

YourChoice Devon Ltd

# YourChoice Devon Ltd

## Inspection report

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16 May 2019

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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:

YourChoice Devon Ltd is a domiciliary care agency. It provides personal care to people living in their own homes in the South Devon area. At the time of our inspection 20 people were receiving personal care. This is the first inspection of the agency since they were registered in 2018.

People's experience of using this service:

The service provided safe and effective care to people. People told us they were confident that they were in safe hands. One person said "I always feel safe with my carers. Absolutely." Care had been taken when recruiting staff to make sure applicants were entirely suitable. New staff received training and supervision to ensure they had the skills and knowledge to meet people's needs safely.

People were confident care staff always arrived on time, stayed for the right length of time, and never missed a visit. People received care from a small team of care staff they knew and trusted. One person said, "They always phone me when a new carer is coming." People told us the care staff were always kind and respectful.

People's needs were assessed before the service began and care plans were drawn up. Any risks to people's health and safety were assessed and staff knew the actions they needed to take to keep people safe. Where people needed assistance from staff to help them manage their medicines, staff were well-trained and followed safe procedures.

Care plans and daily records were kept up to date and gave staff good information on people's health and personal care support needs. A person said, "The owner visits and reviews my plan. He's on the ball." Where people needed assistance to prepare meals, care staff knew their likes and dislikes and dietary preferences.

Care staff were overwhelmingly positive about the management of the service and told us they were well supported. Comments included, "YourChoice Devon is a great company to work for" and "I couldn't be happier to be part of the company which really do put everything into meeting our client's needs and wants. I've never felt so appreciated or happy in a work environment." Staff received good training and were confident the service was well managed.

The provider had systems in place to monitor the service and make sure all areas were working smoothly. People were confident they could raise any concerns or complaints with the provider and these would be addressed promptly. Comments from people we spoke with included, "I can't find any faults."

Rating at last inspection: This was the first inspection of the service since it was registered on 22 June 2018

Why we inspected: This was a planned inspection.

Follow up: We will continue to monitor intelligence we receive about the service until we return to visit as

per our re-inspection programme. If any concerning information is received, we may inspect sooner.

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

## The five questions we ask about services and what we found

We always ask the following five questions of services.

### Is the service safe?

The service was safe

Details are in our Safe findings below.

Good ●

### Is the service effective?

The service was effective

Details are in our Effective findings below.

Good ●

### Is the service caring?

The service was caring

Details are in our Caring findings below.

Good ●

### Is the service responsive?

The service was responsive

Details are in our Responsive findings below.

Good ●

### Is the service well-led?

The service was well-led

Details are in our Well-Led findings below.

Good ●

# YourChoice Devon 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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

#### Inspection team:

The inspection was conducted by one 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:

YourChoice Devon Ltd is a domiciliary care agency. It provides personal care to people living in their own homes in the South Devon area. At the time of our inspection 20 people were receiving 'personal care.'

The service had a manager registered with the Care Quality Commission. The manager is also the provider. This means that they are legally responsible for how the service is run and for the quality and safety of the care provided.

#### Notice of inspection:

This announced comprehensive inspection took place on 15 and 16 May 2019. The provider was given short notice because the location provides a domiciliary care service and we needed to be sure that someone would be in.

#### What we did:

Prior to the inspection we reviewed the Provider Information Record (PIR). The PIR 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 also reviewed the information we held about the service and any notifications we had received. A notification is information about important events which the service is required to send us by law.

We visited the office location on 15 May 2019 to see the registered manager and to review care records, policies and procedures. On the second day we visited four people in their homes and also met one relative. Our expert by experience spoke with seven people on the telephone. During the inspection we met one care worker. After the inspection we received e-mails from eight members of staff.

We reviewed three people's care files, three staff files, staff training records and records relating to the management of the service.

# Is the service safe?

## Our findings

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

People were safe and protected from avoidable harm. Legal requirements were met.

Systems and processes to safeguard people from the risk of abuse

- People told us they were confident that they were in safe hands. One person said "I always feel safe with my carers. Absolutely".
- The registered manager and staff demonstrated an understanding of their safeguarding role and responsibilities. All staff received safeguarding training as part of their induction. Staff could access safeguarding policies and procedures using a secure computer link. They could also find paper copies of the policies in the agency office. Safeguarding was discussed in supervision sessions.
- There had been no safeguarding issues since the agency was first registered.
- There were safe systems in place to protect people from financial abuse. Where people received help with shopping, records were maintained and all monies were accounted for. A person told us, "They buy the odd thing for me and I refund them and I am given receipts".

