

Your Choice Homecare Ltd

Your Choice Homecare

Inspection report

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service effective?

Inspected but not rated

Is the service caring?

Inspected but not rated

Is the service responsive?

Inspected but not rated

Is the service well-led?

Good ●

Summary of findings

Overall summary

This report was created as part of a pilot which looked at new and innovative ways of fulfilling CQC's regulatory obligations and responding to risk in light of the Covid-19 pandemic. This was conducted with the consent of the provider. Unless the report says otherwise, we obtained the information in it without visiting the Provider.

About the service

Your Choice Homecare is a domiciliary care service whose office is situated on Chorley New Road in Bolton. The service provides personal care to people in their own homes.

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

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

Systems were in place to help keep people safe. Staff files included all appropriate documentation to ensure staff were recruited safely. There were sufficient staff to ensure people's needs were fully met. Appropriate risk assessments were in place and were reviewed and updated as required.

Medicines were managed safely and records were complete and up to date. Staff had completed infection control training and were aware of how to use personal protective equipment correctly.

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 felt staff were kind and caring. People were seen as individuals and were supported according to their wishes. People were able to express their views in a number of ways.

The provider was open and honest when responding to complaints or concerns raised. Quality assessments were undertaken with people who used the service in between formal reviews. Audits ensured actions could be put in place where needed to help improve the service. The service worked closely with other health and social care professionals to help ensure joined up care for people.

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

Rating at last inspection

The last rating for this service was good (published 6 October 2017).

Why we inspected

This was a planned pilot virtual inspection. The report was created as part of a pilot which looked at new and innovative ways of fulfilling CQC's regulatory obligations and responding to risk in light of the Covid-19 pandemic. This was conducted with the consent of the provider. Unless the report says otherwise, we obtained the information in it without visiting the Provider.

The pilot inspection considered the key questions of safe and well-led and provide a rating for those key questions. Only parts of the effective, caring and responsive key questions were considered, and therefore the ratings for these key questions are those awarded at the last inspection.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

The service was safe.

Details are in our safe findings below.

Good 

Is the service effective?

At our last inspection we rated this key question good. We have not reviewed the rating at this inspection. This is because we have not reviewed all of the key lines of enquiry (KLOEs) in relation to effective.

Inspected but not rated

Is the service caring?

At our last inspection we rated this key question good. We have not reviewed the rating at this inspection. This is because we have not reviewed all of the key lines of enquiry (KLOEs) in relation to caring.

Inspected but not rated

Is the service responsive?

At our last inspection we rated this key question good. We have not reviewed the rating at this inspection. This is because we have not reviewed all of the key lines of enquiry (KLOEs) in relation to responsive.

Inspected but not rated

Is the service well-led?

The service was well-led.

Details are in our well-Led findings below.

Good 

Your Choice Homecare

Detailed findings

Background to this inspection

The inspection

As part of a pilot into virtual inspections of domiciliary and extra-care housing services, the Care Quality Commission conducted an inspection of this provider on 28 October 2020 and 6 November 2020. The inspection was carried out with the consent of the provider and was part of a pilot to gather information to inform CQC whether it might be possible to conduct inspections in a different way in the future. We completed this inspection using virtual methods and online tools such as electronic file sharing, video calls and phone calls to gather the information we rely on to form a judgement on the care and support provided. At no time did we visit the provider's or location's office as we usually would when conducting an inspection.

Inspection team

The inspection was carried out by an inspector, a medicines inspector and an Expert by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

This service is a domiciliary care agency. It provides personal care to people living in their own homes. At the time of the inspection there were 20 people using the service, 12 of whom were in receipt of the personal care service.

The service had a manager registered with the Care Quality Commission. 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.

Notice of inspection

We gave the service a short period notice of the inspection. This is because the service was taking part in the pilot into virtual inspections and we needed to gain their consent to be part of this.

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. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all of this information to plan our inspection.

During the inspection-

We spoke with eight people who used the service and one relative about their experience of the care provided. We spoke with five members of staff including the registered manager, the office manager and three support workers.

We reviewed a range of records. This included two people's care records and multiple medication records. We looked at two staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed. We contacted three health and social care professionals who have regular contact with the service, to gain their views.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at training data and quality assurance records.

Is the service safe?

Our findings

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

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- Systems were in place to help keep people safe.
- Staff had received training in safeguarding and those we spoke with demonstrated an understanding of the issues.
- The service's records of safeguarding concerns were complete and appropriate actions had been followed up where required.

Assessing risk, safety monitoring and management

- All staff had completed health and safety training and basic life support.
- Risk assessments were in place for all staff, with regard to lone working and around the current pandemic and keeping safe.
- Individual risk assessments had been completed in relevant areas for people who used the service. These were reviewed regularly and updated as required.

Staffing and recruitment

- People told us there were sufficient staff to meet their needs. Comments included, "I've never known them to be short staffed, they've always managed to fit me in. They even rearranged their times so that I could get a later call," and, "I've never known a time of where the staff haven't turned up."
- There was an up to date recruitment policy and procedure and evidence within staff files that this was followed appropriately.
- Staff files included all appropriate documentation to ensure staff were recruited safely.

