

West Park Care Harrogate Limited

# West Park Care Harrogate

## Inspection report

Suite 7, Harrogate Business Centre  
Hookstone Avenue  
Harrogate  
HG2 8ER

Date of inspection visit:  
10 December 2019  
11 December 2019

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17 February 2020

### 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

West Park Care Harrogate is a domiciliary care service providing personal care to people living in their own homes. The service specialises in supporting younger adults and older people who may be living with a physical disability, mental health needs, a sensory impairment or dementia.

Not everyone who used the service received support with personal care. The Care Quality Commission (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 eight people were receiving support with personal care.

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

People received safe care and support which met their needs. Staff had been recruited safely and there were systems in place to make sure people received support at the times they needed.

Staff had been trained to identify and respond to safeguarding concerns. Staff understood people's needs and detailed risk assessments were in place to support them to provide safe care. Medicines were managed and administered safely.

When an accident or incident had occurred, staff responded appropriately and the manager was very thorough in making sure lessons were learnt and action taken to try and stop a similar thing happening again.

Staff completed a range of training and regular supervisions and spot checks helped make sure they provided effective care. New staff had an induction and shadowed other staff to develop their confidence and learn how to meet people's individual needs.

Management worked very closely with other professionals to make sure people's needs were met. They were quick to respond to changes in people's needs and seek advice, guidance and support.

The manager had a very good understanding of the Mental Capacity Act 2005 and the importance of making sure people's rights were protected. 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.

Staff were kind and caring. They respected people's privacy, maintained their dignity and promoted people's independence. The provider employed a small team, which helped people get to know staff and develop caring relationships with them.

Staff understood people's communication needs and the requirement to provide accessible information to

help people understand choices and make decisions.

People's care was planned and delivered in a person-centred way. People, their relatives and professionals were all involved in assessments and reviews. The provider did not organise visits which were less than 30 minutes to make sure staff had time to spend with people and provide person-centred care.

We made a recommendation about developing and implementing an end of life care policy and procedure.

People felt able to speak with staff or management if they wanted to complain about the service. The manager was very responsive to feedback.

There was a person-centred culture within the service. Good organisation and thorough audits helped management monitor the quality and safety of the service. Management worked proactively to continually improve the service provided to people.

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

Rating at last inspection

This service was registered with us on 28 December 2018 and this was the first inspection.

Why we inspected

This was a planned inspection based on when the service was registered.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our reinspection 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?

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 ●

# West Park Care Harrogate

## 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 two inspectors and an assistant inspector.

#### Service and service type

West Park Care Harrogate is a domiciliary care agency. It provides personal care to people living in their own homes.

The service did not have a manager registered with the CQC. A registered manager and the provider are legally responsible for how the service is run and for the quality and safety of the care provided. The service was managed by the provider's quality assurance manager and we have referred to them as 'the manager' throughout the report. A new manager had also been recruited and applied to become the registered manager.

#### Notice of inspection

The inspection was announced; we gave the provider 48 hours' notice of the inspection. This was because the service is small and we wanted to be sure the manager would be available to speak with us when we visited.

Inspection activity started on 10 December 2019 and ended on 11 December 2019. We visited the office location on 11 December 2019.

#### What we did before the inspection

We reviewed information we had received about the service since it registered. We sought feedback from the local authority and Healthwatch. Healthwatch is an independent consumer champion that gathers and

represents the views of the public about health and social care services in England. We used this information to help plan our inspection.

The provider was not asked to complete a provider information return before 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.

#### During the inspection

We spoke with one person who used the service, six people's relatives and received feedback from four health and social care professionals. We spoke with the two directors, quality assurance manager, and four members of care staff.

We reviewed two people's care records in full and one person's in part, including their medication administration records and daily notes. We looked at two staff's recruitment, induction, training and supervision records as well as other records relating to the management of the service.

#### After the inspection

We continued to review evidence from the inspection and seek clarification from the provider to validate evidence found.

# 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.

### Staffing and recruitment

- People were supported by safely recruited staff. Robust checks helped to make sure suitable staff were employed.
- People received patient and unrushed support at the times they needed; management monitored staffing levels and the rotas to make sure staff were in the right place at the right time.
- People gave positive feedback about the punctuality and reliability of staff. They told us, "Staff are always on time" and, "On the few times there's been something wrong with the time, we've had a phone call to let us know what's happening."

### Assessing risk, safety monitoring and management

- People received safe support from staff who had been trained and had a good understanding of their needs.
- Risks were thoroughly assessed and plans put in place to provide guidance to staff on how to safely support people.
- Risks were routinely reviewed and reassessed to help keep people safe. A professional explained, "The service has shown they can meet people's needs, and are quick to identify changes or risks and implement extra care quickly."

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

- People felt safe with the staff who supported them; staff had a good understanding of how to identify and respond to any safeguarding concerns to help keep people safe.
- The manager worked closely with the local authority safeguarding team to report and address any safeguarding concerns.

### Learning lessons when things go wrong

- People received the help and support they needed when an accident or incident occurred; staff responded quickly to concerns to help keep people safe.
- The manager was very proactive in identifying any lessons that could be learnt and acted to prevent similar things happening again.

### Using medicines safely

- People received safe support to take their prescribed medicines. Staff had been trained and their competency checked to make sure they administered medicines in line with good practice guidance.
- Regular audits helped management monitor and make sure people's medicines were recorded and administered safely.

### Preventing and controlling infection

- People were protected against the risk of infection; staff had been trained and management completed spot checks to make sure they followed good infection control and hand hygiene practices.
- Staff used personal protective equipment, such as gloves and aprons, to reduce the risk of spreading germs or healthcare related infections.