Assessing risk, safety monitoring and management

- Risks to people's health and safety were assessed and staff knew the actions they needed to take to keep people safe. Risk assessments included falls, malnutrition, dehydration, catheter care and skin care. Where risks had been identified records showed staff followed safe procedures and knew the actions to take if they identified any concerns. If people were at risk of dehydration, fluid intake levels were recorded. If people were catheterised, output levels were recorded. Staff sought people's agreement to seek advice from health professionals to ensure people received the right support and treatment.
- The service used a computer planning system to ensure visits to people were planned safely. People told us they received visits at times they expected, and they had never experienced a missed visit.
- People told us they knew all the staff and felt safe because they knew the staff who would be visiting. A person told us, "They always phone me when a new carer is coming".

Staffing and recruitment

- People and staff confirmed that people's needs were met and felt there were sufficient staffing numbers. A member of staff told us their rota was always well planned and allowed sufficient travel time between visits to ensure they always arrived on time and were never rushed. There were sufficient staff employed to cover unexpected issues such as sickness.
- Care had been taken when recruiting staff to make sure applicants were entirely suitable. Where a person's needs increased or decreased, staffing was adjusted accordingly. New staff received training and supervision to ensure they had the skills and knowledge to meet people's needs safely.

Using medicines safely

- Staff had received medicine training and competency assessments to ensure they were competent to

carry out this task.

- Most people managed their own medicines. However, some people told us the care staff reminded them or checked that they had taken their tablets. One person said, "I have blister packs and they check I have taken them". Another person said "Yes. They line them up and they make sure I take them."
- Where people needed assistance from care staff to help them manage their medicines, records showed they had received their medicines in line with the prescriber's instructions. Medicines administration records (MAR) provided information about each medicine prescribed. Staff had completed the MAR accurately for each medicine administered.
- If people required assistance to apply prescribed creams, records were maintained accurately. People confirmed that the care staff asked their permission before applying creams. A person said, "[Care worker] changes her white gloves each cream she applies."

#### Preventing and controlling infection

- Staff followed safe infection control procedures. All staff received training and instruction during their induction on infection control.
- Personal protective equipment was readily available to staff when assisting people with personal care. Stocks were held in the agency office and care staff could collect supplies whenever they visited the office. People told us care staff always wore gloves and aprons when appropriate. A person said, "They all wear uniforms and all protective gear is disposed of properly."

#### Learning lessons when things go wrong

- There was evidence that learning from incidents and investigations took place and appropriate changes were implemented. For example, they had identified concerns relating to a person who was at risk of overdosing. They issued stricter guidelines about administration. They also redesigned the MAR sheet to give more information about each medicine, and to show the times each medicine should be administered.
- The registered manager told us they always took any incidents or concerns seriously, no matter how small, and would investigate and try to resolve issues to everyone's satisfaction. There was a 'no blame' culture. Supervisions were used to identify issues and agree how things could be improved to avoid problems recurring.



# 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

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

- Before people began to receive care from the agency their needs were assessed, and a care plan was drawn up and agreed with them.
- The service was well planned. People received care from a small and consistent staff team. People knew the staff who would be visiting them each day. People told us the staff always arrived at the time they were expected to visit and stayed for the correct amount of time. Comments included, "They normally come on time and they call if they are going to be late." and "They are always on time". If staff were running late, people told us they always received a telephone call to explain the reasons. A person said, "They proactively contact us if they are going to be late". Another person told us, "They are never late so they never have to call." People told us staff were never in a rush to leave and were willing and able to stay longer if needed.

Staff support: induction, training, skills and experience

- People said they thought the staff were well trained and competent in their jobs. A person told us, "I've seen them in training with the experienced carers shadowing new staff".
- Care staff completed an induction when they started work at the service, which included training on topics the provider had identified as essential, for example, moving and handling, medication administration and safeguarding. They also spent several days working alongside more experienced staff until they were competent to work on their own.
- The provider had identified a range of topics essential to the role. Their training matrix showed staff received ongoing training and regular updates on these topics, and any additional training needs to meet people's individual needs. Additional topics included dementia, falls awareness, and behaviours that challenge. Staff were also supported to gain relevant qualifications. A member of staff told us, "I am striving towards my NVQ level 4 in Health and Social Care in which the company is supporting me to develop my career. The company has given me opportunities to show my skills and knowledge and put into practise out in the community and office base work".
- Staff received on-going supervision and appraisals. Staff told us they felt well supported in their roles. Comments included, "The company is always reachable 24 hours of the day and I am supported when needed" and "The management team are very supportive and if we have any queries or concerns then we can instantly get in touch".

