

Twilight Years Limited

# Twilight Years Limited

## Inspection report

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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

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

### About the service

Twilight Years Limited is a domiciliary care agency. It provides personal care to people living in their own homes. The service supports people living in the Furness, South Lakeland and Carlisle districts in Cumbria. There were 180 people receiving personal care when we inspected.

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

**Right Support:** Staff focused on people's strengths and promoted what they could do, so people had a fulfilling and meaningful everyday life. They supported people to make decisions following best practice in decision-making. Staff communicated with people in ways that met their needs.

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.

**Right Care:** People received person-centred care from staff who knew them well. The service had enough appropriately skilled staff to meet people's needs and keep them safe.

**Right Culture:** Staff provided people with care, which met their needs and took account of their preferences. People and those important to them were involved in planning their care. People told us they would recommend the service.

People were protected from abuse. Staff were trained in how to identify abuse and how to report concerns about people's safety. Risks to people's safety had been identified and managed. Staff were trained in how to provide care in a safe way. There were enough staff to support people. Staff supported people, as they needed, to take their medicines. People were protected from the risk of infection. Staff were trained in infection control and used appropriate personal protective equipment. The registered manager had systems to ensure lessons were learned from any incidents to ensure the safety of the service.

The provider had introduced additional systems to seek people's views and used feedback received to improve the service. Staff worked with other services which supported people, to ensure people received the care and support they needed. The provider usually notified us of significant incidents. We found they had not informed us promptly when two reportable incidents had occurred. They had introduced additional systems before our inspection to ensure notifications of incidents were provided promptly as required.

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, (report published 19 June 2018).

#### Why we inspected

This inspection was prompted by a review of the information we held about this service.

During our review we identified the provider may not have notified us promptly about significant incidents which had happened during the delivery of the service. We undertook a focused inspection to review the key questions of safe and well-led only.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

The overall rating for the service has remained good based on the findings of this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Twilight Years Limited on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

#### Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

## 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.

# Twilight Years Limited

## 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 Health and Social Care Act 2008.

#### Inspection team

The inspection was carried out by one inspector and an 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.

#### Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

#### Notice of inspection

This inspection was unannounced.

#### 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. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make.

We used information gathered as part of monitoring activity that took place on 1 November 2022 to help plan the inspection and inform our judgements. We used all this information to plan our inspection.

#### During the inspection

We spoke with 4 members of the management team and looked at the care records for 5 people. We looked at the staff training matrix and 3 staff files in relation to recruitment. We also looked at a range of records relating to the management of the service and how the management team shared important information with staff. We contacted 6 people who used the service and the relatives of 12 people to gather their views. We also contacted 15 members of the care team to gather their views.

# Is the service safe?

## Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At our last inspection we rated this key question good. The rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were safe and protected from abuse. People told us the staff made them feel safe. One person said, "They [staff] do make me feel safe." A relative told us, "[Relative] is definitely safe with them all."
- Staff were trained to identify abuse and were confident to report any concerns. They understood their responsibility to protect people from abuse. One staff member told us, "We are there to protect people from any form of abuse."

Assessing risk, safety monitoring and management

- Risks to people's safety had been identified and managed. People had been included in developing their risk assessments.
- Staff told us they had access to people's risk assessments and information about how to keep people safe.

Staffing and recruitment

- There were enough staff, with the appropriate skills, to provide people's care. Most people told us staff arrived at the time arranged and stayed for the length of time agreed. One person told us, "There are enough staff for our needs and they always come on time and stay the time needed. If ever one is off sick the shift has always been covered." Another person said, "I do feel safe ... my reasons for saying this are that they always arrive on time and I get regular carers."
- The registered manager ensured staff were available to cover unexpected or emergency situations. Staff told us if they needed to stay with a person due to an emergency they would ring the office for their other visits to be covered by other staff. One relative told us they had appreciated the support provided in an emergency. They told us, "[Relative] fell the other week and [care worker] was amazing and called the doctor and stayed with [relative] for an hour."
- Most staff told us their care visits were well organised and gave them the time they needed to provide people's care. One staff member said, "I feel I get plenty of time both during the call and in between the next." Another staff member told us, "There are enough staff to provide the support to the people we look after. I have never had to cut time short to go to my next call."
- Two staff told us their rotas did not include time to travel from one visit to the next. We passed this to the provider for them to address.
- The provider used safe procedures when new staff were employed. All new staff had to provide evidence of their good character and their conduct in any previous roles working in health or social care. The provider obtained a Disclosure and Barring Service, (DBS), check for all new staff. DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.