# 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.

Staff support: induction, training, skills and experience

- People received effective care from staff who had been trained to meet their needs; staff were supported to complete a wide range of training courses.
- The manager had introduced a comprehensive induction and period of shadowing to make sure new staff felt supported and to help them develop the skills and knowledge needed to provide effective care.
- Regular spot checks and supervisions were used to monitor staff's performance and support them to continually learn and develop.
- A system was in place to make sure staff received an annual appraisal of their performance.

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

- People's needs were thoroughly assessed and detailed care plans were in place to guide staff on how to meet their needs. A professional explained, "They appear well organised and ensured they had as much information from me and my assessment before supporting the client."
- Detailed assessments, thorough care planning and regular reviews helped make sure staff could support people to meet their complex needs. Professionals praised the positive impact staff had made in supporting people who had previously refused care or where other care arrangements had broken down.

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

- People were supported to maintain their health and wellbeing. Staff monitored people's needs and responded to any changes. A professional explained, "When they identify concerns about a person's health and wellbeing, they will report these to health and social care professionals in a timely manner."
- People were supported to access healthcare services if needed. Staff worked closely with professionals to make sure people's needs were met and they received effective care.

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.

- People were consulted about their care and support; staff sought and recorded people had consented to the support provided.
- The manager had a very good understanding of the MCA and how to make best interest decisions if needed; systems were in place to support staff to assess people's mental capacity and record best interest decisions if needed.

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

- People received support when needed to make sure they had enough to eat and drink and to maintain a balanced diet.
- Staff monitored people's nutritional needs; they prompted people and left food and drinks in accessible places if necessary to help make sure people ate and drank enough.

# 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

- People were treated with kindness by the caring staff. Feedback included, "The staff are very caring" and, "They are very nice and pleasant."
- People had developed caring relationships with the regular staff who visited them.
- The provider employed a small team of staff and did not provide visits that were less than 30 minutes. This meant staff had time to get to know people and support them in a caring and unrushed way.

Respecting and promoting people's privacy, dignity and independence

- People were well treated. A professional told us, "I have observed the carers treating the clients with dignity and respect and they always work in a person-centred way."
- Staff understood the importance of supporting people to maintain their privacy; they were respectful and kind in the way they supported people to meet their needs.
- Staff encouraged people's independence and enabled them to do as much as possible for themselves.

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

- People were listened to and their choices respected; staff had a good understanding of the importance of offering people choices and respecting their decisions.
- Staff spoke with people's families and used verbal and non-verbal communication to understand people's wishes and views and to make sure these were central in the care and support provided.
- Care plans recorded information about people's wishes and preferences showing they had been encouraged to express their views and make decisions about their care.

# 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.

### End of life care and support

- People did not need support with end of life care at the time of our inspection. Care plans recorded basic information about people's wishes and views, for example, if they had refused to be resuscitated.
- The provider did not have a policy and procedure setting out their approach to supporting people at the end of their life and acknowledged this was needed.

We recommend the provider research and implement a policy and procedure in relation to planning and supporting people with end of life care should the need arise.

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

- People's care and support was planned to meet their needs and preferences. A person explained, "The staff do for me what I need doing, what I can't do myself. They do that really well."
- Person-centred care plans provided detailed guidance for staff on people's needs and how those needs should be met. They reflected people's individual needs and preferences.
- People and their relatives were fully involved in planning and reviewing the care and support provided to make sure it met their needs.
- Staff understood people's needs and what was important to them. They took time to speak with people and get to know what was important to them.

### 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

- Staff supported people to avoid social isolation; they took time to get to know them and develop caring relationships.
- Staff knew who was important in people's lives and supported relatives, where appropriate, to be involved in the support provided.

### 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 manager understood the importance of providing information in an accessible format, which people could understand. For example, they explained how large print versions of people's care plans were

provided when necessary.

- People's care plans included important information about their communication needs to guide staff on how best to share information in an accessible way.

Improving care quality in response to complaints or concerns

- People knew who to contact and felt confident speaking with staff or management if they were unhappy about the service or needed to complain.
- The provider had a complaints procedure setting out how they would manage and respond to any complaints they received.

# 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

- People, relatives and professionals gave positive feedback about the person-centred culture with the service. A professional told us, "I find their organisation is well-run and they always provide an excellent level of care."
- The service was organised and delivered in a person-centred way; these values were reflected at all levels of management and within the staff team. A member of staff told us, "The managers are behind the staff and clients and are focused on making sure we have all we need to work together to meet people's needs."
- Management were actively involved in coordinating people's care to make sure it met their needs. They focussed on spending time with people to understand their needs and were quick to respond to any issues or concerns to make sure people received good care.

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

- The provider and management had a strong understanding of the regulatory requirements and good practice guidance.
- Information was clearly recorded, well-organised and stored securely; there were clear audit trails and accountability within the service.
- Management worked hard to make sure staff felt listened to, valued and rewarded; staff were supported by management and felt able to ask for advice and guidance if they were unsure.
- The manager had a very proactive approach to monitoring the quality and safety of the service and used regular audits, spot checks and reviews to identify issues or concerns and to effectively manage risks.
- Management were very responsive to feedback and clearly committed to continually improving the service for the people they supported.

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 manager had a good understanding of their responsibility to be open and honest, investigate issues or concerns and apologise to people if things went wrong.

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

- Staff and management worked effectively with other professionals to successfully provide care to people

with complex needs. A professional explained, "They have been open and honest about what they can provide and they are flexible to make it work. It felt very organised and person-centred."

- People felt listened to; there was open communication and information was effectively shared to make sure people's needs were met. Electronic rotas and records helped people and relatives access information about their care and support.
- Team meetings were used to share information and discuss the running of the service; they also provide an opportunity for reflection and shared learning.