

Tailored Care Services Ltd

Main Office

Inspection report

Unit 16, Massarellas Yard
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Tel: 07534450280

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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

Main Office is a domiciliary care agency providing personal care to people living in their own homes. The service is known locally as Tailored Care Services. At the time of our inspection there were 18 people using the service. 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.

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

At the time of the inspection, the location did not support anyone with a learning disability or an autistic person. However, we assessed the care provision under Right Support, Right Care, Right Culture, as it is registered as a specialist service for this population group.

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

Right Support: People were supported by a regular team of staff who knew them well. This promoted continuity of care. People were happy with the care and support they received. Staff enabled people to have access to specialist health and social care services. 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.

Right Care: People received consistent care from staff who knew them well. People and those important to them were involved in planning their care. People's needs and preferences were assessed prior to receiving the service. There were enough appropriately skilled staff to meet people's needs and keep them safe. Staff understood how to protect people from poor care and abuse. Risk assessments identified and reduced any risks to people and staff.

Right Culture: People received care that was tailored to their needs. The registered manager and care team listened and responded to people's views. Quality assurance and monitoring systems were used to identify shortfalls and improve the service for the people who used it. People received good quality care, support and treatment because trained staff could meet their needs and wishes. People were supported to maintain good health, were supported with their medicines and had accessed healthcare services when needed. Staff prepared food and drink to meet people's dietary needs and preferences.

The registered manager and staff worked effectively with community health and social care professionals to make sure people's needs were met. People knew how to raise issues or complaints, and said the service was responsive to their needs. People felt consulted and involved in the running of the service.

We made a recommendation about the provider's recruitment processes.

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 29 January 2021 and this was the first inspection.

Why we inspected

This was the first inspection of a newly registered service.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

This was an 'inspection using remote technology'. This means we did not visit the office location and instead used technology such as electronic file sharing to gather information, and video and phone calls to engage with people using the service as part of this performance review and assessment.

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.

Main Office

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

The inspection was carried out by 1 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 service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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.

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.

What we did before the inspection

We reviewed information we had received about and from 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 (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 used all this information to plan our inspection.

During the inspection

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

Inspection activity started on 15 November 2022 and ended on 30 November 2022. We spoke with 2 people who used the service and 8 relatives. We spoke with the registered manager and the deputy manager. The registered manager was also the nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider. We reviewed 4 people's care plans and documents relating to the management of the service. We received comments from 3 staff members regarding their experience of working at the service.

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 had systems in place to safeguard people from abuse.
- People said they felt safe with the staff. One person said, "The care I am getting is excellent, I have 2 carers who come 4 times a day. I am highly delighted with the care. They go beyond what is needed and they are like part of the family." One person's relative said, "Yes, [my relative] is safe. We are satisfied with the care. No issues, they are nice people. They turn up when they should. They go above and beyond what is needed. [My relative] asked them to change the curtains and they did. If I haven't got around to buying milk and bread, they will get it."
- Staff received training in safeguarding, so they understood how to safeguard people from poor care and abuse. One staff member told us, "I had training on safeguarding as part of my mandatory training, and the management is always ready to listen to any concerns regarding safeguarding. We always get refresher training from the management."

Assessing risk, safety monitoring and management

- Risks associated with people's care were identified and were managed safely.
- People's care documents included environmental risks. This ensured the safety of people and staff.
- Staff were aware of risks and knew what actions to take to minimise them.

Staffing and recruitment

- Overall, the provider had a system to make sure staff were recruited safely.

We recommend the provider consider current best practice guidance on staff recruitment and take action to update their practice accordingly.

- Staff had a Disclosure and Barring (DBS) check and references were sought before they started work. DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.
- People confirmed the same staff. usually visited them. One relative said, "More or less [my relative] has the same ones. They are lovely people."

Using medicines safely

- The provider had a system in place to make sure people received their medicines safely.
- People were happy with the support they received with their medicines.
- People's care plans include information about how to support them to take their medicines as prescribed.

- Staff received training in the safe handling of medicines and received competency checks to ensure they were competent.

Preventing and controlling infection

- People received care from staff who had received infection control training.
- The provider made sure an adequate supply of personal protective equipment (PPE) was available to staff.
- People confirmed staff used PPE appropriately and washed their hands. One person said, "Yes, [staff] always wear them all and wash their hands."
- The management team checked staff were using PPE appropriately during spot checks they conducted.

Learning lessons when things go wrong

- The registered manager explained that complains, accidents and incidents, and safeguarding concerns were all used to identify trends and patterns and to develop the service and mitigate future risks to people.
- Learning was identified and used in a timely and effective way and information was shared within the care 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

- People's needs were assessed, and care was delivered in line with standards, guidance and the law.
- People's care plans were person centred and included their preferences.
- Overall, people and their relatives told us they were happy with the care and support they or their family member received. One person said, "They are excellent."

