

Yorkshire Homecare Limited

# Yorkshire Homecare Limited

## Inspection report

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10 January 2020  
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23 January 2020

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## Ratings

Overall rating for this service

Inspected but not rated

Is the service safe?

**Inspected but not rated**

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?

**Inspected but not rated**

# Summary of findings

## Overall summary

Yorkshire Homecare Limited is a domiciliary care agency providing care to people in their own homes and flats. This service was registered with the Care Quality Commission in January 2019, although had only provided very limited personal care since registration. At the time of the inspection three people were receiving this service. We have been unable to allocate a rating to our key questions to give an overall rating as there was insufficient service history for us to form a judgement.

People's experience of this service and what we found

Recruitment systems were in place to ensure staff had suitability checks before working with people. Risks were identified for individuals, although needed more detail to give staff clear guidance. Safe procedures were in place to support people with medicines, although recording needed to be clearer. The provider showed us how new documentation was being introduced to include more detail in records. Accidents, incidents and safeguarding documentation and procedures were in place, although nothing had happened to record.

Feedback from people showed confidence in staff skills to do their work. Systems were in place for staff training, appraisal and supervision.

Mental capacity information was in place to support people's rights. 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 said staff had a caring attitude and knew their individual needs well. Staff were reliable, kind and respectful in people's homes. Care documentation was being implemented and improved for staff to have clearer information about each person.

There was a process in place to address concerns and complaints; the provider confirmed none had been received about the service so far. Policies and procedures related to the regulations although contact numbers needed to be included, such as for safeguarding.

The service was in the early stages of development and therefore had not had time to demonstrate how effective the systems and processes were. No formal staff meetings had been established due to the size of the service. The provider and manager had a shared clear vision about the direction of the service and understood their responsibilities.

Rating at last inspection

The service was registered with us on 9 January 2019 and this is the first inspection.

Why we inspected

This was a planned inspection based on the date the service was registered with the Care Quality

Commission.

#### 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?**

Insufficient service history was available for us to rate this key question.

Details are in our safe findings below.

**Inspected but not rated**

### **Is the service effective?**

Insufficient service history was available for us to rate this key question.

Details are in our effective findings below.

**Inspected but not rated**

### **Is the service caring?**

Insufficient service history was available for us to rate this key question.

Details are in our caring findings below.

**Inspected but not rated**

### **Is the service responsive?**

Insufficient service history was available for us to rate this key question.

Details are in our responsive findings below.

**Inspected but not rated**

### **Is the service well-led?**

Insufficient service history was available for us to rate this key question.

Details are in our well led findings below.

**Inspected but not rated**

# Yorkshire Homecare Limited

## **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 Care Act 2014.

#### Inspection team

The inspection was carried out by one 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.

The service had a manager who was in the process of becoming registered with the Care Quality Commission. When registered, 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 48 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the provider or manager would be in the office to support the inspection.

Inspection activity started on 10 January 2020 and finished on 23 January 2020. We visited the office on 10 January 2020.

#### 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. The provider was not asked to complete a provider information return prior to this inspection. We took this into account when we inspected the service. We used all of this information to plan our inspection.

During the inspection

We spoke with two people by telephone who used the service. We spoke with the provider and the manager. We reviewed a range of records, including policies and procedures, two people's care records and medication records. We looked at two staff files in relation to recruitment and staff supervision.

# 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 service. We have been unable to allocate a rating to this key question as there was insufficient service history for us to form a judgement.

Systems and processes to safeguard people from the risk of abuse

- The provider and manager understood their responsibilities to report safeguarding concerns. No concerns had been received for the service to report.
- People felt safe and told us they trusted the staff.
- A safeguarding policy and procedure was in place and highlighted signs of abuse and how to report concerns. There was no contact number for staff to report concerns and the manager said they would include this.

Assessing risk, safety monitoring and management; Using medicines safely

- Risk assessments were in each care file, although some needed further detail for staff guidance. For example, the safe use of equipment.
- Safe systems were in place to manage medicines and the manager had introduced a clear medicine administration record (MAR) for staff to use.
- Only one person needed medicines support and they said they were happy with this aspect of the service.

Staffing and recruitment

- At the time of the inspection, only the manager and one member of staff provided personal care in a very limited way to a small number of people. The provider said further recruitment would take place in line with demand for the service.
- There were clear recruitment procedures in place which included suitability checks before staff could support people.

Preventing and controlling infection

- There was a good supply of personal protective equipment and a company uniform for staff.
- Training was available to support staff with preventing the spread of infection.

