

TLB 24/7 Healthcare Ltd

TLB24/7 Healthcare Ltd - DCA

Inspection report

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19 July 2023

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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

TLB24/7 Healthcare Ltd is a domiciliary care agency and provides personal care to people living in their own homes. At the time of our inspection there were 161 people receiving care and support.

Not everyone who used the service received personal care. CQC only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do, we also consider any wider social care provided.

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

There were quality monitoring systems in place, which were effective. They had identified areas for improvements in documentation. For example, medicine management and recruitment. At the time of our inspection the provider was implementing new systems, staff training and competence checks to ensure new systems were embedded into practice.

We have made a recommendation regarding governance systems.

People received safe care and support that met their needs. People were happy and felt safe. One person said, "I am quite happy with them [staff]. They are lovely, and I do mean that, and they will do anything for you. They are very friendly." Staff understood risk management and medication was given as prescribed. Staff received training and competency assessments.

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. Staff were aware of what actions to take to safeguard people from the risk of abuse. The registered manager kept a record of safeguarding concerns and monitored the outcome. Accidents and incidents were analysed and evidence to show what actions had been taken to mitigate future incidents.

People, relatives health care professionals spoke very highly of the management team and felt they were approachable, listened and resolved any issues immediately. Staff told us they worked well as a team and were supported.

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

Rating at last inspection

The last rating for this service was requires improvement (published 14 August 2021) and was in breach of regulation. The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection we found improvements had been made and the provider was no longer in breach of regulation.

Why we inspected

This was a planned inspection.

This was a focused inspection. For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating. The overall rating for the service has changed from requires improvement to good based on the findings of this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for TLB24/7 Healthcare Ltd 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.

<p>Is the service safe?</p> <p>The service was safe.</p> <p>Details are in our safe findings below.</p>	<p>Good ●</p>
<p>Is the service well-led?</p> <p>The service was well-led.</p> <p>Details are in our well-led findings below.</p>	<p>Good ●</p>

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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 Health and Social Care Act 2008.

Inspection team

The inspection was carried out by 1 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

TLB24/7 Healthcare Ltd is a domiciliary care agency. It provides personal care to people living in their own houses and flats.

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 the Care Quality Commission 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 a registered manager in post.

Notice of inspection

We gave short notice of the inspection as we required information to be shared with people prior to contacting them. Inspection activity started on 21 June 2023 and ended on 19 July 2023. We visited the location's office on 6 July 2023.

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. We used the information the provider sent us in the provider information return (PIR). 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 8 people who used the service and 12 relatives about their experience of the care provided. We spoke with 11 members of staff including the registered manager, care manager, care workers and office staff. We also received feedback from 5 health care professionals.

We reviewed a range of records. This included 5 people's care records, multiple medication records, staff files in relation to recruitment and staff supervision and quality monitoring records.

Is the service safe?

Our findings

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

At our last inspection 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.

Assessing risk, safety monitoring and management

- Risks associated with people's care had been identified. Care plans detailed management of risks, enabling people to be as independent as possible. One person said, "The staff encourage me to be independent, I can get out of bed on my own and they [the staff] let me although it takes me a little bit longer." Another person said, "If there is anything at all staff are not sure of, they ring the office immediately for advice."
- Staff knew people well and understood the need to manage risk to maintain safety. Staff said if they had any concerns they reported it to the office.

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 MCA 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 Mental Capacity Act (MCA). When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty.

- We found the service was working within the principles of the MCA and if needed, appropriate legal authorisations were in place to deprive a person of their liberty.

Using medicines safely

- Medication systems were in place to ensure safe management of medicines.
- People received their medicines as prescribed. The provider had identified some areas for improvement as part of their quality monitoring and were in the process of implementing new documentation. Following our site visit the provider confirmed the new systems had been implemented, staff had received training and competency checks were arranged.
- Staff had completed medicines training and been assessed as competent to administer medicines. Relatives said medication was given safely. One relative said, "[Name] has dementia and heart failure and are struggling to get out. The staff give them their medication and make sure they take it. Any problems they ring me immediately."

