

WyndSOR Home Care Ltd

# WyndSOR Home Care Ltd

## Inspection report

21 Otley Close  
Heron Grange  
Worcester  
Worcestershire  
WR4 0BJ

Tel: 01905613725

Date of inspection visit:  
22 August 2018

Date of publication:  
04 October 2018

### 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

WyndSOR Home Care Service is a domiciliary care agency. It provides personal care to people living in their own homes. At the time of the inspection 11 people were provided with personal care.

Not everyone using WyndSOR Home Care receives regulated activity; CQC only inspects the service being received by people provided with 'personal care'; help with tasks related to personal hygiene and eating. Where they do we also consider any wider social care provided.

At our last inspection in December 2015 we rated the service good. At this inspection we found the evidence continued to support the rating of good and there was no evidence or information from our inspection and ongoing monitoring that demonstrated serious risks or concerns. This inspection report is written in a shorter format because our overall rating of the service has not changed since our last inspection.

This inspection took place 22 August 2018 and was announced.

The service had a registered manager who was also the registered provider and they understood the responsibilities of their registration with us. They reported significant events to us, such as safety incidents, in accordance with the requirements of their registration when this was required. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

People were supported to remain safe in their own home because staff were aware of the risks associated with people's needs and home environments and how to reduce these. Staff were provided with the knowledge and equipment to reduce the risks of the spread of infections. Staff were knowledgeable about the different types of abuse and knew how to report concerns. The registered manager followed well managed recruitment procedures to make sure potential new staff were suitable to work with people who used the service.

The registered manager assessed staffing levels dependent on people's level of needs. People were supported by staff who had the necessary skills and knowledge to understand and meet people's needs. Staff felt supported and had access to training relevant to their roles.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible. Staff put into practice the knowledge they had gained which included seeking people's consent before supporting them and respected their decisions. Staff provided information to people in a way they understood to support them to make their own decisions.

People were offered choice about what they wanted to eat and drink with staff checking where necessary

people were eating and drinking sufficiently to meet their individual needs. People who needed staff assistance with their medicines were supported with these to support their health and wellbeing. Staff also worked closely with local health and social care services and supported people whenever this was required to access any specialist support they needed.

People were supported by staff who were caring and showed respect towards them. Staff had formed positive caring relationships with people who used the service and their relatives. People were supported to remain as independent as possible due to staff knowing people's individual likes and dislikes. Staff were mindful to support people in a way which maintained their dignity and upheld their right to privacy.

People received individualised care which reflected their needs and wishes. People benefitted from a flexible service which was responsive to changes in their needs and requirements. People were given opportunities to comment on the quality of the service and felt comfortable to raise any concerns with staff or the registered manager who they knew well.

There was a positive culture where staff and the registered manager worked together to provide good quality care. People who used the service, relatives and staff found the registered manager easy to approach and helpful. Quality checks were developed and implemented on an on-going basis to continually drive improvements in the service people were provided.

Further information is in the detailed findings below.

## 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 remains Good.

### Is the service effective?

Good ●

The service remains Effective.

### Is the service caring?

Good ●

The service remained Caring.

### Is the service responsive?

Good ●

The service remains Good.

### Is the service well-led?

Good ●

The service remains Good.

# WyndSOR Home Care Ltd

## Detailed findings

### Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

This inspection took place on 22 August 2018 and was unannounced and was carried out by one inspector.

We gave the service 48 hours' notice of the inspection visit because the location provides a domiciliary care service. We did this because the registered manager is sometimes out of the office supporting staff or visiting people who use the service. We needed to be sure they would be available to contribute to the inspection.

The inspection site visit activity started on 22 August 2018 and ended on 28 August 2018. It included telephone calls to five people who used the service and two relatives. This was to seek their views about how well their care services were meeting people's needs. When we visited the provider's office on 22 August 2018 we met and spoke with two care staff and the registered manager.

Before the inspection visit, the provider completed a Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. We considered this information when planning and conducting this inspection.

We requested information about the service from the local authority and Healthwatch. The local authority has responsibility for funding some people's care and monitoring their safety and quality. Healthwatch is the local consumer champion for health and social care services.

We looked at a range of documents and written records about how care services were being provided. These included sampling three people's care and medicine records, two staff recruitment files, staff meeting minutes and the opportunities people had to share their care experiences. In addition, we looked at the quality checking systems the registered manager had in place to assure themselves people received a safe, effective quality service.