Learning lessons when things go wrong

- The provider and manager were aware to use opportunities as the service developed, to identify where lessons could be identified for future learning.
- The manager told us they felt it was important to establish an open culture in which staff could speak out if errors were made, and learn from these.

# 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 of this service. We have been unable to allocate a rating to this key question as there was insufficient service history for us to form a judgement.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- The manager assessed people's needs and the assessment form clearly illustrated the different types of support each person may need.
- The manager told us people's needs determined the level of training staff needed and if specialist training was required to meet individual needs, this would be provided.

Staff support: induction, training, skills and experience

- There was evidence in staff files of induction and training. The service had a training room to support practical training, such as in the use of equipment. The manager said there was a mandatory programme of training, which would be face to face so staff would learn interactively.
- The manager told us they were establishing systems to check staff competency and training needs, and to ensure staff had regular supportive supervision and appraisal. They had devised a schedule for the year ahead to ensure staff support was regular.

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

- The manager said they provided whatever support people requested and staff were aware to ensure drinks were always offered, even though people they supported were independent. Care records highlighted people's individual dietary needs and the level of support they needed.
- One person said staff helped them with their frozen meals and always offered them a choice.

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

- The provider and manager were committed to establishing links with other agencies to support people's care.
- The manager knew who to contact if people needed specialist support for their healthcare needs.

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.

- The manager was aware of the relevant legislation regarding the MCA and people's rights.
- Documentation was clear in care plans regarding consent to care and treatment.

# 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 of this service. We have been unable to allocate a rating to this key question as there was insufficient service history for us to form a judgement.

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

- Care documentation recognised people's equality, diversity and human rights and the manager understood their role in ensuring people were not discriminated against.
- People said staff were kind and caring and supported their individual needs. One person described a good relationship with staff and said, "We get on like a house on fire." Another person said staff knew their particular preferences.

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

- The manager told us people's views were sought and they were involved as partners in their care and support. There were plans in place to meet individuals face to face and discuss their care so they could make informed decisions.

Respecting and promoting people's privacy, dignity and independence

- Care records and daily notes showed people's independence was promoted. The manager told us one person had fluctuating levels of support according to how capable they felt and staff ensured the person was able to do as much for themselves as they wished and could manage.
- People said staff respected their privacy and dignity when providing care and support.

# 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 of this service. We have been unable to allocate a rating to this key question as there was insufficient service history for us to form a judgement.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences; 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 manager had improved the care documentation to ensure these were person-centred and key information was available to staff about people's individual care and support.
- People's care records included an overview summary of key information to enable staff to quickly identify each person's needs and preferences.
- Care documentation included details of what was important to each person and who their key family members or friends were, as well as social backgrounds and life histories.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- The provider and manager were considering ways to make information accessible to people who may have difficulty reading or understanding written information. The provider was considering how technology may be able to support people's communication needs.
- People's communication needs were assessed and details of any required support was documented.

Improving care quality in response to complaints or concerns

- There was a system in place for managing and responding to any complaints or concerns. The provider and manager confirmed no complaints about the service had been received.
- People knew how to complain and they said they could ring the office, where they were confident the manager would respond.

# 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 of this service. We have been unable to allocate a rating to this key question as there was insufficient service history for us to form a judgement.

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

- The manager had only been in post one week and had begun to establish systems and processes for assessing and monitoring the quality of the provision.
- The provider was supportive of the manager in their role and they were developing a clear structure for new staff coming into post as the service developed.

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

- The manager had sent a letter to those involved in the service, to introduce themselves and welcome any contact.
- Surveys had been sent out to people just prior to the inspection and the manager was awaiting responses to collate the findings and identify areas to improve based upon the feedback. The manager planned to carry out surveys with the staff team, once numbers of staff increased as the service developed.
- People felt consulted and involved and were happy with the reliable service provided. One person said, "I'm very happy with the service. It's brilliant."

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

- The service was not fully established, with only a very small number of people and staff. The provider and manager discussed how they could promote an open and transparent culture as the service increased in size in order to embed good working practices.
- The provider understood their responsibility under the duty of candour.

Continuous learning and improving care; Working in partnership with others

- The manager told us they were keen to establish ways of working in partnership with others to share good practice and ideas for innovative service delivery.
- The manager was committed to their own learning and development to enhance their skills in the role.
- The provider told us they worked with a recognised company to ensure policies and procedures reflected up to date legislation.