Using medicines safely

- Medicines were managed safely and records were complete and up to date.
- There were systems in place to identify and report any medicine errors or incidents.
- Staff had completed medicines training and observations of competence were regularly undertaken to ensure their skills remained up to standard.
- The provider had a clear up to date medicines policy in place.

Preventing and controlling infection

- There was an up to date policy and procedure which included reference to the current pandemic.
- All staff had completed infection control training and were aware of how to use personal protective equipment correctly. There were regular staff spot checks to ensure this was being done.
- The service ensured up to date information was disseminated to staff regularly.

Learning lessons when things go wrong

- Falls, accidents and incidents were documented clearly with appropriate actions completed. Information was used to ensure lessons were learned and improvements made where appropriate to service provision.

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.

At the last inspection this key question was rated as good. We have not reviewed the rating at this inspection. This is because this inspection was carried out as part of a DCA pilot inspection and only part of this key question was reviewed.

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 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 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.

- People's capacity to make decisions was taken into consideration when assessing their care and support requirements. Any change in people's abilities resulted in a referral to the appropriate professional or team to assess.
- Staff had completed mental capacity act training and were aware of the issues involved.

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.

At the last inspection this key question was rated as good. We have not reviewed the rating at this inspection. This is because this inspection was carried out as part of a DCA pilot inspection and only part of this key question was reviewed.

Ensuring people are well treated and supported; respecting equality and diversity

- People told us staff were kind and caring. One person said, "They're very kind. There was one time that I was feeling particularly bad and it was VE day. So, they brought little plates up to my bed with treats that had little flags on it. That really cheered me up." Another person told us, "Everyone is excellent. They're very kind."
- Staff demonstrated an understanding of equality and diversity. There was evidence that people were seen as individuals and their particular needs discussed with them to ensure they were supported appropriately.
- People's dignity was respected by staff. One person commented, "They leave things to me. I can do my own shower and put my dressing gown on. They'll support if I need it. I feel like I've always got a friend coming to help me." A second person said, "They're very respectful of my dignity and my privacy," and a relative told us, "They respect [relative's] dignity. They help [relative] shower and are very discreet and kind."

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

- People were able to express their views in a number of ways. For example, they could comment via regular satisfaction surveys, quality monitoring calls or simply speaking to their care staff.
- One person told us, "I've done a couple of surveys, I'm very pleased with everything." Another said, "I get calls from the management. I am quite happy". A relative said, "There have been one of two suggestions that they've taken on board. They weren't changing [relative's] clothing enough and they do that now."

Is the service responsive?

Our findings

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

At the last inspection this key question was rated as good. We have not reviewed the rating at this inspection. This is because this inspection was carried out as part of a DCA pilot inspection and only part of this key question was reviewed.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- Care plans included information about people's personal history, likes and dislikes, interests and preferences.
- There was clear documentation about how people wished to be supported. People's preferred routines were recorded and adhered to.
- We received written feedback from one person who said, "[Name of registered manager] worked along with me and my medical team. Since then I have never looked back. [Name] and her highly trained carers are professional, kind and caring."
- One person told us, "I only have to say something and its done. [Registered manager] will get things done in minutes or talk me through things."

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 the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- Discussions with the registered manager and other staff evidenced respect for people's diverse needs.
- Spiritual and cultural needs were supported and language barriers had been overcome with innovative use of technology and translation services.
- Staff were fully supported with any special requirements to help them undertake their roles effectively.

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

- Notifications were submitted to CQC as required.
- The provider was open and honest when responding to complaints or concerns raised.

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

- The management team were supportive to staff and ensured they sometimes provided hands on care as part of the staff rota. This enabled them to remain aware of the day to day issues staff may encounter within their roles.
- There were regular staff team meetings and weekly governance meetings to ensure concerns, updates and information were discussed and actioned as required.
- Staff supervisions were completed and actions put in place and followed up appropriately.
- The management team were mindful of staff members' anxieties and the service had been flexible with how and where supervisions took place to ensure staff felt safe.

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

- There was a comprehensive, up to date equality and diversity policy and procedure in place.
- During the pandemic the service were mindful that some people were isolated from family and friends. They endeavoured to ensure people were fully supported with social outings and interaction.
- Staff had calendars of significant events for people so that they could be mindful of these. For example, if someone was in a low mood, staff may be aware that it was a bereavement anniversary. This enabled them to offer more support and understanding at these times.

Continuous learning and improving care

- Monthly reflections completed by staff helped them look back at where things went well or could have gone better in the previous month.
- People's care needs were reviewed and adjusted as required or on a six monthly basis.
- Quality assessments were undertaken with people who used the service in between formal reviews.
- A number of audits ensured actions could be put in place where needed to help improve the service.

Working in partnership with others

- The service worked closely with district nursing services, GPs and local pharmacies to ensure people's care was joined up.
- One health and social care professional said, "I never witnessed bad practice and I have never had any concerns, in fact I recommend Your Choice Homecare to families who come to me for advice on private care and support for their loved ones." Another professional told us, "My interaction with Your Choice has been very positive and no concerns regarding their support has been raised."