# Is the service safe?

## Our findings

At this inspection, we found people continued to receive care and support to protect them from risks to their safety, harm and abuse as at the previous inspection in December 2015, and the rating continues to be Good.

People continued to feel safe in the company of staff who understood their particular needs. On this subject, one person told us, "I always feel safe when they [staff] help me to have a shower which I enjoy. They always ask if there is anything else I need." Another person said, "They [staff] all know what they are doing.... I do feel safe in their capable hands." Relatives we spoke with consistently told us they believed their family member's needs were met safely by staff who understood their caring roles.

Staff we spoke with showed they understood how to identify and report any situations where they thought people may be at risk of experiencing abuse. This included contacting external agencies such as the local authority and the Care Quality Commission. We saw from records staff had received training about how to keep people safe.

People told us how staff had put into practice their knowledge of the risks to their wellbeing and how the care provided was successful in supporting them to remain well and safe. For example, one person described how staff were vigilant when they walked to ensure they were as safe as possible but also retained their independence. Another person described to us how staff had assisted them with their personal care. They told us, "It makes a world of difference knowing they [staff] are there to make sure I have a wash with ease and they help me with what I struggle with otherwise I would feel unsafe."

Staff we spoke with told us they had access to people's care records where possible risks to each person's wellbeing were considered and assessed, for example risks relating to nutrition and medicines. We saw that each person's care record detailed the measures that had been put in place to address any risks which had been identified. Staff knew people well including the equipment people required to support their needs and to move around their home safely. Staff told us they found the care records a useful source of information to support them in their roles.

People who used the service and relatives described staff as reliable and usually punctual. We also consistently heard how staff spent time with people to chat about everyday life. One person told us, "They [staff] are always on time....I thoroughly enjoy our little chats." Another person said, "I always know they [staff] are coming and they have never let me down." Staff we spoke with also confirmed the length of calls supported an ethos of enabling them to care for people in a safe way and chat to them, so people's risk of isolation was reduced. The registered manager assessed and planned their staffing based on the care hours provided and people's individual care needs. In addition, the registered manager had recruitment arrangements in place to ensure new staff's suitability for their caring role was thoroughly checked before they supported people in their homes.

When people required support to take their medicines they were confident they received these as required

from staff who had been trained to do this. One relative told us, "They [staff] are very careful with medication." Medicines were recorded and stored within an agreed place within people's home. Staff told us they had been provided with medicine training and their competency was checked, so they would know how to administer medicines in a way which kept people safe.

People who used the service and staff described how good infection control practices were followed to protect people from cross infection. One staff member said, "We have plenty of personal protective equipment [PPE] available. We pick up gloves and aprons as we need [these]."

# Is the service effective?

## Our findings

At this inspection, staff continued to be supported in receiving ongoing training to develop their knowledge, skills and experiences to enable them to meet people's needs as effectively as we found at the previous inspection in December 2015. The rating continues to be Good.

People who used the service and their relatives described how the staff team knew their individual care and support needs. One person said, "They're excellent carers. They must have been trained as they know exactly how to do things for me." Another person told us, "How the carers [staff] help me does meet my every need and expectations." One relative talked about the specific equipment staff were required to use when assisting their family member and in reference to this commented, "They [staff] know what they are doing."

People's needs were assessed prior to their home care service starting to ensure their specific needs and requirements could be met. For example, assessments identified people's preferred methods of communication and staff were provided with guidance on how to effectively communicate with people. Assessments also covered people's individual needs relating to their physical and health needs. Staff we spoke with told us they used the care planning guidance to support them in providing people with personalised care which met their needs in the right way and at the right times. In the Provider Information Request [PIR] the registered manager confirmed, 'No member of staff is sent into a client without first the client meeting them prior to the visit as I think this is only respectful of the client and they know who is coming in to them.' People who used the service, relatives and staff told us how much they valued this personalised approach.

Staff were positive about their induction and training opportunities and felt able to approach the registered manager should they wish to undertake additional training. Staff told us they regularly met with the registered manager. They found these meetings beneficial as they were able to discuss any concerns they had as well as receiving feedback on their practice and development. For example, one staff member told us, "The support from [registered manager] helps me to feel confident and become familiar with people and my job."

Staff we spoke with were encouraged to reflect on the knowledge and skills they had to provide people with the care they needed. Examples of this were staff describing how they cared for people who experienced walking issues and problems with their skin.