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

- Some people received assistance from the agency with their meals. Care staff were given information about each person's dietary needs in their care plan.
- Some people told us care staff helped them by heating up ready meals, or meals that had been prepared previously by relatives. People told us they were happy with the help they received. One person said, "They

help me wash and dress and also they help with cleaning, cooking my meals, and washing up." Another said, "They make sure I have a drink and that I am hydrated."

Staff working with other agencies to provide consistent, effective, timely care

Supporting people to live healthier lives, access healthcare services and support

- People told us the care staff knew how to respond to any specific health and social care needs. A person told us "Sometimes they call the doctor for me." People also told us the care staff liaised well with their families regarding specific health or care requirements.
- A member of staff told us how they supported a person with their care needs. They described the support the person received from the community nursing team with specific nursing tasks.
- The registered manager told us that if a person was poorly they had instructed care staff to let them know immediately. They would ensure the person received appropriate medical treatment, for example by telephoning the person's GP. They followed this up by making sure medical attention was received. Staff would stay with the person if necessary. They would check again later to make sure the person was alright, and provide any additional help needed. They gave an example of a person who suffered with a urine infection. They had liaised closely with the person's GP to make sure they received the right care.

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.
- We checked whether the service was working within the principles of the MCA.
- Before people received any care and treatment they were asked for their consent and staff acted in accordance with their wishes. People told us the care staff always asked for consent before they commenced personal care. One person said, "They always ask my consent."
- Care plans contained information about people's next of kin, and any relatives who had legal authority to act on the person's behalf if they were unable to make important decisions about their health and welfare, or their finances.

# 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

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

- Every person we visited or spoke with on the telephone told us they were very happy with the service. They said the care staff were always kind and caring. We received many positive comments including, "They're a lovely group. They sit and have a chat and they've always got time for me", "They are all very caring. They help me", and "They're a friendly group – they come in singing – they're like an extended family!"
- We observed a care worker supporting a person to move from their chair to a wheelchair. The care worker was cheerful, gentle and attentive. They sought permission before carrying out the task. They chatted to the person as the manoeuvre was carried out. The person's relative told us "All the carers are nice".
- We heard how care staff had often given up their own time to support people. For example, when a person's family went away on holiday a care worker knew the person would miss their company. In their own time, the care worker took the person out for the afternoon. On another day they took the person into the garden and had a cup of tea and a chat with them.
- Care workers understood people's need for emotional support when they were unwell or upset. They visited people in their own time, during their breaks, to check they were alright. Care workers had also stayed on at the end of a visit to sit and have a chat.
- Care workers were willing to do additional things that made a big difference to the person. For example, by collecting a prescription, posting letters, feeding pets and garden birds, and taking a dog for a walk.
- The provider showed they cared about each person by sending them birthday and Christmas cards.
- The provider cared about their staff team. Care staff praised the provider for the care they received. Comments included, "I have never worked for such a considerate company, they always try to accommodate me. They are also very consistent with checking up on me to see how I'm feeling and getting on. They are very efficient at sorting out better ways to help us, and to help the clients".

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

- People were involved and consulted about all aspects of the service. The registered manager visited people regularly to review their care and to check they were happy with the service. A person told us they had been "impressed" when the registered manager carried out the first care visit. They had also provided care when care staff were on holiday or off sick. The registered manager told us this was an opportunity to seek people's views on the service, and to make sure they were satisfied the service was meeting their needs.

Respecting and promoting people's privacy, dignity and independence

- Care staff treated people with dignity and respect when helping them with daily living tasks. People and their relatives told us they were satisfied that the care staff always respected both their dignity and privacy.

One person said, "They always put a little towel over me to cover my modesty." Another said, "I think they do respect my privacy."

- Care staff understood the importance of encouraging people to remain as independent as possible. We heard how care workers worked alongside people where possible with tasks such as cleaning, changing bedding and laundry.

# Is the service responsive?

## Our findings

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

People's needs were met through good organisation and delivery.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control

- People received personalised care and support that met their needs and preferences. Care plans were drawn up through consultation with people and their relatives. Care plans provided good information about each person's health and social care needs.

- The registered manager and senior carer regularly visited people to review their care needs and to review and update their care plan. People and their relatives were familiar with the care plans and confirmed they were regularly reviewed. Comments included, "They review it regularly" and "The owner visits and reviews my plan. He's on the ball."

A person who had previously received care from other agencies told us, "They're the best care team we have ever had. They really engage with us".

- People told us the care staff followed the care plans and made sure they received the help they needed. A person told us, "They're a nice team. They're all lovely and always ask if I need anything".

- Care workers completed a record of each visit. The daily reports showed care plans had been followed and all tasks had been completed in line with the care plans.

