

Tattenhall Local Care Limited

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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

What life is like for people using this service:

Staff went above and beyond to protect people from the risk of social isolation. They treated people with kindness and all the people we spoke with made positive comments about them.

People's comments reflected that very positive relationships had been established between themselves and staff.

Staff and the service contributed to the community through their actions and by making charitable donations to good causes. The service had received 35 compliments over a period of 11 months which reflected positively on the quality of the support being provided.

People each had a personalised care record in place which outlined to staff how they should be supported. These contained information about people's personal preferences and preferred daily routines.

There had been no complaints about the service. However, people confirmed that they found the registered manager to be approachable and told us they would not hesitate to raise any concerns.

People commented that they had been involved in the development of their care. Positive outcomes had been identified for each person which were reviewed on a routine basis. People told us that staff worked in "partnership" with them and that they felt part of a team.

People were protected from the risk of abuse. Staff had successfully identified and taken appropriate action to keep people safe where they had concerns.

People received their medicines as prescribed and staff were completing paperwork appropriately to show this had been given.

Staff followed infection control processes which helped prevent the spread of infection.

Where incidents had occurred lessons had been learnt to prevent these issues from reoccurring.

Staff had received the training they needed to support people effectively.

People complimented staff on their cooking skills. Staff had also received training in food hygiene.

People had been supported to access health professionals where required.

The registered provider had a policy in place to support effective communication for those people who had additional communication needs.

The registered provider had quality monitoring processes in place which had identified and acted upon

areas that needed improvement.

Staff had been given the opportunity to give feedback on the service and this information was used to make improvements.

More information is in Detailed Findings below

Rating at last inspection: Good (previous report published 26 April 2016).

About the service: Tattenhall Hall local care is a service that provides care and support to people in their own homes. At the time of the inspection there were 48 people receiving care and support from the service.

Why we inspected: This was a planned inspection based on the rating at the last inspection.

Follow up: We will continue to monitor intelligence we receive about the service until we return to visit as per our re-inspection programme. If any concerning information 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?

Good ●

The service was safe

Details are in our findings below.

Is the service effective?

Good ●

The service was effective.

Details are in our findings below.

Is the service caring?

Good ●

The service was caring.

Details are in our findings below.

Is the service responsive?

Good ●

The service was responsive.

Details are in our findings below.

Is the service well-led?

Good ●

The service was well led.

Details are in our findings below.

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Detailed findings

Background to this inspection

The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection checked whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Inspection team:

One adult social care inspector and an Expert by Experience conducted the inspection. 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:

Tattenhall Local Care is a domiciliary care agency. It provides personal care to people living in their own houses and flats in the community. It provides a service to older adults.

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 gave the service 24 hours' notice of the inspection visit because it is small and the manager is often out of the office. We needed to be sure that someone was available to support the inspection.

What we did:

Our plan took into account information the provider sent us since the last inspection. We also considered information about incidents the provider must notify us about, such as safeguarding concerns; We obtained information from the local authority commissioners. We assessed the information we require providers to

send us at least once annually to give some key information about the service, what the service does well and improvements they plan to make. We used all this information to plan our inspection.

During the inspection we spoke with 12 people using the service, the registered manager and two members of staff.

We looked at three people's care records and four staff recruitment files. We looked at other information relating to the day to day management of the service, such as quality monitoring records and minutes from meetings.

Details are in the Key Questions below.

The report includes evidence and information gathered by the inspector and the Expert by Experience.

Is the service safe?

Our findings

Safe – this means people were protected from abuse and avoidable harm

People were safe and protected from avoidable harm. Legal requirements were met.

Using medicines safely

- ☐ People told us they received their medication as prescribed.
- ☐ Staff had received training in the safe administration of medicines and their competencies to do so had been assessed.
- ☐ Medication Administration Records (MARs) had been signed by staff to show that people received their medicines as prescribed.
- ☐ Staff had access to policies and procedures which contained up-to-date information regarding current best practice in relation to administering medicines.

People were protected from abuse and avoidable harm

- ☐ People commented that they felt safe in the presence of staff.
- ☐ Staff had received training in safeguarding vulnerable adults and had access to up-to-date policies and procedures which outlined what action they should take if they had any safeguarding concerns.
- ☐ Appropriate action was taken to ensure people's safety where potential abuse was identified. In one example staff had raised concerns with the registered manager and the local authority. This had enabled the implementation of protective measures to ensure people's safety.
- ☐ Recruitment processes were safe and helped ensure that staff who were employed were of suitable character.

