

Salyx Care Limited

Walfinch Welwyn & Bishop's Stortford

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

Walfinch, Welwyn and Bishops Stortford is a domiciliary care agency providing personal care for people living in their own homes in the community. The service provides support for older people and younger adults who may live with physical disabilities, sensory impairment, mental health needs or dementia.

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. At the time of our inspection there were 28 people in receipt of the regulated activity.

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

People felt safe and protected from avoidable harm because staff knew how to identify and report any concerns relating to the risk of abuse. Risks to people's health, safety and well-being were assessed and measures were developed to remove or reduce the risks. People were supported by a staff team who had been safely recruited.

People's medicines were managed safely. Staff received appropriate training and had their competency assessed to help ensure they were sufficiently skilled and knowledgeable to safely administer medicines. Staff had received training in infection control practices and personal protective equipment was provided for them. The management team took appropriate action following any incidents and learning was shared across the staff team.

Before care delivery started assessments were undertaken to help make sure people's needs could be met. Staff received the appropriate training and support to enable them to carry out their roles safely and effectively.

Management and staff knew people well and were able to promptly identify when people's needs changed, and they sought professional advice appropriately. 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 and relatives praised the kind and caring nature of the staff team. People received regular consistent care from a small staff team. People knew about their care plans and confirmed they could decide what care and support they needed. People and their relatives said they were confident to raise concerns with the management team. Everyone we received feedback from during this inspection was satisfied with the care and support provided.

The management team was committed to providing quality care and support to people as well as the staff team and understood their responsibilities under the duty of candour. People, their relatives, external

professionals and staff spoke highly of the management team and told us they were always available and supportive.

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

Rating at last inspection

This service was registered with us on 28 March 2022 and this is the first inspection.

Why we inspected

This inspection was prompted by a review of the information we held about this service.

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.	



Walfinch Welwyn & Bishop's Stortford

Detailed findings

Background to this inspection

The inspection

We carried out this performance review and assessment under Section 46 of the Health and Social Care Act 2008 (the Act). We checked whether the provider was meeting the legal requirements of the regulations associated with the Act and looked at the quality of the service to provide a rating.

Unlike our standard approach to assessing performance, we did not physically visit the office of the location. This is a new approach we have introduced to reviewing and assessing performance of some care at home providers. Instead of visiting the office location we use technology such as electronic file sharing and video or phone calls to engage with people using the service and staff.

Inspection team

This inspection was undertaken by 1 inspector.

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

This inspection was unannounced.

Inspection activity started on 24 April 2023 and ended on 04 May 2023. We had a video call with the registered manager on 04 May 2023 to share feedback.

What we did before the inspection

We reviewed information we had received about the service since registration. We used this information to plan our inspection. The provider was not asked to complete a Provider Information Return (PIR) prior to this inspection. A PIR is information providers send us to give some key information about the service, what the service does well and improvements they plan to make. We reviewed information we had received about the service since initial registration.

During the inspection

We sought feedback by telephone and email from people who used the service and their relatives, staff members, partner agencies and external health and social care professionals. We received feedback from 2 external health and social care professionals, 5 staff members, 3 people, 2 relatives, the registered manager and the nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

We reviewed records including staff training, complaints and compliment logs, accident and incident trackers and the registered manager's governance and monitoring documents. We reviewed care plans and risk assessments for 2 people.

This performance review and assessment was carried out without a visit to the location's office. We used technology such as video calls and email to enable us to engage with people using the service, relatives and staff, and electronic file sharing to enable us to review documentation.



Is the service safe?