Staff assisted people to eat and drink whenever this was required. Each person's care plan detailed any particular likes or dislikes and these were respected by staff who also understood the importance of offering people choice in what they had to eat and drink. For example, one staff member told us, "One person I support has whatever choice of meal they want." Confirming this approach, one person said, "They [staff] always make me anything I fancy." Staff were provided with food hygiene training and were also aware of any related risks which had been identified in order to effectively support people to eat and drink.

The registered manager and staff worked with other organisations to ensure people's needs were met effectively. For example, staff had received training in providing the care people required when they had a Percutaneous Endoscopic Gastrostomy [PEG] in place which is a tube passed into a person's stomach to meet a person's oral intake including their nutrition and medicines. There was specific guidance for staff to follow which was personalised and reflected when advice or guidance should be sought from other professionals.

The Mental Capacity Act 2005 (MCA) provides a legal framework for making 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 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. We found evidence in care plans we looked at that people had consented to care and our discussions with the registered manager and staff showed they understood the requirements of the MCA.

People can only be deprived of their liberty so that they can receive care and treatment when this is in their best interests and legally authorised under the MCA for people living in their own home, this would be authorised via an application to the Court of Protection. At the time of our inspection the registered manager had not needed to make any applications to the Court of Protection.

## Is the service caring?

### Our findings

At this inspection, we found people were as happy with their care as they had been during our previous inspection in December 2015, because they felt the registered manager and staff genuinely cared about them as individuals. The rating continues to be Good.

People we spoke with were complimentary about how staff provided their care and support in a kind and friendly way. One person told us, "They're [staff] very friendly [and] very caring. I feel a friend is coming to see me." Another person said, "They're lovely girls [staff]; we have become friends. They're all very nice and polite." One relative told us, "They're all [staff] absolutely excellent, I can't fault any of the care provided."

Staff had formed positive caring relationships with people who used the service and relatives. People told us they received care from staff they were familiar with and had the opportunity to build relationships with because they saw them regularly. People described being supported by staff who knew them well and were friendly and caring. One person described to us how they liked to have, "a chat and laugh" with staff. The person went on to explain how they got on really well with staff and how they looked forward to seeing the staff each day. Another person said staff knew them well and were friendly, caring and did not rush them which they were appreciative of.

People told us they were supported to make decisions about their care and support needs. They felt staff took time to promote their choices and listened to how they liked things done. One person said, "They [staff] always chat to me and check if they can do things for me, how I want things to be done and when." Another person explained how the registered manager came to see them at their home to discuss their care and support needs before their home care service started. The person told us the registered manager asked them what they needed assistance with and what times they would like their care provided. On the subject of their care and support, they told us, "[It] meets my every need and expectations... I am very independent and staff allow me to be; this means a lot to me."

One staff member told us the registered manager always had an initial meeting with people to discuss how they wanted their care provided. Staff spoke about the importance of involving people in what they were doing. One staff member said, "We have to respect people's choices and, "I treat them all as I would like to be treated." Another staff member told us, "We talk to people and ask them how they want us to care for them and check people's satisfaction with the care and support provided."

Everyone we spoke with told us they were treated with dignity and respect by both the registered manager and staff. When asked if staff promoted their dignity one person replied, "Absolutely". They went on to tell us they found staff respectful towards them and never made them, "Feel embarrassed whilst supporting them to have a shower. One relative we spoke with said, "They [staff] are very good in how they communicate with [family member, they do not talk down to [family member]; they do not talk down to [family member]. They went on to say, "They [staff] "Do not make [family member] feel they are a nuisance at all."

When people had been first introduced to the service they were asked how they would like staff to gain

access to their homes. People told us staff respected people's wishes while ensuring people were safe and secure in their homes. Staff also recognised the need to maintain people's confidentiality. They told us they only shared information with people's consent and on a need to know basis.

## Is the service responsive?

### Our findings

At this inspection, we found people's care and support needs were responded to as they were during the previous inspection in December 2015. The rating continues to be Good.

People we spoke with told us they received care and support based on what they needed and in a way that they liked. One person described to us how staff had helped them with their personal care in their preferred way which was reassuring to them. The person also said staff would have a chat to them which helped to brighten their day. Another person told us, "They [staff] are wonderful and they know my little ways." In addition, relatives were confident staff responded to their family members needs so they could meet their wishes of living in their own homes.