Safety monitoring and management

- ☐ The registered provider had a 'Lone Working' policy in place to help ensure that staff remained safe and well at work.
- ☐ Staff had completed training in Health and Safety and knew their role and responsibilities for keeping people safe from harm.

Staffing levels

- ☐ There were sufficient numbers of staff in post to meet people's needs. People commented that staff attended their calls on time and stayed for the full duration. They also told us that they had never been left without the support they needed.
- ☐ People were contacted and informed about any unavoidable delays. People confirmed that delays did not happen often and that they were never put at risk because of this.

Preventing and controlling infection

- ☐ The control and prevention of infection was managed well. Staff had completed training in infection control and had access to up-to-date policies, procedures and guidance to help inform their practice.

- Staff had access to Personal Protective Equipment (PPE). People confirmed that staff used this whilst attending to their personal care needs.

Learning lessons when things go wrong

- When something went wrong action was taken to ensure that lessons were learnt to help prevent the risk of these issues reoccurring. In one example a medication error had occurred. This had been identified by the registered manager who had consulted the GP to ensure the person's safety. This issue had been discussed with the staff during a team meeting so that learning from the incident could then be cascaded and shared.

Is the service effective?

Our findings

Effective – this means that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence

People's outcomes were consistently good, and people's feedback confirmed this. Legal requirements were met.

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

- ☐ Prior to people receiving a service, the registered provider completed an initial assessment of their needs. Assessments took account of information shared by the person and relevant others including health and social care professionals.
- Relevant information regarding best practice on how to meet people's needs was available in their care records.
- ☐ Staff delivered care effectively and in line with best practice which led to positive outcomes being achieved for people. People confirmed that staff were aware of their needs and provided them with appropriate care and support.

Staff skills, knowledge and experience

- ☐ Staff had been supported to undertake the training they needed to carry out their role effectively. The registered manager had undertaken all training that staff were expected to cover so that they could assess the effectiveness of this training.
- ☐ Staff competencies were assessed following training to ensure they applied their learning in practice. Team meetings were also used as an opportunity to discuss best practice and knowledge. For example, one team meeting had been used to discuss the Mental Capacity Act 2005 whilst another had been used to discuss best practice with regards to end of life care.
- ☐ All staff had been supported, or were being supported to complete nationally recognised qualifications in Health and Social Care.

Healthcare support

- ☐ People were supported to access support from health care professionals where needed. The registered manager had developed positive relationships with local health and social care professionals and contacted them for advice and support where needed.

Eating, drinking, balanced diet

- ☐ Staff had undertaken training in food hygiene which enabled them to prepare meals in a safe and hygienic manner.
- ☐ People's care records contained details of any specific needs and what action staff needed to take to help people maintain a healthy and balanced diet.
- ☐ People told us that staff were good at preparing food. One person had left a compliment for a member of staff, commenting on their ability to make "Perfect scrambled eggs".

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 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. In community based settings this requires authorisation by the Court of Protection. At the time of this inspection there was no one who required this level of support.
- ☐ Staff had received training in the MCA and discussions had taken place during team meetings about how the principles of the MCA should be applied to people using the service. Information was available in people's care records where people had a Lasting Power of Attorney (LPA) in place which enabled chosen delegates to make decisions on their behalf should they become unable to make a particular decision.
- ☐ People did not have capacity to make decisions, they were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service supported this practice
- ☐ At the time of the inspection there was no one who required information to be made available in alternative formats. However, the registered provider had processes in place to make this available should this be needed.

Is the service caring?

Our findings

Caring – this means that the service involved people and treated them with compassion, kindness, dignity and respect

People were supported and treated with dignity and respect; and involved as partners in their care.

Respecting and promoting people's privacy, dignity and independence

- ☐ People told us that staff treated them with kindness, dignity and respect. One person's relative commented, "Staff were concerned about [my relative] and went back after their work had finished and took them some milk and made sure they were all right." Another person commented, "Someone coming into your home is not 'normal' but this agency and their staff have made us so comfortable they are like an extension of us. We are a team."
- ☐ People's right to privacy and confidentiality was respected. Records containing personal information about people were stored securely in the main office. This was only accessible to authorised staff. Where information was stored electronically, this was password protected with passwords available only to authorised staff.