Our findings

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

This is the first inspection of this newly registered service. This key question has been rated Good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- The provider and registered manager operated robust and effective systems to help protect people from the risk of harm or abuse and understood their responsibilities to safeguard people from abuse.
- Staff had received training and were clear about how they would report any concerns both internally to the registered manager and externally to the safeguarding authorities. A staff member said, "When we raise concerns about how we work, they are dealt with very effectively. Our supervisors and team leaders engage with us and take all issues seriously, no matter how minor as we are the ones who interface with people daily."
- People and their relatives told us staff provided safe care for people. One relative said, "I feel that care workers providing day to day care for my [family member] do provide safe care. It is a small team of regular care workers that [person] recognizes and trusts to assist them with personal care in a calm, friendly and relaxed manner."

Assessing risk, safety monitoring and management

- Risks to people's health, safety and well-being were assessed and a care plan was developed to remove or reduce the risks. Risk assessments supported people to stay as independent as possible within the confines of their health needs.
- The registered manager helped ensure people received appropriate support in the event of an emergency. For example, a 24 hour on-call service was available to people, their relatives and staff and emergency cover was arranged for staff sickness or other such events.

Staffing and recruitment

- There were enough experienced and skilled staff to ensure people received support safely. A relative told us, "The care is provided by a small regular team of care workers who my [family member] recognises and is comfortable with. New care workers are always shadowed by the regular care team and introduced to [person] before they commence solo care calls."
- The management team 'matched' staff with people to help ensure their personalities matched as well as staff having the right skills.
- The registered manager operated effective recruitment procedures; appropriate checks were undertaken to help ensure staff were suitable to work at the service. Criminal record checks and satisfactory references had been obtained for all staff before they worked with people independently.

Using medicines safely

• Staff received the training necessary to support them to safely administer people's medicines. The management team undertook competency assessments once staff had completed their training to ensure

safe practice.

- Staff supported some people with administering their medicines and just prompted others to take theirs as needed.
- People and their relatives told us they were confident staff provided their medicines safely. Spot checks were undertaken by senior staff to monitor and assess staff skills and competency in this area.

Preventing and controlling infection

- Staff were provided with training and personal protective equipment (PPE) including gloves and aprons to help promote effective infection control. Practice in this area was monitored by the management team during spot checks.
- The provider had an up-to-date Infection Prevention and Control policy. People and their relatives told us care staff promoted good hygiene practices.

Learning lessons when things go wrong

- The registered manager took appropriate actions in response to any concerns. These actions were then evaluated to assess if they had been effective in addressing the issue or concern. Learning was shared with staff by a variety of means including updates, face to face meetings, group supervisions and team meetings.
- Some care visits had been missed because staff phones had not been updated. This meant they did not always see the visits allocated to them. The registered manager immediately introduced steps to help ensure this event did not re-occur. It was found systems to underpin good communication had not always been followed and the provider's digital care planning software was not being used to its full potential. The registered manager clearly defined who was responsible for monitoring the digital care system and the steps to be taken if a care worker failed to attend a care visit, this information was shared with the staff team.



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.

This is the first inspection for this newly registered service. This key question has been rated 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; Supporting people to eat and drink enough to maintain a balanced diet

- People's needs were assessed before they started to use the service. Assessments were robust and included people's support needs, associated risks and their individual preferences. These assessments formed the basis of people's care plans and risk assessments.
- People's relatives praised the staff team for the effective care and support they delivered.
- People's dietary needs and requirements were identified in their care plans and staff had a good understanding of how to support people with these.
- Management and staff worked positively with people to help promote good nutritional intake and hydration.

Staff support: induction, training, skills and experience

- Training and support was provided to enable staff to understand how to care for people safely and effectively. The registered manager said, "It is integral to the safe delivery of care that staff are suitably trained to ensure a safe and effective service. With this in mind, we are not only training staff but we ensure that we as a management team have extra training above and beyond our role. For example, I am training to be a Mental Health First Aider." The registered manager went on to say, "This is the culture I want my staff to have, I lead by example."
- Staff received supervision and competency observations to help ensure they had the knowledge to perform their job roles. Staff said they enjoyed good support from the management team. A staff member said, "Our team leaders check how we work and where we feel we need support the office staff are very helpful."
- Inductions for new staff were thorough, and their knowledge was tested during shadow shifts prior to the staff member working with people unsupervised.
- People and their relatives praised the staff team for their skills, knowledge and compassion. One person told us, "They (staff) have made such a difference to my life Thanks to their unwavering support I feel I can stay in my home for a while longer. They are kind, they provide me safe care, it is a pleasure to see them."

