

Your Choice A and J Support Ltd

Your Choice A and J Support Ltd

Inspection report

Revive Healthy Living Centre
23 Roe Farm Lane
Derby
Derbyshire
DE21 6ET

Tel: 07971885928

Date of inspection visit:
11 July 2019

Date of publication:
30 July 2019

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 Choice A and J Support Ltd is a domiciliary care service. At the time of the inspection they had a contract in place to provide set periods of respite care to one person in their own home. The domiciliary care service operated from the provider's day care service; the day care service was not included in the inspection.

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

Steps had been taken to help ensure the person received safe care and risks from avoidable harm and abuse had been reduced. Risks relating to a person's healthcare needs and their care at home were identified and steps taken to manage these. Sufficient staff were planned to provide safe care and the provider checked to ensure staff who worked at the service were suitable to do so. Medicines were managed safely, and steps were taken to reduce the risks associated with infection. The provider reviewed care and looked to make improvements should they be needed.

Assessments covered all aspects of a person's health, care and well-being. Staff were trained and knowledgeable in the areas of care the person had been assessed as needing. Staff were supported in and felt confident in their job role. Staff followed nutrition and hydration plans to ensure the person's assessed needs were met. Information and advice from other healthcare professionals had been sought and followed by staff to ensure the person received effective care. The person was supported to have maximum choice and control of their life 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 respectful to the person. Staff involved them and their relative in their care and in making decisions. Staff promoted their choices and respected their privacy and promoted their independence.

Staff had a good understanding of the person's life histories and interests. They were supported to maintain their connections with their local community. Their communication needs were assessed and met. Staff were able to communicate well with the person when they communicated in ways other than verbally.

The provider had clear values and aimed to provide high-quality personalised care. Governance arrangements and audits helped the provider check on the quality and safety of services and identify any continuous learning and improvements. The service was run with an open and approachable management team. The person, their relative and staff were involved in the development of the service.

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

Rating at last inspection

This service was registered with us on 24 September 2018 and this is the first inspection.

Why we inspected

This was a planned inspection based on the date of registration.

We found no evidence during this inspection that the person was at risk of harm.

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 was safe.

Details are in our safe findings below.

Is the service effective?

Good ●

The service was effective.

Details are in our effective findings below.

Is the service caring?

Good ●

The service was caring.

Details are in our caring findings below.

Is the service responsive?

Good ●

The service was responsive.

Details are in our responsive findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-Led findings below.

Your Choice A and J Support 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. 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 team included one inspector.

Service and service type

Your Choice A and J Support Ltd is a domiciliary care agency. It provides personal care to one person in their own home for set periods of respite care.

The service had a manager registered with the Care Quality Commission; they were also the registered provider. 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.

Notice of inspection

This inspection was announced. We gave the service 48 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the provider and registered manager would be in the office to support the inspection.

Inspection activity started on 11 July 2019 and ended on 15 July 2019. We visited the office location on 11 July 2019.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. The provider was not asked to complete a provider information return prior to this inspection. 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. We took this into account when we inspected the service and made the judgements in this report.

During the inspection

We spoke with one relative whose family member used the service, about their experience of the care provided. We spoke with both directors, one of whom was also the registered manager and one who also worked as a member of care staff. We spoke with an additional member of care staff.

We reviewed a range of records. This included one person's care records and medication records. We looked at two staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including audits and staff training were reviewed.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We sought feedback from a healthcare professional who had worked with the service. We looked at policies, procedures and a risk assessment sent to us by the registered manager.

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 since the service was registered. At this inspection this key question has been rated as Good.

This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- Steps were taken to provide safe care and reduce the risks associated with abuse and discrimination. One relative told us they had no concerns about the care provided to their family member. Staff had been trained in how to identify potential abuse and what actions they should take to report any concerns; this included staff knowing about the provider's safeguarding and whistleblowing procedures.

Assessing risk, safety monitoring and management

- Risks relating to health care needs were assessed. Staff were knowledgeable in how to manage any health-related care needs and what steps to take to prevent risks associated with them. Risk assessments were in place for specific risks, for example risks associated with the use of oxygen.
- The registered manager sent us a home risk assessment for a forthcoming period of respite care. This helped to ensure risks related to care provided in a person's home environment had been assessed and actions identified to mitigate those.

Staffing and recruitment

- The provider had recruited a small team of staff; all of whom were previously known to the provider. This helped the provider be assured of staffs' suitability for their job role. Further checks were completed on staff before they worked at the service. The provider's knowledge of staff, in addition to other checks helped the provider employ staff who were suitable to work at the service.
- Sufficient staff had been planned to support any periods of arranged respite care. A relative and staff involved in providing the service told us the staffing arrangements worked well.

Using medicines safely

- The person was protected from the risks associated with medicines as steps to ensure medicines were administered and managed safely were in place. Medicines administration record (MAR) charts were completed to show medicines were given as prescribed.
- Medicines advice from relevant healthcare professionals had been obtained and reflected in care plans. A relative and staff told us arrangements were in place to ensure medicines were stored safely in the person's home.

Preventing and controlling infection

- Staff were knowledgeable on how to prevent and control the spread of infection. Staff told us they had supplies of gloves and aprons available to use to help prevent and control the spread of infection. Records

showed staff had been trained in this area.

Learning lessons when things go wrong

- No accidents or incidents had occurred whilst the service had been provided. The provider had a policy and procedure in place for staff to follow should any accidents or incidents need to be reported and staff were knowledgeable on this.
- Opportunities were taken to review the periods of respite care given to identify if anything could have been improved. This showed the provider looked to learn and make improvements when they could.

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 since the service was registered. At this inspection this key question has been rated as Good.

