

Meadowvale Homecare Ltd

Meadowvale Homecare Ltd

Inspection report

74 High Street
Redcar
TS10 3DN

Tel: 01287653063

Date of inspection visit:
25 October 2022

Date of publication:
23 November 2022

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

Meadowvale Homecare Ltd is a domiciliary care agency providing personal care to people living in their own homes. It provides a service to young adults and older adults, including people living with dementia. At the time of inspection, 39 people were using the service and receiving personal care.

Not everyone who used the service received personal care. The Care Quality Commission (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

Risks to people were appropriately assessed and managed. Guidance was in place to support staff to safely care for people. People told us they felt safe, and staff knew how to safeguard people from the risk of harm. Staff were recruited safely. Medicines were managed safely, and people received their medicines as prescribed. Staff wore PPE correctly and had received training in infection control.

People's needs and preferences were robustly assessed. People were involved in the planning of their care. Staff were suitably trained to carry out their roles. Staff supported people to access healthcare services. 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 treated with kindness and respect. Staff supported and promoted people's privacy, dignity and independence. Staff supported people to do things they enjoyed.

People received person-centred care which met their individual needs. Staff were knowledgeable about people's likes and dislikes. People were supported to communicate effectively, and the provider used easy read documents and pictorial cues to assist with this. People were supported to take part in activities and build and maintain relationships.

The quality of the service had improved since our previous inspection. Regular audits were carried out, and action plans were developed in response to audit findings. The provider was committed to continuous development and improvement. Staff felt supported by management and regular staff meetings took place. People were asked for feedback and actions were taken in response.

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 26 February 2021) and there were breaches 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 regulations.

Why we inspected

This inspection was carried out to follow up on action we told the provider to take at the last inspection.

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 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.

Meadowvale Homecare 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 Health and Social Care Act 2008.

Inspection team

This inspection was carried out by one inspector and two Experts 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 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 the service 24 hours' 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 25 October 2022 and ended on 3 November 2022. We visited the location's office on 25 October 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 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 13 people who used the service and 12 relatives about their experience of the care provided. We spoke with 11 members of staff including the company director, the registered manager, the deputy manager and 8 support workers. We spoke with 1 professional who worked with the service.

We reviewed a range of records. This included 8 people's care records, 3 staff recruitment files and multiple medication records. A variety of documents relating to the management of the service, including policies, training records, maintenance records and quality assurance documents 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 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

At our last inspection the provider had failed to have accurate records in place and systems to monitor and review risk. 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.

- The provider appropriately assessed, monitored and managed risks to people. Up to date care plans and risk assessments were in place, and these contained relevant information to enable staff to safely support people.
- Detailed and person-centred guidance for staff around people's health and support needs were in place. Protocols to guide staff on how to minimise any identified risks had been developed.
- The provider carried out environmental risk assessments for each person who used the service. This helped staff and people to be aware of any potential environmental hazards and supported staff to respond safely to any environmental incident.

Staffing and recruitment

At our last inspection the provider had failed to follow their recruitment policy to support safe recruitment. This was a breach of regulation 19 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 19.

- There were enough suitably trained staff to safely care for people. Staff told us that the team pulled together to ensure that calls were always covered.
- We received mixed feedback from relatives about whether the same team of care workers supported people. One relative told us, "We have a regular team of about 5 different carers", but another relative told us, "It is a large team of about 16 carers which isn't ideal, but [person] still gets continuity of care, and care at a good level."
- Staff were recruited safely. The provider carried out appropriate pre-employment checks to ensure staff were suitable for their job role.

Learning lessons when things go wrong

At our last inspection the provider had failed to have accurate records in place and systems to monitor and review risk. 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.

- Lessons were learnt when things went wrong. The provider had made good improvements since our previous inspection.
- The registered manager analysed accidents and incidents to look for trends. Lessons learnt were identified, discussed with the provider, and then relayed to all relevant staff.
- The registered manager identified appropriate actions following incidents, plans were implemented, and checks were carried out to ensure the lessons learnt process was effective.