Staffing and recruitment

- Recruitment practices were safe. The provider's recruitment policy helped them recruit suitable staff ensuring all pre-employment checks were completed. This included the Disclosure and Barring Service (DBS) checks. DBS checks provide information including details about convictions and cautions held on the Police National Computer. This information helps employers make safer recruitment decisions.
- The staffing levels were appropriate. People told us staff were lovely. Most relatives were very satisfied with the care staff provided. One relative said, "I am very confident and satisfied. I have met them [staff] and I feel confident they [relative] are being well looked after in their hands." However, relatives had concerns about meal provision, that staff did not always know how to use the microwave or cooker. This was discussed with the registered manager who assured us all staff received the appropriate training on induction. The registered manager agreed to follow this up and ensure all staff received further training if required.
- Some staff felt there was times when they didn't have enough time between calls. We were shown the call log which detailed start and end time of call, this clearly showed travel time. People told us staff always turned up and were predominantly on time. One person said, "They [staff] come 4 times a day and always on time."

Preventing and controlling infection

- Infection, prevention, and control (IPC) systems were in place to ensure safety.
- Staff understood IPC and the importance of adhering to protocols. People told us staff were always well presented in uniform and washed their hands. One person said, "They [staff] arrive in uniform and put aprons and gloves on when they come. They are always clean."

Learning lessons when things go wrong

- The provider had a system in place to record and analyse accidents and incidents. They were reviewed and monitored by the registered manager to ensure lessons were learnt.

Systems and processes to safeguard people from the risk of abuse

- The provider had a system in place to safeguard people from the risk of abuse.
- The registered manager kept a record of any safeguarding concerns and could evidence issues were reported to the safeguarding authority.
- Staff we spoke with told us they received training in safeguarding and could explain the providers safeguarding procedure.
- People we spoke with told us they felt safe. One person said, "I feel safe, I have built up a relationship with the staff and management. I have had them for 6 years."

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 last inspection 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

Continuous learning and improving care.

At our last inspection the provider had failed to ensure governance systems were effective. This was a breach of regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 17.

- There were quality monitoring systems in place that were effective. Areas for improvement had been identified as part of the providers audits. Many areas had been improved with a new electronic system and more robust audits. The management team were in the process of implementing new documentation regarding medicine management and recruitment as shortfalls in the systems had been found.
- The new documentation was provided to us following our site visit. The registered manager also confirmed staff had received training, and competency checks were being carried out, to ensure staff were completing the new paperwork correctly. The new systems provided a comprehensive and robust audit trail.

We recommend the provider monitors the newly implemented documentation to ensure it is embedded into practice.

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

- people received person-centred care, which in turn promoted a positive culture. People told us staff were courteous and polite, respected them and their home. One person said, "They [staff] always knock on the door and shout 'hello' as they enter. The 2 main carers I have are very respectful."
- Health care professionals praised the service and said they empower their clients to achieve good outcomes. One professional said, "I have observed carers directly supporting my client on several occasions. The carers are warm and caring and polite, they have brought a bit of fun to the client's day. They have been asked really difficult questions by the client and have shown real skill at answering in an honest way which did not upset the client." Another professional said, "The care workers go above and beyond."

Managers and staff being clear about their roles, and understanding quality performance, risks, and regulatory requirements; 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 was clear about their role and understood their responsibilities. There was a system in place to ensure the registered manager and provider was open and honest when things went wrong.
- People, relatives, and staff spoke highly of the management team, felt they were approachable and listened. Relatives told us they were kept informed of any issues or concerns. One relative said, "They [office staff] phone to check if we are happy with what they are doing." Some relatives told us they did not contact the office, but they always spoke with the care workers if there were any problems and it was resolved.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- The provider had a system in place which allowed people, the public and staff to share their comments and suggestions about the service. Relatives told us they were frustrated with the electronic daily records, as they could not access them. The registered manager was working with their service provider to ensure people and relatives could access the records electronically on their mobile devices. If this could not be resolved they told us they would move providers.
- The management team and staff worked with other professionals to ensure people received appropriate care and support.
- Feedback from health care professionals was extremely positive. One professional said, "Any issues that have arose the care coordinator has gone out of their way to resolve them." Another said, "Communication is great. I have answers within the day to my queries and the office are clear on what is going on in the life of the client. I have not had any complaints about timings of care calls from my current client."