Ensuring people are well treated and supported

- ☐ Staff acted to protect people from social isolation. One family member told us how staff had, on occasion, taken their relative out for a coffee because they had loved to do this before falling ill. In another example a person described staff as a "life line", stating staff had taken them out for a meal when they had been going through a period of depression to help cheer them up. The person told us, "We have so many good times and laughs together". In another instance where a water main had burst in a local village, staff had identified the most vulnerable people in the community and had taken bottled water to them. This was kind and compassionate and demonstrated that staff had gone above and beyond in supporting people.
- ☐ People were treated with kindness and were positive about the staff's caring attitude. A compliment from one person's family member stated, "We wanted to send you our grateful thanks for the wonderful way in which you have looked after [relative] over the years [Staff] support to us as a family was also very much valued and appreciated by all of us." Another person's family member had left a comment on social media which stated, "Heartfelt thanks for the support and care Tattenhall Care continues to give to [relative]. You enable them to live at home and deal professionally, calm and compassionately with any crisis". Another person's family member stated, "[relative's] carers are wonderful and the difference they have made is unbelievable. I look forward to seeing them every morning and can't thank them and you (Registered manager) enough. You should be very proud of them."
- ☐ Comments received by the service from people and their relatives showed that the service provided support not only to people using the service, but also provided reassurance and comfort to their family members.
- ☐ Care records outlined information about people's life histories, important relationships and other things of interest. This information helped staff get to know the people they were supporting and helped the development of positive relationships. The registered manager also aimed to ensure that people were supported by the same staff to support the development of relationships and enhance the care that was

provided.

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

- People and their family members were signposted to other agencies that may be able to support them. One person commented, "The manager signposted us to other support agencies and benefits we may be entitled to, they didn't have to do that, they are just so thoughtful." Staff had access to a range of leaflets and information to share with people if they felt they needed this.
- People told us their views, wishes and feelings were considered by staff. People also commented that they felt they worked in "partnership" with the service. One person told us, "We are equal partners in care, that is down to the Tattenhall Local Care" and another person commented, "We are a team".

Is the service responsive?

Our findings

Responsive – this means that services met people's needs

People's needs were met through good organisation and delivery.

Personalised care

- ☐ People were empowered to make choices and have as much control and independence as possible, including in developing care and support plans.
- ☐ People each had a personalised care plan which outlined the care and support they required. This included information about their preferred daily routines. In one example a member of staff demonstrated a detailed account of a person's needs.
- ☐ People commented that they were happy with the care that was provided. They told us this matched their expectations. One person commented, "I don't know what we would have done without them".
- ☐ People told us that they had been involved in the development and reviewing of their care plans. They commented that they had been contacted by the service on a routine basis to ensure that they were happy with the support being provided.

Improving care quality in response to complaints or concerns

- ☐ People told us they knew how to make a complaint and were confident about approaching management with any concerns they may have. At the time of the inspection no complaints had been received.

End of life care and support

- ☐ The registered manager was an ambassador for 'Living Well, Dying Well' which is an organisation that provides resources for services around promoting a dignified death for people at the end stages of their life.
- ☐ No one using the service was receiving end of life care at the time of the inspection. However, end of life care training had been provided to staff so that they could provide effective support where required.

Is the service well-led?

Our findings

Well-Led – this means that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture

The service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Continuous learning and improving care

- ☐ Team meetings were used as an opportunity to share information about best practice.
- ☐ Where incidents occurred within the service this information was shared amongst staff to help prevent these issues from reoccurring.

Managers and staff are clear about their roles, and understand quality performance, risks and regulatory requirements

- ☐ The service was well-run and well-led. There was a clear management structure within the service and staff felt well supported by management.
- ☐ Quality monitoring processes effectively identified concerns and areas for improvement. Risks were identified through this process and appropriate steps were taken to mitigate these.

Plan to promote person-centred, high-quality care and good outcomes for people

- ☐ People told us that the service worked in partnership with them. They told us they felt involved and worked as part of a team with the service to meet their own outcomes.
- ☐ We found examples where staff had gone out of their way to meet people's social needs and had also acted to promote the wellbeing of vulnerable people in the community.
- ☐ Staff understood the vision and values promoted by the service. We observed examples where they had worked compassionately and kindly with people to promote their well-being. Since January 2018, 35 compliments had been received by the service which showed a high quality of care was being provided to people.

Engaging and involving people using the service, the public and staff. Working in partnership with others

- ☐ People informed us that the service involved them in the delivery of their care. They confirmed that they were contacted routinely by the registered manager to ensure they were happy with the service being provided.
- ☐ People confirmed they felt able to contact the registered manager with any issues and stated that they felt action would be taken if required.
- ☐ Staff meetings were held during which discussions took place regarding people's needs. Staff shared information regarding how they felt people's care could be improved, or any additional support they felt people needed.
- ☐ At the last inspection we spoke with a social care professional who gave positive feedback about the service. At this inspection the service showed that they continued to work in partnership with other professionals within the community.

- ☐ The registered provider contributed to the community. They provided us with evidence to show that they made charitable contributions which impacted positively on the community.