

Life Plan Solutions Limited

Home Care Assist

Inspection report

4 Pitgreen Lane
Newcastle
ST5 0DB

Date of inspection visit:
09 March 2020
10 March 2020

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01 April 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

Home Care Assist is a domiciliary care service providing personal care to 10 people in their own homes at the time of the inspection.

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

People were supported by safely recruited staff, who had the skills and knowledge to provide effective support. There were enough staff available to provide consistent care and to meet people's needs. Medicines were managed safely, and people were protected from the risk of infection.

Effective care planning and risk management was in place which guided staff to provide support that met people's needs and in line with their preferences. People were supported with their nutritional needs and advice was sought from healthcare professionals which was followed to ensure people's wellbeing was maintained.

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.

People were supported by caring and compassionate staff who promoted choices in a way that people understood. This meant people had control and choice over their lives. Staff provided dignified care and respected people's privacy.

People and relatives were involved in the planning and review of their care. Staff used care plans to ensure they provided support in line with people's wishes. This ensured people received personalised care in line with their preferences and diverse needs.

Systems were in place to monitor the service, and improvements were in progress to ensure lessons were learnt when things went wrong. There was an open culture within the service, where complaints were acted on and improvements made. People and staff could approach the management team who acted on concerns raised to make improvements to the way care was delivered.

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 25 March 2019, and this is the first inspection.

Why we inspected

This was a planned inspection.

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.

Home Care Assist

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 was carried out by one inspector.

Service and service type

This service is a domiciliary care agency. It provides personal care to people living in their own homes.

The service had a manager registered with the Care Quality Commission. 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

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 or registered manager would be in the office to support the inspection.

Inspection activity started on 09 March 2020 and ended on 10 March 2020. We visited the office location on 10 March 2020.

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. The provider was not asked to complete a provider information return prior to 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. We used all of this information to plan our inspection.

During the inspection

We spoke with six people who used the service and four relatives about their experience of the care provided. We spoke with eight members of staff including the provider, registered manager, care co-ordinator, field care supervisor and care workers. We also received feedback from one professional.

We reviewed a range of records. This included two people's care and medications 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 were reviewed.

After the inspection

The registered manager forwarded a copy of the actions they had taken as a result of the inspection feedback.

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.

Systems and processes to safeguard people from the risk of abuse

- People told us they felt safe with staff who visited them. One person said, "The staff make me feel really comfortable. I have no concerns with the way I am treated."
- Staff understood how to safeguard people from harm and their responsibilities to recognise and report suspected abuse.
- Systems and processes were in place to ensure people were safeguarded from the risk of harm. These were followed in practice by staff and the registered manager.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- People were supported to lower their risks. One relative said, "The staff are very good. They all make sure her skin is looked after and my relative is clean and comfortable."
- Staff displayed detailed knowledge of people's risks and how they needed to support them to remain safe.
- Risk assessments and care plans had been devised, which ensured staff had guidance to follow to support people safely.
- Incidents were analysed by the registered manager to ensure appropriate action had been taken to lower the risk of further occurrences. These were discussed with staff to ensure learning was taken and improvements were made to people's care.

Staffing and recruitment

- People told us there were enough staff to support them in a timely way. One person said, "I have never had any missed calls and if staff are running a bit late, they let me know." A relative said, "The staff are very punctual. We have never had any issues with missed visits."
- Staff told us they were given enough time to support people in an unrushed way. One staff member said, "Staffing has improved, and we are visiting the same people so they know us better. I know the registered manager is always recruiting new staff. We all pull together and help out if needed too."
- There was a system in place to ensure people continued to receive a service when staffing levels had changed.

Using medicines safely

- Medicine Administration Records (MARs) were used to show when staff had supported people with their medicines and creams. Although people told us staff supported them with their creams, and staff explained how they supported people, the application of creams had not been consistently recorded on care plans. The registered manager acted on the feedback immediately.
- People told us staff supported them with their medicines and topical creams. One person said, "The staff remind me to take my medicines and they help me to put cream on which keeps my skin in good condition."

- Staff told us they were trained in the administration of medicines, and competency assessments were carried out to ensure the medicine training received was being used by staff in practice.

Preventing and controlling infection

- People told us staff used aprons and gloves when they provided support.
- Staff explained how they followed infection control guidance and ensured personal protective equipment (PPE) was used when they supported people such as; gloves and aprons. This meant people were protected from the spread of infection.

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.

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

- People and relatives told us they had been involved in the assessment of their needs before they used the service. One person said, "We talked through what I needed before I had any calls, so they knew what I wanted help with."
- Care plans had been developed from the assessments and contained details of people's diverse needs and preferences. This included the characteristics under the Equality Act 2010, such as age, disability and religion.

Staff support: induction, training, skills and experience

- Staff told us they had an induction before they started to provide care and regularly received training to carry out their role. One staff member said, "The training has improved a lot and there is more structure to the way we are trained."
- Competency checks, and observations were carried out to ensure staff understood the training received and people were supported effectively.
- Staff felt supported in their role and received supervisions to ensure any issues or areas of development were discussed.

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

- People told us staff supported them with the preparation of their meals and always ensured they had enough to drink. One person said, "The staff always leave me a drink before they leave."
- One person told us staff had changed the time of their visits, so they were able to eat at the same time as their family. They said, "It is really important we eat together so the call times were changed which has made me very happy."
- Staff explained how they supported people to manage their nutritional risks and there were care plans for staff to follow, which confirmed what staff had told us.

