

Northern Home Care Ltd

# Northern Home Care Ltd

## 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

### About the service

Northern Home Care is a domiciliary care service providing personal care to people living in their own homes. At the time of the inspection five people were receiving care.

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

People were well protected from the risk of abuse or neglect and told us the service helped them to feel safe. Staff had completed training in adult safeguarding and understood their responsibilities to report concerns. Appropriate checks were completed before new staff started work. Staff reported incidents and accidents in sufficient detail to aid analysis and reduce risk.

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 to maintain a healthy diet in accordance with their needs and preferences. Northern Home Care worked with other agencies to provide care which had a positive impact on people's health and wellbeing. When people were unwell staff acted promptly to ensure that they received appropriate care and treatment. People were involved in discussions about their care and their outcomes were good. Staff were given training in accordance with recognised standards for care staff. Staff told us that they felt well supported.

People and their relatives spoke very positively about the caring nature of staff. They told us that they were always treated well by staff and were consulted about their care. Staff were clear about their responsibilities in relation to equality and diversity and supported people appropriately. People were encouraged to comment on the provision of care and were actively involved in the decision-making process through discussions with staff and regular meetings. Important decisions were recorded in care records and reviewed. Staff explained how they supported people with their personal care needs in a discrete and sensitive manner.

We saw evidence that people's individual needs and preferences were considered as part of the care planning process. We also saw that needs and preferences were reflected in the way care was provided. Staff understood the need for effective communication and met the requirements of the Accessible Information Standard (AIS). People understood the complaints procedure and were provided with a written copy. The service had not received any recent complaints. The service did not routinely support people receiving end of life care.

Each of the staff we spoke with understood their role and responsibilities. Throughout the inspection the comments and behaviours of the registered manager and staff consistently reflected their commitment to a person-centred service. It was clear that this had resulted in positive outcomes for people. Staff told us that they would not hesitate to inform senior staff of a concern or error. We saw evidence errors and performance issues had been recorded, reported and addressed appropriately. The service made effective use of audits,

reports and other forms of communication to monitor and improve the safety and quality of care. Partnerships had been developed with other services in the area to improve outcomes for people.

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 (published 17 February 2017).

#### Why we inspected

This was a planned inspection based on the previous rating.

#### 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.

# Northern Home Care 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

This inspection was conducted 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 a short period of notice for the inspection because we needed to give people the opportunity to meet with the inspector in their own homes.

Inspection activity started on 14 August 2019 and ended on the same day. We visited the office location on 14 August 2019.

#### What we did before 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. 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. This information helps support our inspections. We used all this information to plan our inspection.

#### During the inspection

We spoke with two people who used the service and three relatives about their experience of the care provided. We spoke with three members of staff including the registered manager and two care workers.

We reviewed a range of records. This included five people's care 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 policies and procedures were reviewed.

After the inspection

We continued to seek clarification from the provider to validate evidence found.

# Is the service safe?

## Our findings

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

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were well protected from the risk of abuse or neglect and told us the service helped them to feel safe. We asked if people had any concerns about the safety of the service they received. In response one person said, "The girls (care workers) are spot on from A to Z." While another person said, "No, certainly not. It's safe."
- Staff had completed training in adult safeguarding and were aware of their responsibilities to report any concerns.
- Systems for reporting concerns were robust and aligned to the requirements of the local authority and the Care Quality Commission. We were provided with an example of how staff had acted promptly to report concerns.

Assessing risk, safety monitoring and management

- Systems and processes were in place to reduce the risk of harm.
- Risk assessments were completed in relation to a range of health conditions and environments. Assessments were sufficiently detailed and regularly reviewed.
- Risk was assessed as part of the management of the service and effective measures had been taken to reduce risk and maintain a safe service. For example, one person developed behaviours which placed themselves and care staff at risk. The level of risk was assessed as unsafe and contact was made with the commissioners of the service to identify alternative services which could better meet the person's needs.