### Using medicines safely

- People received the support they needed with managing their medicines. Staff were trained in how to give people their medicines and how to keep clear records of the support they had given to people.
- One relative said, "They give [relative] their medication correctly and on time and then it's all put onto the App on their phones." Another relative told us, "They give [relative] their medicines morning and night ... it's all recorded on the App, which I can see."

### Preventing and controlling infection

- People were protected against the risk of infection because staff were trained in infection prevention and control and used appropriate personal protective equipment, (PPE).
- People told us staff followed good hygiene and infection control procedures including using face masks and washing their hands regularly. One person told us, "They [staff] all wear the PPE and wash their hands regularly." Another person said, "They [staff] all wear the correct PPE when they are here."
- Staff told us they had completed training in infection prevention and control and in how to put on and remove PPE. They said the provider had ensured they had appropriate PPE throughout the COVID-19 pandemic.

### Learning lessons when things go wrong

- The provider had systems to learn from incidents to improve the safety of the service. This included sharing learning with the staff team as appropriate. We saw minutes from staff meetings where learning had been shared. The registered manager also used digital media to share learning with staff.



# 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 our last inspection we rated this key question good. The rating for this key question has remained 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; Continuous learning and improving care

- There was an experienced registered manager in post. The registered manager and staff were clear about their roles and responsibilities.
- The registered manager was aware of their responsibility to notify us of significant incidents which were related to the delivery of the regulated activity. They usually notified us promptly when incidents occurred. Before our inspection we identified the provider may not have reported incidents, as required. The registered manager looked into this and identified 2 incidents which should have been reported to us. They submitted notifications regarding the incidents retrospectively before we carried out our inspection. The registered manager also made improvements to the procedures for submitting notifications to ensure any future notifications would be submitted as required.
- Most people told us they knew the management team in the service and how they could contact them. One person told us, if they needed to contact the office, "I always get through quickly and they are helpful." Another person said, "They always get back to you quickly and they are so helpful." Two people said they felt communication from the management team could be improved. We shared this with the registered manager for them to address.
- People told us the service was well-managed. One person told us, "I would say it is a very well-managed company and I know who the manager is."
- The registered manager was committed to the continuous improvement of the service. They had identified areas within the service which could be improved. They had recruited a quality assurance officer to improve how the quality of the service was monitored and to identify further improvements.

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

- People received person-centred care which met their needs and promoted their rights. People who used the service, relatives and staff told us they would recommend the service. One person said, "I would definitely recommend this service; they are absolutely brilliant just by the way that they all are". Another person said, "I would recommend this service as they always do what you want them to do and they are always very polite."
- The registered manager was supported by a management team and a team of care co-ordinators. Most staff said they felt well supported. One staff member said, "I feel fully supported within this company." Another staff member said, "Management are supportive towards carers [care workers] and everyone is treated equally."

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 provider and registered manager were aware of their responsibilities under the duty of candour. They were open and honest with people when incidents occurred and shared information, as required, with relevant people.

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

- The registered manager had formal and informal systems to gather people's feedback about the service. People had been asked to complete a quality survey to share their views. A summary of the results from the survey was published on the provider's website. The provider had also published the actions they had taken in response to the feedback given.
- Some people told us they had not been asked to complete a survey. They said they were asked for their views in meetings to review the care provided.
- Other people said they could not remember being asked for their views. The provider had a newly appointed quality assurance officer. Their role included visiting people to ask their views to improve how the provider gathered people's feedback.

Working in partnership with others

- The management team worked in partnership with other services to ensure people received the care they needed. Staff knew the other services which provided care to people and contacted them as appropriate.