- People were given information in a format suited to their needs. The provider told us they would provide information in any format the person requested. For example, they had provided an audio recording of the complaints' procedure for a person with a visual impairment.

Improving care quality in response to complaints or concerns

- People told us they knew how to make a complaint and would not hesitate to contact the registered manager or the senior carer if they had any concerns. The registered manager and senior carer visited each person regularly. This gave people opportunities to raise issues, concerns and compliments, no matter how small. For example, a person had complained that staff did not fill their teacup up enough. The problem was resolved by making sure all staff knew the person liked their tea cup filled to the top.

- Most people we visited and spoke with told us they had never needed to make a complaint, although they were confident any problems would be resolved satisfactorily if necessary. Comments included, "I find them all fine. I rarely have a problem" and "I can't find any faults."

End of life care and support

- At the time of this inspection there were no people receiving care who were close to the end of their lives. The registered manager told us if a person receiving care was close to the end of their life they would make sure staff received appropriate training and end of life care plans would be drawn up.

## 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

The service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Planning and promoting person-centred, high-quality care and support with openness; and how the provider understands and acts on their duty of candour responsibility

- The provider understood their responsibilities in relation to duty of candour, and to meet with the requirements of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014, Health and Social Care Act 2008 (Regulated Activities) (Amendments) 2015.
- The provider understood the importance of openness, honesty and transparency. They also understood the need to inform all relevant agencies of any significant incidents or issues that may affect people's care or the smooth running of the service.

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

- The agency was a small, family run business. The registered manager was also one of the providers. People who received a service, relatives and staff were entirely positive about the management of the service. Comments included, "The owner often visits and helps the carers. He's very 'hands on'" and "The owner is very friendly. He talks about everyday things. I never have to call the office." One person was very complimentary about the provider/registered manager and said, "You couldn't have anybody better".
- Care staff understood their roles and were positive and happy about their jobs. All of the staff team contacted us by e-mail during or after the inspection. They praised the registered manager for their management of the service and support to staff. A care worker told us, "[Registered manager] has ensured my training and supervisions are up to scratch, and he always answers the phone if I have a query or problem whilst at work". Another care worker said, "I work for them because we share a passion to support people in the community" They went on to say, "Nothing is ever too much to ask for. Help, advice and support is on hand no matter how small or big. It's always dealt with so professionally and with a smile. I feel understood, respected, and part of a fab team".
- Care workers told us the management structure was effective, with opportunity for career progression. A member of staff said, "The company is a great place to work for as I am supported and encouraged to progress within the company, training is always given to keep my high standards of care. The company is always reachable 24 hours of the day and I am supported when needed.

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

- The service's vision and values centred around the people they supported. The provider told us, "Our philosophy is 'Think of everyone as your own mum and dad". Our motto is 'Your Choice Matters'".
- The service sought feedback from staff and people who used the service to identify areas for

improvement. People's views were sought in a variety of ways, including questionnaires, and through reviews of their care.

- The provider told us they actively involved staff in the service in various ways. They held regular staff meetings where all staff members could talk openly about any issues or concerns that they may have. They sent out regular newsletters and feedback forms to the staff team. Staff feedback was welcomed and used to help them continuously improve the service.
- Results from questionnaires were collated, and the provider used the information to help them improve the service. The most recent survey results showed a high level of satisfaction in the service. Where comments showed improvements could be made, actions were identified to address the issues. For example, some people said they would like to see staff wearing uniforms. The provider acted on these comments by providing new uniforms to all staff.
- People were valued as individuals and treated with respect. Staff had received training on equality, diversity and inclusion. The provider told us in their PIR, "We value the unique qualities of every individual that uses our service seeing them as an individual, not just a list of care needs". We heard examples of how staff respected people's right to live the way they wanted.

#### Continuous learning and improving care

- Systems were in place to audit the quality of delivery of care. All aspects of the service were regularly monitored, including medicine administration, daily reports and care plans. Spot checks were carried out to ensure care staff followed safe practice when providing care.
- The provider told us in their PIR, "All of the management team at YourChoice Devon attend regular training courses to ensure that they have the knowledge and experience to continually lead the service at a high standard".
- A comprehensive audit had been carried out on all areas of the service by another agency who had been sub-contracted by the local authority to act as a broker for care contracts. The most recent audit showed most areas of the service were satisfactory. Where improvements had been recommended the provider was able to show that these had been acted on and addressed.

#### Working in partnership with others

- The service worked with other health and social care professionals in line with people's specific needs.
- The provider worked closely with other providers in the area to help them keep up to date with good practice, and to share training and learning opportunities.