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

- The management and staff team worked well with external professionals for the benefit of people who used the service.
- Information was shared with other agencies if people needed to access other services such as hospitals.
- Staff praised the support provided for people with their health needs, especially in a medical emergency.

For example, a staff member told us, "If I have any concerns about people I get straight onto registered manager and she listens and deals with it immediately."

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.

- Staff received training in the Mental Capacity Act and had a good understanding of how to put this into practice.
- Staff empowered and encouraged people to make their own choices and decisions as far as possible.
- Some people could not give informed consent for some areas of their care. Mental capacity assessments and best interests' decisions had been undertaken involving relatives, independent advocates and health and social care professionals. This helped to ensure all decisions were made in people's best interests.



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.

This is the first inspection for this newly registered service. This key question has been rated 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

- The management team were keen to provide people with the support they needed, how they needed it, and in the best possible way for individuals. Staff had a good understanding of the people they supported and took time to get to know people's individual likes and dislikes, their pasts and interests and incorporated these into their care.
- Staff told us they were proud of how the care and support they provided enhanced people's lives and empowered them. A staff member gave an example where a person's relative had expressed their gratitude for the time taken by staff to "believe in" their family member and put a smile on their face. The staff member said, "We always try our best and never give up on people."
- People and their relatives praised the staff team for the care and support they provided. A relative told us, "All the regular care team are very empathetic and have a good understanding of [family member's] illness and support them to continue to live at home which complies with [family member's] wishes." Another relative said, "My [relative] always looks forward to their (care worker) visit and they are very thorough and very caring in their approach."

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

- People's care plans showed they were consulted about changes to their care and these were documented. Regular reviews of people's support involving people, their relatives and other professionals took place.
- People and their relatives told us they were always involved in any decisions about their care.

Respecting and promoting people's privacy, dignity and independence

• People and their relatives said staff promoted people's privacy, dignity and independence. People were supported to maintain their dignity and increase their independence. For example, a person who had initially started with a reablement package of care visits every day had reduced to needing just 3 care visits a week.



Is the service responsive?

Our findings

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

This is the first inspection for this newly registered service. This key question has been rated 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

- Care plans were very detailed with regards to people's needs, preferences, likes and dislikes. This meant staff had the information available to help ensure people received the right care and support to meet their individual needs. Staff told us they were proud to provide personalised care centred on people's individual needs and preferences.
- People's care was adapted to meet their changing needs. For example, as people began to regain essential life skills the support was amended to help maximise independence in other areas.
- Relatives told us they felt supported by the agency in caring for their family members. A relative said, "I have regular contact with the care team including the management. I feel that I have a very comfortable and open working relationship in the care and management of my [relative's] wellbeing." Another relative said, "They text call me with any problems or concerns which makes us feel reassured as communication is key."

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 people should get the support they need in relation to communication.

- The provider had facilities to make information available for people in different formats if needed.
- People's care plans provided very clear information to support staff to communicate with people who used the service.

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

• The service supported some people with companionship visits. The registered manager advised these visits could be to sit with a person at home if they wished or to visit a coffee shop or a garden centre for example if safe to do so.

Improving care quality in response to complaints or concerns

• The provider had a complaints policy and procedure in place. Any concerns were recorded, investigated and responded to appropriately. For example, a person had said they sometimes felt rushed during their care and unable to make meaningful choices because of time constraints. The registered manager's investigation concluded it would be beneficial to increase the length of the person's care visit on specific days to alleviate the time pressure. In addition, care workers were provided training about the need to show

patience and empathy when dealing with people in their care The person was much happier with the new arrangement.