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

- The person's needs had been assessed by the registered manager before they received care. Assessments reflected the requirements of the Equalities Act to ensure any diverse needs, including those relating to their disability could be met. Assessments covered all aspects of the person's health, care and well-being. Care needs were clearly identified and planned, including any time specific care needed.
- Assessments contained information on family life and any hobbies and interests. This helped staff to know the person well and helped to ensure they were supported to follow any preferred routines.

Staff support: induction, training, skills and experience

- Staff were trained in areas relevant to the person's health and care needs and knew how to care for them. Specialist training was provided when required to help ensure care was effective.
- The staff team had previous experience of working in care and also knew the person they supported well.
- Staff had meetings with the provider where they could review their performance and identify any further support they needed. Staff told us they felt well supported and knowledgeable on the person's care needs.

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

- Nutrition care plans reflected the advice from specialist healthcare professionals who had assessed how to meet the person's nutritional and hydration needs. Staff were trained to provide the care required and they were knowledgeable on and followed the person's care plans to ensure effective care.

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

- Staff had worked with a variety of other healthcare professionals to provide consistent and effective care. Staff were knowledgeable on how to ensure the person's usual healthcare routines were followed.
- Care plans reflected information from community learning disability services on any specialist care required; this included how staff could monitor the person's health to help promote good health outcomes for the person. Information had been prepared to help promote positive care between different healthcare professionals should the person require any admission to hospital. There was clear guidance on when emergency healthcare should be obtained.

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.

- Processes were followed to ensure the person's capacity to make informed decisions was assessed. Best interests' decisions were made when appropriate should the person not have the capacity to make an informed decision.
- Staff had received training on the MCA. Staff were knowledgeable on the person's individual capacity to make day to day decisions and when best interest decision making processes were required to be followed.

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 since the service was registered. At this inspection this key question has been rated as 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

- A relative told us staff were always respectful and were kind. They told us they felt very confident that staff were caring. Staff told us how they helped to ensure the person they supported was reassured and relaxed with their care. Staff spoke fondly about the person they supported. Staff had been trained in equality and diversity and were knowledgeable about any diverse needs the person may have.

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

- Care plans were personalised and reflected the person's known views and preferences. Relatives told us they felt involved and supported to contribute to care plans so that they were comprehensive and personalised. Staff were knowledgeable about the person's preferences and could tell us about what they liked to do. Staff told us how they would always explain what they were doing to seek consent and the person's involvement in any activity.

Respecting and promoting people's privacy, dignity and independence

- A relative and staff all told us of how they supported a person with their independence. Staff told us how they would place their hand over the person's hand when involved in an activity such as art and craft to maximise their involvement.
- Staff told us how they maintained the person's dignity and respected their privacy. Staff gave us example of talking discretely and ensuring any personal care products were stored privately. Staff told us they were mindful to ensure privacy by closing nappies or curtains for personal 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 since the service was registered. At this inspection this key question has been rated as Good.

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

- A relative told us staff knew their family member very well. Staff we spoke with had detailed knowledge of the person, their likes and dislikes as well as their healthcare needs. Staff knew the person's favourite songs and films. One staff member told us they could pick up how the person wanted their hair done on any particular day because they understood the person's non-verbal communication.
- On a previous period of respite care staff had created opportunities for the person to enjoy social time and links to their local community by taking them to see one of their favourite films at the cinema.

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.

- Communication needs were assessed, and details of any communication needs were recorded. Staff were knowledgeable on these and told us how they used the person's body language to help them understand their needs.

Improving care quality in response to complaints or concerns

- The provider had a complaints process in place to ensure any complaints would be investigated and managed within a timely manner. No complaints had been made about the service. A relative told us they would have no concerns raising any issues with the provider if they did want anything investigating.

End of life care and support

- No one was receiving end of life care at the time of this inspection. However, the registered manager understood the need for end of life care planning should this be required. Where any advance decisions had been made, details of these had been clearly recorded in care plans.

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 since the service was registered. At this inspection this key question has been rated as 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

- The provider was clear about their role and aimed to provide high-quality care.
- Audits were completed to ensure medicines were managed in line with good practice. The registered manager told us they were able to regularly observe staff in their job roles and feedback to them about their performance in supervision meetings.
- Records of the person's care and records relating to the management of the service were accurate, up to date and comprehensive.

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

- A relative told us they were very satisfied with the care their family member received. The provider was clearly focussed on providing personalised care and worked to create an open and inclusive management culture where the person, their relative and staff felt included and welcome.
- A relative and staff told us they knew the registered manager well. Staff shared the view that they could approach the registered manager should they have any concerns.
- The registered manager understood the duty of candour and the policies and procedures that governed any investigations into complaints or shortfalls ensured these would be completed thoroughly and openly.

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

- A relative told us they felt fully involved in the planning and review of care provided to their family member. Records showed where a period of respite care had been reviewed with a relative. This looked at what had worked well and whether there were any changes or improvements that could be made before the next planned period of respite care.
- No faith or specific cultural needs had been identified for the current respite arrangements. However, the registered manager told us this would be something that would be included in any assessment of a person to ensure any diverse needs were understood and met.

Continuous learning and improving care; Working in partnership with others

- The registered manager completed reviews of any completed respite care to look at ways to continuously learn and improve care. They told us they also attended ongoing training in areas to help develop their own and the team's skills and knowledge.
- Staff meetings were held to share updates and reinforce good practice between the staff team.
- A range of health care professionals and their advice and guidance had been included in care plans for staff to follow to help achieve good healthcare outcomes for the person. Healthcare professionals had also been involved in providing training to staff to help them provide effective care.