

Welcome Independent Living Ltd

Welcome independent Living Ltd

Inspection report

Elphin House 1 New Road, Mytholmroyd Hebden Bridge HX7 5DZ

Tel: 01422843999

Date of inspection visit: 02 November 2022

Date of publication: 16 November 2022

Ratings

Overall rating for this service	Good •
Is the service safe?	Good
Is the service effective?	Good
Is the service caring?	Good
Is the service responsive?	Good
Is the service well-led?	Good

Summary of findings

Overall summary

About the service

Welcome Independent Living Ltd is a domiciliary care service providing personal care to people in their own houses and flats in the community. At the time of inspection, the service was providing personal care to 105 people. Not everyone who used the service received personal care. Care Quality Commission (CQC) only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do, we also consider any wider social care provided.

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

We have made a recommendation about the safe management and recording of some medicines. Staff were trained to recognise potential risks and signs of abuse. Risks to people's safety and wellbeing were assessed and reviewed by managers. Staffing levels were safe and reviewed regularly by managers. Staff used personal protective equipment (PPE) appropriately when supporting people.

People's needs were assessed and reviewed regularly, and staff were trained to provide support whilst promoting independence. People told us staff were polite and always asked before providing support. People were involved in decisions about their support needs.

People had access to healthcare professionals. People and their relatives told us they were involved in the support planning process to ensure it met their needs.

The registered manager ensured systems were in place to monitor the running of the service. The provider had procedures in place to receive feedback on how to improve support. Lessons were learned when concerns were raised, and these were communicated to staff. Staff worked well in partnership with other agencies to deliver effective support.

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 14 December 2018).

Why we inspected

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

Recommendations

We have made recommendations about the safe management and recording of some medicines.

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.	



Welcome independent Living Ltd

Detailed findings

Background to this inspection

The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Health and Social Care Act 2008.

Inspection team

This inspection was carried out by two inspectors, an assistant 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 houses and flats.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

Notice of inspection

We gave the service 24 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the provider or registered manager would be in the office to support the inspection.

Inspection activity started on 2 November 2022 and ended on 3 November 2022. We visited the location's office on 2 November 2022.

What we did before the inspection

We sought feedback from the local authority and professionals who worked with the service. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with the registered manager, the nominated individual, 2 office staff, and 5 support staff. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

We spoke with 5 people receiving support and 6 relatives. We reviewed 5 people's support records. We reviewed records and audits relating to the management of the service. We asked the registered manager to send us documents before and after the on-site inspection. These were provided in a timely manner and this evidence was included as part of our inspection.



Is the service safe?

Our findings

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

At our last inspection we rated this key question requires improvement. At this inspection the rating has changed to good. This meant people were safe and protected from avoidable harm.

Using medicines safely

• The provider ensured people's medicines were managed safely. However, body maps did not always record the location of people's pain medicine patches in line with manufacturer guidance. We spoke with the provider about the immediate concerns we observed, and the provider acted appropriately. We noted there was no impact of harm on people.

We recommend the provider consider current guidance on pain medicines and take action to update their practice accordingly.

- People's medication records confirmed they received their medicines as required.
- The registered manager ensured staff received appropriate training in the management of medicines, and competency assessments were completed by managers.

Systems and processes to safeguard people from the risk of abuse

- The provider had appropriate systems in place to safeguard people from abuse.
- The registered manager ensured staff were aware of the different types of abuse. Staff had been trained in their responsibilities for safeguarding adults and knew what action to take if they witnessed or suspected abuse.
- Actions were taken by the provider to keep people safe and to share any lessons learned to help prevent recurrences.

Assessing risk, safety monitoring and management

- The registered manager assessed individual risk and implemented controls to mitigate concerns.
- Risks associated with the provision of peoples' support had been assessed. Risk assessments were detailed, and person centred.
- Staff had completed the appropriate mandatory training to keep people safe.

Staffing and recruitment

- The provider had effective recruitment processes. Recent records showed staff being recruited safely, with appropriate checks and competencies
- The provider ensured there were enough staff, with the right training and skills, to meet people's needs.
- The deployment of staff was well organised by the registered manager, ensuring staff had enough time to meet people's needs safely and without rushing.

Preventing and controlling infection

- The provider used effective infection, prevention and control measures to keep people safe, and staff supported people to follow them.
- The registered manager had plans in place to alert other agencies to concerns affecting people's health and wellbeing.
- The provider's infection prevention and control policy was up to date.

Learning lessons when things go wrong

- The provider ensured lessons were learned from investigations into incidents, and actions were put in place to stop similar incidents occurring.
- The registered manager investigated all accidents and incidents fully. Any safeguarding concerns were shared with the appropriate authorities.



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 our last inspection we rated this key question good. The rating for this key question has remained 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

- People's needs were assessed by the registered manager before support commenced.
- The registered manager maintained an overview of people's changing needs to make sure assessments and support plans were up to date.
- People told us they had been involved in the initial assessment of their needs and in developing their support plan.

Staff support: induction, training, skills and experience

- Staff received effective induction, training and supervision to ensure they were skilled and competent to carry out their roles.
- The provider completed regular supervision and spots checks with staff to ensure they were providing the correct support to people.
- Ongoing training was completed by all staff as required. Staff were supported with job progression and professional development.

