

Yani Care Solutions Ltd

# Yani Care Solutions Ltd

## 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

Yani Care Solutions is a domiciliary care service, providing the regulated activity personal care. Most of the people using the service have a learning disability. There was one person using the service at the time of the inspection. Not all people using the service were receiving a regulated activity. 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.

We expect health and social care providers to guarantee autistic people and people with a learning disability the choices, dignity, independence and good access to local communities that most people take for granted. Right support, right care, right culture is the statutory guidance which supports CQC to make assessments and judgements about services providing support to people with a learning disability and/or autistic people.

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

The service was able to demonstrate how they were meeting the underpinning principles of right support, right care, right culture.

### Right Support

The environment people lived in provided a safe service and people felt safe using the service. The quality of service provided was regularly reviewed, and changes were made to improve people's care and support as required. The service had established good working partnerships with healthcare professionals and within the local community that promoted people's participation and reduced their social isolation. We have made two recommendations regarding the safe administration of medication.

### Right Care

There were suitable numbers of well trained and appropriately recruited staff who supported people to live safely, whilst enjoying their lives. Any risks to people and staff were assessed, monitored and regularly reviewed. There were systems in place to respond to complaints, concerns and safeguarding issues, although none had occurred at the time of the inspection.

### Right culture

The provider's culture was open and staff understood their responsibilities about reporting any concerns.

### Rating at last inspection

The last rating for this service was good (published July 2021).

### Why we inspected

The inspection was prompted in part due to whistleblowing information we received about the service. A decision was made for us to inspect and examine those risks.

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 remains 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 Yani Care Solutions on our website at [www.cqc.org.uk](http://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. For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

## 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 ●

The service was well-led.

Details are in our well-led findings below.

# Yani Care Solutions Ltd

## Detailed findings

### Background to this 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 2 inspectors, a pharmacist 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 provides care and support to adults living in supported living' settings, so they can live as independently as possible. In respect of Yani Care Solutions, not all of the people living in these supported living settings were receiving a regulated activity. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for supported living. This inspection looked at people's personal care and support.

#### Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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. At the time of our inspection there was a registered manager in post.

#### Notice of inspection

This inspection was announced. We gave a short period notice of the inspection. This was because we needed to be sure that the provider or registered manager would be in the office to support the inspection.

Inspection activity started on 28 November 2022 and ended on 6 December 2022. We visited the office on 28 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 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 a relative about their experience of the care provided. We spoke with three members of staff including the registered manager, who was also nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

We reviewed a range of records. This included one care plan and associated medication records. We looked at three staff recruitment files, staff training records and records associated with the provider's quality monitoring systems.

# 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 good. The rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

### Using medicines safely

- People were supported to take their medicines safely. However, some liquid medicines were still available to be given after their expiry date. This meant they might not be as effective.

We recommend medicines are disposed of safely once they have expired.

- Staff were trained and assessed as competent to administer medicines.
- The person's medicine support needs were assessed and recorded in their care plans and as part of their electronic medicine administration records. The records were checked to make sure they were accurate as part of a regular audit.
- A medicine used to help support the person when distressed was given only after other measures had not been successful. We found staff understood when the medicines could be used but this was not recorded. Staff worked closely with the person to reduce the likelihood the medicine would be needed.

We recommend staff should be given guidance to enable them to make consistent decisions about when to give a medicine.

- When we asked relatives for their view about how medicines were given, we were told, "As far as I know (person) gets medicines on time. If there is a problem, it is always raised straight away. I order and collect prescriptions so I can monitor the amount used. (Person) has when required medicines and in my view, it is not over-used. Staff are quite good if (person) is in pain, responding to any behavior cues."

### Assessing risk, safety monitoring and management; Preventing and controlling infection

- People had a range of risk assessments in place regarding their care. Where any risks were identified, control measures were in place about how to keep people safe. Positive behavioral support plans (PBS) were in place to reduce the effects of any potential behaviors that may challenge.
- Safe infection control procedures were in place. However due to the support needs of people who used the service, it was not always appropriate for staff to wear personal protective equipment (PPE), as this could cause the person unwanted distress. Risk assessments were in place to manage this. A relative said, "Staff wear gloves for doing personal care, but don't wear face masks. This is a sensible approach for (person)."
- Although CQC does not regulate the building and premises of this service (managed by a landlord), appropriate adaptations had been made to the living environment to assist people with their care and support. For example, a sensory room which we saw people using during the inspection. Staff did not wear uniforms, or name badges in order to create a homely living environment.

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).

- We found the service was working within the principles of the MCA and if needed, appropriate legal authorisations were in place for the provider to deprive a person of their liberty. This was in progress with the local authority at the time of our inspection.

Systems and processes to safeguard people from the risk of abuse; Learning lessons when things go wrong

- Relatives told us they felt the service was safe, commenting, "I think so. (Person) is safe in the house with 2:1 staff. There had been some concerns about safety in the garden, but this was addressed and improved."
- Safeguarding and whistleblowing policy and procedures were in place and the training matrix showed staff received appropriate training.
- At the time of our inspection, there had not been any accidents or incidents, however the registered manager was aware about how this needed to be monitored. A relative told us, "(Person) has had no injuries in the past year. I am confident staff would respond appropriately. A couple of weeks ago staff were concerned (person) may be dehydrated and sought medical attention. They couldn't get a GP appointment, rang 111 and ended up in A&E. Staff did not ignore their concerns and the changes they observed. They did the right thing."

Staffing and recruitment

- There were enough staff employed to care for people safely. Relatives said there were enough staff to deliver the care people needed. One relative said, "There are enough staff because (Person) is always 2:1 and sometimes 3:1 dependent on activities. (Person) has a 24-hour care package. (Person) is at a day centre 2 days a week and spends another 2 days with her family."
- Staff were recruited safely, with all the necessary procedures carried out. Staff confirmed they were asked to complete these checks when they first began working for the service.



# 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 good. The rating for this key question has remained 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; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- There were systems in place to monitor the quality of service provided to ensure good oversight. This included audits of; safeguarding, nutrition/hydration, infection control and medication. Action plans were created if any shortfalls were identified. Spot checks were carried out so the registered manager could observe staff delivering care and make any necessary improvements.
- Systems were in place to involve people, relatives and staff in how the service was run, including the use of satisfaction surveys to obtain feedback.
- Team meetings were held to gather staff views and opinions. Staff supervisions and appraisals took place to monitor performance and provide support.

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

- The registered manager was also the nominated individual. They understood their role and responsibility to submit statutory notifications, although at the time of the inspection there had not been any notifiable events.
- It is a legal requirement for the ratings from the last inspection to be displayed on any websites operated by the provider and at the office location. The ratings from our last inspection were displayed on the Yani Care Solutions website as required.

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

- We discussed the whistleblowing information we had received with the registered manager. They provided us with a response to the concerns and felt valuable lessons had been learnt in the process.
- The staff team spoke of a positive culture at the service and said they enjoyed their roles.
- Staff told us they felt the service was well-led.
- The feedback we received was good outcomes for people were achieved and people were happy with the quality of service provided. One relative said, "I have no major concerns. If I did have, I would be telling them. When I go in, I mention things and they get sorted. On the whole (person) is well cared for. The staff all engage when spoken to and asked things. For the most part they seem happy to be there and do a good job."

Working in partnership with others;

- The service worked in partnership with other agencies as required including local authorities and social work teams.
- The service worked with a range of other organisations to enable people to maintain good health. This included learning disability nurses and occupational therapists.