Staffing and recruitment

- Safe recruitment practices were used to ensure that new staff were suited to working with vulnerable people. Appropriate checks were completed before new staff started work.
- Staff were deployed in sufficient numbers to meet people's needs and provide safe care. Comments included, "We have the same carers. They're always on time."

Using medicines safely

- None of the people using the service at the time of the inspection required support with their medicines.
- We discussed the relevant standards and requirements for staff training with the registered manager. They confirmed that staff would be trained and their competency assessed before being asked to administer medicines.

Preventing and controlling infection

- Staff understood the need for effective hygiene standards to reduce the risk of infection.
- Staff were provided with personal protective equipment (PPE) and used it appropriately when providing

personal care.

#### Learning lessons when things go wrong

- Staff were required to report incidents and accidents in sufficient detail to aid analysis and reduce risk.
- Information relating to a series of incidents had been used effectively to protect the person and staff from the risk of harm.



# 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.

At the last inspection this key question was rated as Good. At this inspection this key question remained the same. This meant people's outcomes were consistently good, and people's feedback confirmed this.

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

- Northern Home Care worked well with other agencies to provide care which had a positive impact on people's health and wellbeing. We were provided with examples where the service had worked flexibly with commissioners and healthcare professionals to ensure that people's independence was improved. In one example a person had been supported to secure a specialist piece of equipment which meant they could spend more time out of bed.
- When people were unwell staff acted promptly to ensure that they received appropriate care and treatment. One person said, "[Staff name] came last night when I had a [medical concern]. She came while we were waiting for the district nurses to come." Their relative said, "She stayed and made sure [person] was comfortable after they'd gone."

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

- People were supported to maintain a healthy diet in accordance with their needs and preferences.
- People confirmed that staff knew their preferences and prepared meals and drinks accordingly.

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

- The registered manager was aware of the relevant standards and guidance and used this effectively to assess people's needs and plan their care.
- People were involved in discussions about their care and their outcomes were good. One person said, "It meets every need I require and more."

Staff support: induction, training, skills and experience

- Staff were given an induction in accordance with recognised standards for care staff. They completed a basic training programme and worked with a more experienced member of staff (shadowing) to ensure they were competent as part of their induction. One member of staff commented, "I shadowed for a while. I did training before-hand. It made me feel confident."
- Staff were required to refresh their training annually and completed specialist training as required. A member of staff said, "I've had the mandatory training. I have one client who has seizures. I have discussed it with [a relative] and [their] nurse. We go through that on a regular basis."
- Staff told us that they felt well supported. We were provided with personal examples when the provider had been supportive and flexible. One member of staff was being supported with needs relating to her

pregnancy.

- Records indicated that staff received regular group and individual supervision.

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 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.

- Staff had completed training in relation to the MCA and understood their responsibilities.
- The service was working in accordance with the principles of the MCA. People were asked for consent and given choices in relation to their care and other important decisions.

# 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.

At the last inspection this key question was rated as Good. At this inspection this key question remained the same. 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 and their relatives spoke very positively about the caring nature of staff. They told us that they were always treated well by staff and were consulted about their care. Comments included, "Very caring. Can't say any more than that. [Staff do] more than they need to really. They don't just look after me they look after [relative]," and, "They treat me as friend and I feel they are my friends. The attitude is spot on."
- We saw a number of examples where staff spoke to people and about people with kindness and respect throughout the inspection.
- Staff were clear about their responsibilities in relation to equality and diversity and supported people appropriately.

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

- People were encouraged to comment on the provision of care and were actively involved in the decision-making process through discussions with staff and regular contact with the registered manager.
- People told us staff discussed decisions with them and offered choices before providing care. One person told us, "They managed my time out of bed. It's working well for me. I was really poorly, but I feel I've grabbed every day with delight."
- Important decisions were recorded in care records and reviewed.
- Most people had capacity to represent themselves or had a family member to act as an advocate. In some cases, staff had supported people to access an independent advocate.

Respecting and promoting people's privacy, dignity and independence

- People spoke positively about the way in which staff respected their rights to privacy and dignity in all aspects of their care.
- Staff explained how they supported people with their personal care needs in a discrete and sensitive manner. Staff told us how important this was to people. The registered manager shared a specific example and explained how staff supported people's right to privacy at all times.

