

TLC Homecare 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 well-led?	Good

Summary of findings

Overall summary

About the service

TLC Homecare Limited is a domiciliary care service which provides personal care to people in their own homes. The service provides support to adults with a range of care and support needs, including older people and people living with dementia. At the time of our inspection there were 168 people using the service.

Not everyone who used the service received the regulated activity of personal care. CQC only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do receive personal care we also consider any wider social care provided. At the time of this inspection there were 131 people receiving personal care from the service.

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

People felt safe when receiving support from the service. Risks to people were assessed and managed well. Staff understood their responsibility to safeguard vulnerable people from abuse. People received safe and effective support with their medicines. There were suitable systems in place to control the spread of infections.

People were supported by staff they were familiar with and staff turned up to their care visits on time. People were complimentary about the service and the care they received. Staff were recruited safely to ensure they were suitable to work with vulnerable people. The provider used a variety of approaches to proactively recruit new staff, to ensure the service had enough staff available to meet people's needs.

The provider promoted a person-centred, caring culture. They monitored the service to help ensure it provided safe, high-quality care. People, their relatives and staff had opportunities to provide feedback about the service. Staff were well-supported in their roles and they enjoyed their jobs. The provider had close links with other social care professionals and community health services so they could work in partnership with these organisations.

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

Rating at last inspection and update

The last rating for this service was requires improvement (published 17 April 2019) and we identified a breach of regulation at that inspection. We subsequently completed a targeted inspection in November 2020. We found the service had improved and the provider was no longer in breach of any regulations, however, we did not re-rate the service at that time.

At this inspection we found the improvements made to the service had been sustained. The rating for this service has therefore improved to good.

Why we inspected

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

This report only covers our findings in relation to the key questions, 'is the service safe?' and 'is the service well-led?'. For those key questions not inspected, we used the ratings awarded at the last comprehensive inspection to calculate the overall rating. The overall rating for the service has changed from requires improvement to good. This is based on the findings at this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for TLC Homecare Limited on our website at 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 •
Is the service well-led? The service was well-led.	Good



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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 (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 Act.

Inspection team

This inspection was completed by three inspectors, an assistant 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 homes.

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 CQC 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 not a registered manager in post. The provider was in the process of recruiting a new manager.

Notice of inspection

We gave the service 48 hours' notice of the inspection. This was because we needed to be sure the provider would be in the office to support the inspection.

Inspection activity started on 15 November 2022 and ended on 16 November 2022. We spoke with people who used the service over the telephone on 15 November 2022. We visited the service's office and spoke with staff and relatives of people who used the service over the telephone on 16 November 2022.

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, professionals who work with the service 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 the information the provider sent us in the provider information return. 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 all this information to plan our inspection.

During the inspection

We spoke with 12 people who used the service and 13 relatives about their experience of the care provided. We spoke with 16 members of staff. This included the operations manager, office staff and care workers.

We reviewed a range of records. This included 5 people's care records and medication records. We looked at 5 staff files in relation to recruitment and support. A variety of records relating to the management of the service, including policies and procedures were reviewed.



Is the service safe?

Our findings

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

At our inspection in February 2019 we rated this key question requires improvement. At this inspection the rating has changed to good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- The provider had suitable systems in place to protect people from the risk of abuse. All staff were trained in their responsibility to safeguard people from abuse. They knew what action to take if they witnessed or suspected abuse.
- People told us they felt safe when being cared for by the staff. Comments from people included, "I do feel safe. I feel I could not have better care" and "I do feel safe. I could not manage without them." People's relatives had no concerns about their family member's safety.

Assessing risk, safety monitoring and management

- Risks to people had been assessed and their care plans contained guidance for staff to follow so they could reduce risks to people. This included risks associated with people's mobility, nutrition and hydration needs, skin integrity and any risks associated with their home environment and equipment.
- When people required the support of staff to mobilise, their care records contained very detailed guidance about how staff could safely support people and how any equipment should be used. This helped to protect people from the risk of injury.

Staffing and recruitment

- The provider used robust recruitment practices when employing new members of staff, to check they were suitable to work with vulnerable people. In response to workforce pressures following the COVID-19 pandemic, the provider was using a variety of different approaches to proactively recruit new staff, to help ensure the service had enough staff available.
- There were enough staff employed to meet people's needs. Staff were allocated enough time during each care visit to meet people's needs effectively. People told us staff stayed with them for the correct length of time and provided all the care they needed during each visit.
- People usually received support from a consistent staff team which promoted good continuity of care. People's comments included, "I have a group of carers who come in and I am familiar with them all now" and "My care is split between three care workers and they are all very nice."

Using medicines safely

- Medicines were managed safely. Staff supported people to take their medicines as prescribed and people were happy with the support they received with their medicines.
- Staff were trained in how to manage medicines safely. Their competence to manage medicines was kept under review to ensure their skills and knowledge remained up to date.
- People's care plans and medicines records contained clear information, so staff knew what support

people needed with their medicines and when. This included detailed information about how to safely support people with medicines prescribed on a "when required" (PRN) basis.

Preventing and controlling infection

- There were systems in place to support staff to control the spread of infection. Staff completed training in respect of infection prevention and control, and they had access to adequate supplies of personal protective equipment (PPE).
- People felt protected from the spread of infection. They told us staff wore PPE appropriately.

Learning lessons when things go wrong

• Accidents and incidents were managed appropriately. Staff knew when and how to report relevant events so action could be taken to address any concerns. Senior staff reviewed information about any accidents and incidents to ensure enough action had been taken to reduce the risk of a similar event occurring.



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 inspection in February 2019 we rated this key question requires improvement. At this inspection the rating has changed to 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; 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 service had a person-centred, caring culture and the care people received met their needs and outcomes. The care planning system implemented by the provider meant people had very clear, personcentred care plans which supported staff to get to know people well.
- Staff morale was positive. They told us they were treated well, and they enjoyed their jobs. Comments from staff included, "It's brilliant [working here]. I love it. They are really supportive, and they listen to you" and "It's one of the best jobs I've ever had. I never get up in a morning and think I don't want to go to work."
- The provider was open, transparent and honest when any accidents or incidents occurred, in accordance with the duty of candour. We advised the provider to review their policy in respect of the duty of candour to ensure it contained a clear process for staff to follow when any relevant incidents occurred.

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

- Staff were clear about their roles and responsibilities. They received enough support from the management team to deliver a good quality service.
- The service did not have a manager registered with CQC at the time of this inspection, however, the provider was proactively recruiting a new manager and the service was being effectively supported by an operations manager.
- There were systems in place to monitor how the service was being delivered, to help ensure people were receiving safe, good quality care. This included monitoring of the timeliness of care visits, the duration of those visits and whether people were receiving the care they needed.

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

- People, their relatives and staff had opportunities to give feedback about the service. People told us the office staff were always available if they needed to contact them about their care. A relative commented, "Communication with the office is easy."
- People and their relatives were encouraged to provide feedback about the service via the compliments and complaints process, and during reviews of their care. When feedback had been provided, this had been shared with relevant staff members and acted on.
- Staff told us they were listened to when they shared any ideas about how to improve the service. Staff

were confident any concerns or issues they raised would be dealt with appropriately by the management team.

Working in partnership with others

• The provider had close links with other social care professionals and community health services so they could work in partnership with these organisations.