Supporting people to eat and drink enough to maintain a balanced diet; Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- People's needs around eating and drinking were recorded in their care plans and people were supported to make sure they received good nutrition and hydration where this was part of their care package.
- Staff were aware of people's dietary needs and people who required specialist diets were supported appropriately.
- Records showed the care team worked alongside other professionals when appropriate.

Staff support: induction, training, skills and experience

- Staff received the training and support they required and had the necessary skills, knowledge and experience to perform their roles.
- One person said, "[Staff] are all trained well, and they always do a handover to new staff." One relative told us the registered manager made sure staff had specialist training needed to meet their loved one's specific physical needs. Another relative said, "They are excellent and very patient with [person] and their dementia. [Person] can get very irritable and agitated. They calm [person] down."
- The registered manager told us the deputy manager had undertaken a 'train the trainer' course to enable them to deliver training to the care team. Staff completed induction training and completed the 'care certificate'. This meant they had the knowledge, skills and behaviours expected in their roles.
- Staff told us the induction they received helped them to feel confident and competent in providing care and support to people.

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, whether appropriate legal authorisations were in place when needed to deprive a person of their liberty, and whether any conditions relating to those authorisations were being met.

- People were asked to consent to their care, and this was reflected in their care plans and records.
- The registered manager was aware of the key principles of the MCA and understood their responsibilities if they accepted a package of care for a person who lacked capacity.
- Staff confirmed they were provided with relevant training. They understood the requirements of the MCA and were aware of good practice guidance.

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 registered manager told us they ensured people's protected characteristics were respected.
- People and their relatives felt the care and support provided was good. One relative told us, "[My relative] does like [the staff]. They are very kind to [my relative]." Another relative said, "[My relative] is very happy and will have a sing along with [the staff]."

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

- People told us staff included them in decisions about their care and respected their individual needs and preferences.
- Staff told us they respected people's decisions and choices about their lives and carried out all care maintaining as much privacy and dignity as possible for people. One staff member told us, "I maintain privacy and always include people when making decisions. Engage them, like asking what they would want to eat or wear, always listening to their concerns."
- One relative said, "I am very happy with the care my relative gets; the carers are kind. [My relative is very happy with them]."

Respecting and promoting people's privacy, dignity and independence

- People we spoke with told us staff were kind and friendly and treated them with respect. We asked people if staff showed respect and everyone confirmed that they did. One person said, "They do, and they work very well with me as well."
- One staff member told us, "When providing personal care, I will close all doors and curtains to keep people's privacy. I will allow them to carry out all the tasks that they can for themselves and only assist where needed. I will ask the service user for permission and consent to carry out a task first before I carry it out."

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

- People received care and support which was personalised and met their individual needs and preferences.
- People's care plans were reviewed regularly and as people's needs changed.
- The registered manager told us staff were trained to recognise any changes in people and knew they should let the management team know without delay.

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.

- People's care plans included information about how to communicate effectively with them. This included information about any hearing difficulties or whether the person wore glasses.
- The deputy manager told us information was supplied to people in different formats such as large print, where necessary. This supported good communication.

Improving care quality in response to complaints or concerns

- The provider had a complaints procedure in place and people were encouraged to raise concerns if they needed to.
- The registered manager used complaints to learn and improve the service.
- People told us they were aware of how to raise concerns if they needed to. Most people were very happy with the service and had no concerns to share with us. Two relatives told us about individual areas of the service they felt could be improved. The registered manager was aware of this feedback and was using it to help improve the service.

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.

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

- Members of the management team worked alongside staff to make sure people received person-centred care which supported them to achieve good outcomes.
- People and their relatives felt involved in their care. They knew the members of the management team and confirmed they kept in touch. One relative said, "I speak to [the registered manager] if I would like her to tell the carers something about [my relative] and then she tells them all. For example, I asked them to leave the music on for her." Another relative told us, "[The deputy manager] phones me every now and again to see that I am happy with the service."

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 registered manager and deputy manager worked together to make sure the service was operating effectively.
- The management team understood their legal responsibilities and their duty of candour.
- Staff told us they had job descriptions and had access to the provider's policies and guidance on-line. This helped to make sure they were clear about their roles and responsibilities,

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

- The provider had systems in place to make sure people were involved in the service.
- People were asked for their feedback via questionnaires, telephone calls and spot visits to people's homes.
- People and their relatives were confident the management team would listen and act on feedback.
- We received positive feedback about the registered manager from staff. One staff member told us, "Many carers, including myself have a good relationship with the manager and are able to raise any issue with them. When I have raised suggestions they have been listened to, reviewed and actually implemented."

Continuous learning and improving care; Working in partnership with others

- The provider had a system in place to monitor and improve the service.
- The management team completed regular audits to make sure any issues were identified and addressed in a timely way.

- The registered manager was keen to learn and improve the service as a result of the auditing process.
- The management team demonstrated they were working in partnership with others to meet people's needs and develop the service.