Each person had a written care plan that was left in their home. People we spoke with said the registered manager met with them to check their care needs together with the times of day when people preferred to receive their care. One person summarised this arrangement saying, "Before I had my first visit the registered came out to see me. We had a really good chat about what help I wanted and about the times I wanted the staff to call. They were very helpful and have so far stuck to what I asked for." People described how they valued the registered manager's 'hands on' approach as they regularly provided care. The registered manager also told us it gave them opportunities to regularly check whether the service continued to meet people's needs and wishes so any changes could be implemented to ensure the care remained responsive.

Staff were aware of people's individual needs and preferences which enabled them to provide support which was centred around each person and responsive to their needs. One staff member described to us the care they provided to one person they regularly visited. They knew the little details about the person's needs, such as how people liked to receive support with their personal care which responded to people as individuals and met their needs. Another staff member told us they got to know people's needs through talking with them so they could, "Make sure everyone is happy and well looked after. If there are any changes to a person's needs we talk these through with [registered manager] who takes action."

Care staff understood the importance of promoting equality and diversity. Staff had been provided with details in people's care plans to show the registered manager's pledge to make sure each person's care was centred on them. An example of this was how people were consulted about their preferences in relation to their care, such as the gender of staff they wished to receive care from.

People told us staff had supported them to pursue their different lifestyles and commitments. An example of this was the registered manager and staff working together to helpfully rearrange the times of visits so people could attend events such as hospital appointments and family gatherings. One person commented about this saying, "The service is quite flexible and they will work around me if I have an appointment so I am ready well in advance and not late."

People who used the service and relatives had received a document that explained how they could make a complaint. The document included information about how quickly the registered person aimed to address

any issues brought to their attention. In the PIR the registered manager told us, 'The clients and their families know that they can contact me at any time or ask that I can contact them if they have any concerns or need a little extra help.' People we spoke with confirmed this was the case with one person commenting, "I see [registered manager] regularly and if I had any issues I would speak with them there and then. She is great and I would feel comfortable saying exactly what's on my mind." The document included information about how quickly the registered person aimed to address any issues brought to their attention and could be produced in other formats to suit people's needs, such as larger print. Records showed that in the 12 months preceding our inspection the registered manager had not received any written complaints.

# Is the service well-led?

## Our findings

At this inspection, staff told us they continued to be as well supported, managed and led as at our previous inspection in December 2015. The rating continues to be Good.

The service had a registered manager who was also the registered provider and they understood the responsibilities of their registration with us. They reported significant events to us, such as safety incidents, in accordance with the requirements of their registration when this was required. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

People who used the service and relatives we spoke with were positive about the service they received and told us they considered the service to be well-led. One person told us the registered manager and staff, "work around me which is a sign of a well led customer approach." Another person said, "I would recommend Wyndsor which I would not do if it was not [well led]. It seems to be well run." One relative told us, "They're [staff] absolutely excellent. Registered manager is very good and never sends a carer without coming first to see people, [the registered manager] makes sure everything is okay."

The registered manager told us they encouraged people who used the service and staff to share their concerns and opinions to help them improve the quality of the service. People who used the service and relatives told us they had many opportunities to feedback to the registered manager because she often provided care herself and conducted regular reviews of care. In addition, we saw people had commented positively on the quality of the service in the most recent satisfaction surveys returned to the provider.

Staff we spoke with clearly explained how they saw the overall culture and aims of the service, explaining that the support provided for people was their priority. Staff told us the registered manager always provided support and expected staff to be friendly, approachable and treat people with dignity and respect. Staff also said that they could speak to the registered manager if they had any concerns about the conduct of a colleague and they were confident that action would be taken to keep people safe. One staff member told us they were, "very happy." They went on to say, "I enjoy my job. [The registered manager] is a good boss. If I have got a problem, I never worry about phoning her."

The registered manager had systems in place to monitor the quality of the care provided. For example, the management team had developed regular checks of the daily communication records to make sure staff were delivering care in line with each person's care plan. People's medicine records were also being checked to ensure staff were completing them correctly.

The registered manager had a clear vision for the future of the service and the values on which they placed on this, which they described to us in the PIR as, 'to learn by each individual Client and going forward what we have learnt can be implemented within our service to ensure that the quality of care we give to each

individual is safe and secure as Quality of Care is a Right not a Privilege.' They told us they wanted to sustain their different methods of checking the quality of the care people received these over time. In addition, the registered manager was passionate about working with healthcare professionals to ensure people received the right care, at the right time and in the right way. One example provided by the registered manager was how they were proud of the skills of their staff team in providing care to people with a PEG in place. The registered manager talked about how this care enabled people to continue to live at home with their specific needs effectively met.