Systems and processes to safeguard people from the risk of abuse

- People were protected from the risk of abuse. People told us they felt safe. Comments from people included, "I have never been looked after so well" and, "I am well and truly safe and satisfied with the care."
- Staff had received training in safeguarding and knew what to do if they had any concerns. Staff told us they felt confident to raise concerns with the management team. One staff member told us, "Management are easy to talk to and they act on things straight away."

Using medicines safely

- Medicines were managed safely, and people received their medicines as prescribed. If a medicine had not been administered, staff recorded the reason for this. Sometimes staff recorded the wrong reason by using the wrong code. The provider was looking into simplifying this process to reduce recording errors.
- Body maps were in place for creams and lotions prescribed for people, so staff knew exactly where they were to be applied. One person told us, "They put my cream on and they are very good, they always record everything too."
- Where people were prescribed medicines on a 'when required' basis, the provider put in place detailed protocols so staff knew when a person might need these medicines administered.

Preventing and controlling infection

- Staff wore appropriate PPE. One relative told us, "They always wear masks and they change their gloves often."
- The registered manager was pro-active about infection control and engaged with external professionals to stay up to date with best practice guidance. Staff had received suitable training in this area.

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.

The last time we reviewed this key question in October 2019, we rated this key question requires improvement. At this inspection the rating has changed to 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

- Staff robustly assessed people's needs. An assessment was carried out before the commencement of support, and this was reviewed regularly. One relative told us, "[Staff] have been very thorough and did a full assessment before they started."
- The registered manager encouraged people to discuss their needs with staff regularly and gave people plenty of opportunities to do this.
- Staff supported people in line with best practice guidance. The registered manager kept up to date with best practice and relayed this to staff in meetings, supervisions, and through care plans.

Staff support: induction, training, skills and experience

- Staff received appropriate inductions to enable them to support people safely. One staff member told us, "The induction was really good and informative. We were able to shadow other care workers and we were given the option of more shadowing if needed, until we felt comfortable."
- Staff were suitably trained and skilled to carry out their roles. Staff had completed a good range of training and were up to date with essential training. One person told us, "They are all, without fail, really well trained. They know what they are doing."

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

- Staff supported people, where needed, to eat and drink enough. Nutrition and hydration support plans were in place, which contained good information about people's dietary needs, including likes and dislikes.
- People told us they were supported appropriately with their nutrition and hydration. However, some relatives told us they thought some support workers' skills could be improved in this area. Comments ranged from, "[Staff] are great with my meals and know what they're doing", to "Some of the carers are not sure how the equipment in the kitchen works."

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

- People were supported to access healthcare services and received effective and timely care. Comments from relatives included, "[Staff] have rung the GP for [person] before now and then kept us informed" and, "They have phoned 111 for advice; the GP and an ambulance, they always keep us informed, so I know [person] is in good hands."
- The provider made referrals to external professionals where needed, and advice was incorporated into people's support plans.

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

- The provider and registered manager understood the principles of the MCA and worked within these. Staff had received appropriate and up to date training in this area.
- Staff always sought people's consent before completing a task. People told us, "[Staff] are very aware of telling me what they are about to do and what they are doing" and, "They always ask me before starting to help with anything."

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.

The last time we reviewed this key question in October 2019, we rated this key question requires improvement. At this inspection the rating has changed to 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

- Staff treated people with kindness and respect. People and relatives told us that staff were caring. People described staff as "genuinely good people", "thoughtful and kind", and "polite, friendly and courteous." One relative told us, "I can't say good enough things about them, they go above and beyond."
- Staff went the extra mile for people. One relative told us, "[Staff] fill the bird feeder outside as they know [person] likes watching the birds feed, or they will water the hanging baskets if they are looking dry."

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

- People were supported to be involved in their care. The registered manager made sure people were able to communicate their thoughts and views at any time. People had forms in their homes which they could complete at their leisure, and the management team regularly completed face to face or telephone reviews.
- The provider involved relatives in people's care planning, where appropriate. One relative told us, "They often check I am happy with everything; they are eager to learn what I have learned and for [person] to be able to stay at home with me."

