Another member of staff said, "Everything is going okay and they are good at accommodating any personal needs we may have."

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

- Spot checks and observations were undertaken of staff delivering care at people's houses .
- Confidential information was stored securely and we saw documents such as care plans and staff recruitment files were stored in the main office which was always locked.
- Events which the provider is legally required to report to us were submitted as required when any incidents had occurred within the service.
- Although we were told audits and quality assurance checks were completed, these were not always documented. This was in relation to areas such as care plans, staff files and medication.

We recommend the service looks to improve their internal auditing systems and ensure these are clearly documented so that any potential shortfalls can be identified in a timely way.

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

- Staff meetings took place in the service which gave an opportunity to discuss work and improve the service people received. Staff said these took place regularly and they felt able to discuss any areas of concern and improvements. Minutes of these meetings were available.
- The ratings from our last inspection were clearly displayed at the main office. Homecare Solutions had an active website where the ratings were also displayed. The website also provided a range of different

information about the services available.

- A range of policies were available, as well as a service user guide and staff handbook. This ensured people who used the service and staff had access to important information about procedures within the service.

Working in partnership with others:

- The service had developed a number of links within the local community and worked in partnership with different organisations to improve the support people required. This included doctors, social workers and district nurses.

- The service had also been invited to Westminster to attend the 2019 Gala of the Parliamentary review as a result of their work in the community. Staff got the chance to meet leading executives from a range of industries as well as senior politicians from Westminster's past and present. This had also been an opportunity to add input and learn about the wider issues and plans affecting health care.