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

- The provider ensured people's support files included information about their needs regarding fluids and nutrition.
- Staff monitored people if they were at risk of poor nutrition and involved healthcare professionals where required.
- The registered manager recognised people's cultural and religious needs and ensured staff respected people's needs and wishes when supporting them at mealtimes.

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

- The provider worked closely with a range of professionals and partner agencies, to ensure people received effective support.
- The registered manager ensured people were encouraged to make healthy lifestyle choices.
- Support records showed advice given by health professionals was acted upon, and staff were prompt in raising concerns or issues.
- Oral health support needs were met by staff where this was identified as a need; this was recorded in support plans.

Ensuring consent to care and treatment in line with law and guidance

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The MCA requires that, as far as possible, people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA. When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty. We checked whether the service was working within the principles of the MCA.

- The provider enabled people and where appropriate their relatives, to be involved in decisions about their support and detailed mental capacity assessments and best interest decisions were recorded as well as consent.
- Staff demonstrated an awareness of supporting people to make decisions and understood the principles of the MCA.
- Relatives said staff respected people's wishes and preferences. One relative told us, "Staff continually support [my relative] with their best interests in mind. They know [my relative] well and have a real understanding of their needs."



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 our last inspection we rated this key question good. The rating for this key question has remained 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

- People received kind and compassionate care from staff who used positive, respectful language which people understood and responded well to.
- The registered manager was confident in supporting equality and diversity. This had a positive impact on peoples' lives. For example, staff were recruited for their knowledge of cultural diversity.
- Staff received equality training and were able to support people's religious and cultural beliefs.

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

- The provider ensured people were fully involved in decisions about their support.
- People said they were asked regularly if they wanted to make any changes to their support plans, and where they did, we saw the plans were changed accordingly.
- Where appropriate, the service supported people to access advocacy services. Advocates provide independent support to people who, for whatever reason, may find it difficult to express their views.

Respecting and promoting people's privacy, dignity and independence

- Staff promoted people's independence and ensured privacy was maintained.
- Support plans described what people can do for themselves and staff prompted this to ensure independence was maintained.
- Staff understood the importance of respecting people's privacy and supporting them to be an independent as possible in their own home.
- People told us staff were respectful and compassionate. One person said, "Staff are very kind people; they support me in the way I've asked them to and they talk to me very well."



Is the service responsive?

Our findings

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

At our last inspection we rated this key question good. The rating for this key question has remained 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

- The provider had processes in place to enable staff to focus on people's quality of life outcomes; these were regularly monitored and adapted.
- The registered manager ensured people's support plans described their health and social care needs in detail. Support plans provided staff with clear guidance and were person-centred, containing people's likes, dislikes and preferences.
- Staff had a good understanding of people's needs and told us the registered manager kept them informed of any changes to people's support.

Meeting people's communication needs

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

- The registered manager ensured people had their communication needs assessed as part of their initial assessment; these needs were regularly reviewed.
- The provider enabled people to access information in different languages, easy read versions and in large print if needed.
- The registered manager ensured staff were recruited who could meet the support needs of people whose first language was not English.

Improving care quality in response to complaints or concerns

- The provider had processes in place to allow people to raise concerns and complaints easily.
- The registered manager dealt with concerns promptly and shared lessons learned with staff to improve the quality of support.
- Relatives told us managers were responsive to changes and concerns. One relative said, "Originally [my relative] wanted the teatime visits to be earlier, but we were told the service couldn't fit it in; we spoke to the registered manager and they resolved the issue for us."

End of life care and support

- Processes were in place to support people with end of life decisions.
- Staff knew how to support people and how to access the appropriate health professionals to ensure end

of life needs were met. • At the time of our inspection there was no one receiving support who was at the end of their life.	



Is the service well-led?

Our findings

Well-led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

At our last inspection we rated this key question good. The rating for this key question has remained good. 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; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- The registered manager led by example and demonstrated an open and transparent approach; managers were passionate about promoting a person centred, inclusive and empowering staff culture.
- The provider worked closely with people to ensure staff understood their support needs and could deliver quality outcomes.
- The provider had robust processes in place for receiving feedback and suggestions on how to improve the quality of support.
- Relatives said managers were good at communicating with them and kept in regular contact. One relative told us, "They are really a solid team and genuinely care for [my relative]; staff always go above and beyond what they are supposed to do. Managers communicate well with us and know [my relative] really well."

How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong; Continuous learning and improving care

- The provider fully understood their responsibilities around duty of candour. This was underpinned by the open and honest culture and by appropriate policies and procedures.
- People felt comfortable raising concerns with the registered manager and were confident they would be listened to.
- Notifications were sent to relevant authorities in a timely manner and the registered manager responded promptly to any follow-up questions.
- The provider had a series of audits in place to monitor, support, and highlight areas for improvement. Any improvements were actioned promptly to improve outcomes for people receiving support.

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

- The provider had effective systems in place to monitor and assess the quality of the support provided, including monthly audits.
- The registered manager and staff understood the requirements of their roles, and staff felt well supported by the management team.
- The management team were actively involved in people's support, carrying out calls and working alongside staff to provide support and ensure standards were maintained.

Working in partnership with others

- The provider had systems in place to ensure communication with other agencies was effective and led to positive outcomes for people. The registered manager explained examples of joint working which mitigated peoples' risk and promoted their independence.
- People's support records showed involvement and guidance from other agencies, for example, the district nursing team and GP.