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

- People told us they were supported to access healthcare professionals. One person said, "They [staff] helped me to arrange a review of my medicines with the doctor."
- The records we viewed confirmed staff worked with other agencies to ensure people's health and wellbeing was monitored and maintained.
- There was a handover system in place, which ensured staff provided consistent support that met people's changing needs. One staff member said, "We have a handover where we get an update on each person

before we visit so we know if there have been any changes to the way we support them."

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. We checked whether the service was working within the principles of the MCA.

- People told us staff gained their consent before they provided support. One person said, "The staff are all very good and ask what I need. They respect me and I feel comfortable telling them what I need and how I want it doing."
- Staff and the registered manager had a good understanding of their responsibilities which ensured people were supported in their best interests and in line with the MCA.

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 told us staff were kind and caring towards them. One person said, "The support I have received from staff has really made a difference to me. I feel better and my mental health has really improved. They are all brilliant" Another person said, "The staff are caring and make me feel comfortable."
- Relatives told us staff were compassionate when supporting their relatives, which was important for them. One relative said, "I am absolutely delighted with the staff. They show great empathy towards my relative and I can't fault them. [Relative's name] looks forward to seeing them [staff] and they have made such a bond with them."
- Staff understood the importance of respecting people's diverse needs when they provided support to ensure people received individualised support that respected their diversity.

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

- People told us staff asked them what they needed before they provided support. One person said, "The staff always ask me what I need and if I don't want a specific type of support, they listen to me. I don't feel pressured into doing anything I don't want to."
- Staff understood people's individual methods of communicating and support plans were in place which gave staff guidance on the most effective way to help people express their views.

Respecting and promoting people's privacy, dignity and independence

- People felt respected by staff who promoted their privacy and dignity. One person said, "All the staff treat me in a dignified way and make sure I'm not embarrassed when they are helping me to wash."
- People told us staff helped them to maintain their independence by ensuring they gave them time to do things for themselves and staff asked what they needed help with.
- Staff explained the importance of supporting people in a way that met their needs and encouraged their independence.

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.

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

- People were involved in the planning of their care which ensured their preferences were met. One person said, "I have always felt involved. The manager came and asked me what I needed and then came again a few weeks later to make sure I was happy."
- People and relatives told us they had regular staff who they knew well and provided support in line with their preferences. A relative said, "We were asked what things were important to my relative when receiving care, which they followed. My relative prefers female staff and they have listened to us."
- People were involved in the review of their care, which meant people's needs were discussed and changes implemented when required.
- Care plans contained details of people's preferences and staff had guidance to follow to ensure people were supported in line with their wishes.

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.

- Staff had guidance to follow to enable them to communicate with people effectively and explained how they promoted individual people's way of communicating.
- At the time of the inspection some improvements were needed to ensure the provider had considered how to ensure people were provided with information in an accessible format.
- The registered manager had acted immediately to ensure there were systems in place to provide information that was accessible should anyone need this. For example, the registered manager told us they would use a text service, or letters in large print if needed and had looked at how other digital communication methods could be utilised if required.

Improving care quality in response to complaints or concerns

- People told us they knew how to raise a complaint and felt any issues would be dealt with. One person said, "I would speak to the office, they are always available and have sorted things out for me in the past."
- There was a system in place to ensure complaints received at the service were investigated and responded to in line with the provider's policy.

End of life care and support

- The service was not providing end of life care at the time of the inspection. However, the registered

manager explained how they would gain people's wishes if needed.

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.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- The registered manager was in the process of reviewing the systems in place to ensure all areas of the service were monitored. For example; to ensure MAR's and daily records were consistently returned to the office to enable monitoring to take place. These systems were still in the process of being imbedded at the time of the inspection.
- Audits that had been carried out contained details of the actions taken to ensure improvements were made and lessons were learnt.
- The registered manager understood their responsibilities of their registration with us. They had notified us of events that had occurred at the service.
- The provider had systems in place to ensure the service was working in line with regulations and the registered manager was undertaking their responsibilities as required.
- There was an action plan in place and regular meetings were held to ensure progress was being made to continually improve the service provided.

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

- People and relatives spoke positively about the registered manager. One person said, "The manager is very helpful if I ever need anything." A relative said, "The manager is very nice, they came out to see if we are okay."
- Staff felt supported by the registered manager. They told us they felt valued in their role and improvements had been made to the service by the registered manager.
- The ethos of the service was to provide person centred care to people in a caring, dignified and respectful way. Staff understood these values and followed them in practice. This was confirmed by the positive feedback we received from people and relatives.

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 registered manager understood their legal responsibilities in relation to duty of candour. They were open and responsive to feedback and were continually looking at ways to improve the service.

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

- People and relatives felt involved in the service. Feedback was gained through telephone monitoring calls and reviews. The registered manager analysed this information and used this to make improvements to people's support.
- Staff were encouraged to provide feedback during handovers, staff meetings and supervisions. Staff told us the management were always available, approachable and listened to their suggestions.

Continuous learning and improving care

- Staff told us the registered manager encouraged them to develop their skills and knowledge to assist them to support people effectively. One staff member said, "[Registered manager's name] is very approachable. They are supportive and their feedback is always constructive. We are open and learn from each other."
- The registered manager ensured they provided care in line with national guidelines through newsletters and updates. They attended a local managers forum to share and gain practice with other adult social care providers.

Working in partnership with others

- The registered manager had developed good working relationships with a range of professionals to ensure people received consistent care and their needs were reviewed when needed.
- One professional told us their experience with the service had been positive. They said, "The management staff and care staff are all friendly and pro-active. From the experience I have had, I have already recommended the service to colleagues."