# Is the service responsive?

## Our findings

Responsive – this means we looked for evidence that the service met people's needs.

At the last inspection this key question was rated as Good. At this inspection this key question remained the same. This meant people's needs were met through good organisation and delivery.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control

- We saw evidence that people's individual needs and preferences were consistently considered as part of the care planning process. We also saw that their needs and preferences were reflected in the way care was provided. For example, one person told us how the timing of their calls had been changed at short notice to allow them to spend more time with visiting relatives.
- Staff knew people's personal histories and their likes and dislikes. For example, one care record included reference to a favourite author and a preference for the use of a piece of equipment. They used this information to hold conversations and to suggest activities. However, it was clear that staff knew more about people and their needs than was recorded in some care records. We discussed this with the registered manager who made a commitment to add more information to the records.

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 understood the need for effective communication and met the requirements of the AIS.
- Important information was made available in different ways to help people understand and to promote their involvement. For example, staff were aware that one person with a hearing impairment didn't always wear their hearing aids. They made sure they always faced the person and spoke clearly to aid their understanding.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them.

- Northern Home Care was primarily commissioned to provide personal care. However, we were provided with examples of staff supporting people to engage in meaningful and appropriate activities. This included activities within their own homes and local communities.
- Staff clearly understood the importance of supporting people to develop and maintain relationships. Contact details and other relevant information was kept in care records and staff ensured that relatives were kept informed in accordance with people's wishes.

Improving care quality in response to complaints or concerns

- The service dealt with complaints in accordance with their own policy and best-practice guidance.
- None of the people that we spoke with said that they had made a complaint recently. They each said that they would feel comfortable raising any issues with any member of staff.

#### End of life care and support

- The service did not routinely support people receiving end of life care. However, the registered manager confirmed they would record people's end of life wishes in care files as appropriate.

# 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 the last inspection this key question was rated as Good. At this inspection this key question remained the same. 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

- There had been no recent notifications to the Commission, but the registered manager understood their responsibility to submit notifications regarding important events.
- Each of the staff we spoke with understood their role and responsibilities.
- The registered manager told us how they worked as carer and used the opportunity to assess performance and improve practice.

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

- Throughout the inspection the comments and behaviours of the registered manager and other staff consistently reflected their commitment to providing person-centred services. It was clear that this had resulted in positive outcomes for people.
- People using the service and staff spoke about their involvement in important decisions. For example, the recruitment and introduction of new staff.

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

- There had been no recent occasions when the service had to act on its duty of candour. However, it was clear from conversations and audit processes that openness and honesty were expected of all staff.
- Staff told us that they would not hesitate to inform senior staff of a concern or error.
- The registered manager provided examples of how they had supported staff when concerns had been identified. A member of staff said, "In a very difficult situation we managed to deal with it in an appropriate way for the person and the team. I'm quite proud of that. We managed to come through it and help the client as much as we could."

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

- All staff prioritised communication with people using the service and performed to a high standard.
- The registered manager spoke with people regularly and issued an annual survey. The results of the most recent survey were very positive. Where people were unable to complete the survey due to the nature of their health conditions, discussions and observations were used to assess their satisfaction.

#### Continuous learning and improving care

- System, processes and paperwork were appropriate and sufficient for the size of the service. However, the registered manager told us how they were keen to develop the service. We discussed the potential limitations of current systems and practice in relation to more complex packages of care and larger numbers of service users and staff. Following the inspection, the registered manager provided an action plan which sought to address any limitations and improve safety and quality.
- The registered manager demonstrated how they were making use of on-line and local resources to further develop the service.
- Lessons learnt from incidents and accidents were shared with staff to improve practice.

#### Working in partnership with others

- Additional partnerships had been developed with other services in the area to improve outcomes for people. This included effective working relationships with social and healthcare colleagues.
- The registered manager explained how partnerships were managed to ensure that the service only accepted referrals which could be safely managed.