Respecting and promoting people's privacy, dignity and independence

- Staff supported and promoted people's privacy and dignity. People told us, "[Staff] are always polite and respectful and, "I had never been washed by someone else before, but they managed to make me feel comfortable."
- Staff encouraged independence and supported people to do things they enjoyed. Staff pro-actively worked with people to build their confidence and this achieved good outcomes for people. One relative told us, "[Staff] have started taking [person] out in their wheelchair for a walk down the road and back which they really enjoy."

Is the service responsive?

Our findings

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

The last time we reviewed this key question in October 2019, we rated this key question requires improvement. At this inspection the rating has changed to 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; end of life care and support

- People received person-centred care which met their individual needs and preferences. Staff were knowledgeable about people's likes and dislikes, and preferred routines.
- People were offered a choice of male or female care worker.
- Most people told us they did not feel rushed during the support call, with one person stating, "I don't feel rushed and [staff] will chat and natter with me."
- There was no-one receiving end of life support at the time of our inspection. The provider had a policy in place which promoted person-centred end of life planning and care.

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- The provider followed and applied the Accessible Information Standard. People's communication needs were assessed, and plans were implemented to support staff to engage effectively with people.
- The provider had a person-centred approach to people's communication needs. Key information was available in an easy read format. The registered manager had created pictorial cues to assist people.

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

- People were supported to maintain relationships and take part in activities. Relatives spoke positively about staff supporting people to go out and about more, including to coffee mornings and events organised by the service. One relative told us, "I have been very impressed. They are starting up a Christmas Club now and they do bingo. [Person] loves it."

Improving care quality in response to complaints or concerns

- The provider had not received any formal complaints within the previous 12 months. There was a complaints procedure in place, and this was available in an easy read format. Systems were in place to analyse any complaints received as part of the provider's quality assurance procedures.
- People and relatives told us any concerns raised were dealt with appropriately. However, we received

mixed feedback from relatives as to whether the provider always gave them feedback after raising a concern. We fed this back to the provider who confirmed they would look at this.

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.

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; continuous learning and improving care; working in partnership with others

At our last inspection quality assurance processes had not supported the delivery of good care. 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.

- Quality assurance procedures and processes had improved. Provider oversight had improved. Monthly reports were prepared and discussed by the registered manager and the director.
- There was a clear and robust schedule in place for audits, so the management team knew what was needed of them, and when. Audits identified errors and omissions, actions were implemented in response to the audits, and then signed off once completed.
- The provider and the registered manager pro-actively engaged with external professionals and were committed to continuous development and improvement. All of the staff team had worked hard following our previous inspection, and the quality of the service had improved.
- The provider understood their responsibility to be open and honest when things go wrong.
- The provider understood their regulatory requirements and submitted notifications to CQC appropriately.

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

At our last inspection the provider failed to demonstrate the skills and experience necessary for overseeing the running of the service and to make the required improvements. This was a breach of regulation 5 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 5.

- The service was well-led. Staff and people spoke positively about the management team. Staff told us, "I

feel supported and I can go to management with anything. It is like a big family" and, "This is one of the best companies I have worked for, they do things properly."

- The service achieved good outcomes for people. One professional told us, "Their aim was to develop a more holistic approach to delivering care, focusing on the person and the relationship between them and the care worker. I have had a positive experience working with them, they are committed to ensuring that the people they work with have a good happy life."

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

- The provider engaged well with people using the service, the public, and staff. Regular feedback was sought from people, and this was acted upon. One person told us, "They have asked me for my feedback. The [registered manager] even came and asked if there is anything they can improve on."
- Relatives generally spoke positively about communication with the service. Relatives' comments included, "They are at the end of the phone or contactable by email if I need anything. They respond quickly" and, "They often send emails with photos attached to show me what [person] has been doing when they have attended their coffee mornings. It's lovely to see that."
- Regular staff meetings took place and staff told us there was an open door policy. One staff member told us, "Management are busy but always have a smile on their faces. They are approachable, and they keep us up to date with any news or changes."