• A relative told us, "I have had cause to raise a concern. It was dealt with very quickly and professionally to a good conclusion for my [relative's] care and wellbeing."

End of life care and support

- The staff team supported people at the end of their life according to their wishes and preferences. People were supported to stay in their own home if they chose to do so and extra support was provided as needed from specialist services such as Hospice nurses. Staff knew how to support people at the end of their life.
- Training in end-of-life care was provided for staff, which helped to ensure they fully understood how best to support people. The service also had a 'champion' trained in end of life care whose expertise and knowledge was used to provide additional information, advice and training to all staff.
- A person at end of life had expressed a wish to return from hospital to their own home to die. The provider was able to meet this wish by providing increased care and support so the person could be safely discharged from hospital. The person passed away peacefully in their own home within a matter of days. The management team said, "As care providers we felt at ease as we managed to fulfil [person's] last wish."



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.

This is the first inspection for this newly registered service. This key question has been rated Good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- The provider and registered manager operated a robust system of monitoring the quality of the service provided for people. At this inspection we found no issues of concern, this showed the monitoring arrangements in place were effective.
- The provider and registered manager demonstrated a clear understanding about the duty of candour and encouraged staff to be open and honest in their feedback. Throughout this inspection process we found the registered manager to be very honest and open in their approach.
- The registered manager worked directly with people and the staff supporting them. They encouraged a positive culture amongst the staff team and placed people in the centre of their care.
- The management team and staff understood their roles and respected the impact their roles had for people.

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

- The registered manager had a good understanding of their responsibilities towards the people they supported and demonstrated a strong ethos of delivering good quality person-centred care.
- The registered manager told us, "At Walfinch Welwyn and Bishop Stortford we have created values champions. The values are integrity, teamwork, excellence and fun." The registered manager went on to tell us about medication, safeguarding, dementia, training, mental health and coffee dates champions.
- The registered manager demonstrated a strong ethos around supporting staff to be the best they could be. For example, they told us, "We have work buddies and a work mentor. We regularly take our care staff for a coffee or for lunch and every month we elect a care worker of the month. We recognize the hard work, integrity and the teamwork."
- Staff said they felt proud to work with Walfinch Welwyn and Bishops Stortford. For example, a staff member told us, "I would recommend Walfinch to people looking for care, we have good reliable carers with very good time management and attend to care calls on time and consistently."
- People and relatives told us the staff and management team were responsive, approachable, kind and helpful. A relative told us, "Without the Walfinch team I feel [person] would not be able to carry on living at home. [Person] views the care workers as friends. This brings me comfort knowing they are so well cared for by a professional and caring team. I would most certainly recommend Walfinch to others in [person's] position."

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

- People and their relatives were regularly asked their views about the service and how it operated. We saw feedback received immediately prior to this inspection. A person had responded, "[Name of care worker] makes me feel at ease, very helpful and professional."
- Staff feedback was sought via satisfaction surveys and face to face meetings with the management team. Staff were positive about working for the company. A staff member said, "I would recommend Walfinch to other staff, the company values it's care workers and we have flexible shift patterns that allow us to have a work life balance."
- Regular feedback about the quality of the service provided was gathered from people and their relatives.

Continuous learning and improving care; Working in partnership with others

- Learning was taken from incidents to improve people's experience of care.
- The management team worked with external professionals to achieve good outcomes for people. For example, social working teams, community nurses and GPs. A professional told us, "On the phone they are professional and courteous and strive to support me in timely manner. I have not received any complaints about their service.
- Another professional said, "Walfinch have responded in a timely manner and the information they provide to patients is clear and understandable. When care has been put into place, again, this has been in a timely manner and has immensely reduced stress on informal carers and/or the family trying to navigate the often complex care system. One family had tried for weeks to get care in place via adult care, within a few days after contacting Walfinch, care had been assessed and care workers were visiting the patient in a time of great need."