

YESUK Care and Support Services Ltd

YESUK Office

Inspection report

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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

The inspection took place on 26 and 31 October 2017. We gave the provider 48 hours' notice of our intended inspection to make sure that appropriate staff were available to assist us with the inspection. At the time of our inspection one person was being supported by the service.

There was a manager in post who had registered with the Care Quality Commission (CQC). A registered manager is a person who has registered with the CQC to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act and associated Regulations about how the service is run.

We spoke with one relative who told us that their family member was kept safe and was well cared and was supported by staff who were both competent and well trained. Staff had received training in how to safeguard people from potential abuse and knew how to identify the risks associated with abuse.

The provider operated a thorough recruitment processes which helped to ensure that staff employed to provide care and support were fit to do so.

There were sufficient numbers of staff available to meet individual needs and the service provided was flexible.

The person who used the service and their relative were both very complimentary about the abilities and experience of the staff who provided their care and support.

Staff supported the person to stay safe in their home, and was supported to maintain their health and well-being. Staff developed appropriate positive and caring relationships with the person they supported and their family, and feedback from the person who used the service was consistently positive and complimentary.

Staff asked for the person's consent before providing care and support. The person who used the service and their relative, where appropriate were involved in the initial planning of the care and support they received. The person's personal information was stored securely and confidentiality was maintained.

The person who used the service and their relative told us they felt the staff provided care and support that was delivered in a way that promoted their dignity and respected their privacy. Staff were knowledgeable about the person's preferred routines and delivered care that was individualised.

We were told that staff listened to them and responded to them in a positive way. The relative knew how to raise concerns if they needed to and told us they were confident that the registered manager would take appropriate action to address any concerns in a timely way.

The registered manager had arrangements in place to receive feedback from people who used the service, their relative, external stakeholders and staff members about the services provided. There was an effective system in place for people to raise complaints about the service they received.

We found that records were sufficiently maintained and the systems in place to monitor the quality of services provided were effective.

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 consistently safe.

Staff were aware of safeguarding people from potential risk and knew how to report concerns.

Risk assessments were completed and reviewed regularly.

There were sufficient staff with the right skills and experience to meet people`s needs at all times.

Safe recruitment procedures were robust.

People were reminded and supported to take their medicines and staff had been trained in the safe administration of medicines.

Good



Is the service effective?

The service was consistently effective.

People received support from staff who had received the necessary training to carry out their role effectively.

Staff felt supported by the registered manager.

People were encouraged to eat a healthy balanced diet.

People were supported when required to attend health care appointments.

Good



Is the service caring?

The service was caring.

People developed positive relationships with the staff who supported them.

People were involved in making decisions about the support they received.

People were supported to retain their independence.

People were treated with dignity and respect and their privacy was maintained.	
Is the service responsive?	Good •
The service was responsive.	
People received care and support which was appropriate to their needs.	
People were aware of how to make a complaint and felt their concerns would be addressed in a timely way.	
Is the service well-led?	Good •
Is the service well-led? The service was consistently well-led.	Good •
	Good •
The service was consistently well-led. The service had systems and processes in place to ensure the	Good



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Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

This inspection took place on 26 October and 31 October 2017. We told the provider 48 hours before our visit that we would be coming to ensure we could access the information we needed. Before our inspection we reviewed information we held about the service including statutory notifications relating to the service. This includes the Provider Information Return (PIR). This is a form that requires them to give some key information about the service, what the service does well and improvements they plan to make. However on this occasion a PIR had not been requested from the provider prior to this inspection taking place.

During the inspection we were unable to observe care provision due to the nature of the service which provided personal care and support to people living in their own homes. However, we did contact the person who used the service and their relative who both gave us feedback about the service. We also spoke with one staff member and the provider, who was also the registered manager.

We looked at one care plan, three employment files and other relevant documents relating to how the service operated.



Is the service safe?

Our findings

The person who was supported by the service informed us, with the assistance of their relative, that they felt safe and stated "I cannot speak effectively to raise my concern. However, I am able to show my disapproval by my facial expressions and refusal to participate. I am able to blink to affirm a closed question and I can point to affirm 'yes' or 'no'." The relative of this person told us they considered their [family member] was very safe at all times. Staff knew the person they supported well and were able to demonstrate they knew how to keep them safe.

Staff we spoke with were able to describe what constituted abuse and how they would report any concerns. They were also clear about who they would report concerns too should the need arise. We saw that information and guidance about how to recognise the signs of potential abuse and report concerns, together with relevant contact numbers, was displayed within the office as a reminder for staff when they visited the office. Staff received safeguarding training when they joined the service and were provided with regular updates when required.

Safe and effective recruitment practices were followed which helped make sure all staff were of good character and suitable for the roles they performed at the service. We checked the recruitment records for three staff members and found that all the required documentation was in place which included two written references and criminal record checks.

There was adequate staff provided with the right abilities and experience to meet the person's needs safely. We spoke with the relative of the person who was being supported who told us that there were enough staff to meet the needs of their family member and they confirmed they had a team of regular support workers. Staff rotas were planned in advance and confirmed there were enough staff to meet the person's needs safely. We saw information with regard to 'out of hours' contact numbers to call in the event of the staff member not arriving at the specified times.

There were suitable arrangements in place for the safe administration of medicines and staff had been trained. There were also medicine administration records in use and regular audits had been completed to monitor the safe administration of medicines.

We saw that risk assessments were completed as part of the initial assessment of the person's needs. We found that these had been reviewed regularly to take account of the person's changing needs and circumstances. The registered manager reviewed all risk assessments and ensured regular reviews were completed.

There was a system in place for the recording of accidents and incidents although there had been none since the service had been registered with the Care Quality Commission.



Is the service effective?

Our findings

The person who used the service received support from staff who had the appropriate experience and skills to carry out their roles and responsibilities. Staff completed an extensive induction programme when they started working for the service. This gave new staff the skills, training and knowledge to enable them to support the person effectively.

Training records confirmed that staff received a varied training programme and that the training was updated appropriately. Specific training had been provided which ensured that staff had the skills and knowledge to support people. For example catheter care and food and nutrition training.

The registered manager told us training was updated annually. Staff competencies were observed and assessed by the registered manager who often worked alongside staff which provided an opportunity to assess both staff competencies and also to mentor staff to ensure they followed good working practices.

One staff member told us that the training they received was appropriate for their roles. They told us, "I had a thorough induction when I first started; it gave me an insight into what the job was about." We were told by the registered manager that new staff also 'shadowed` more experienced staff until they were competent to work in an unsupervised capacity.

One staff member we spoke with said they felt fully supported by the registered manager and they had regular contact with them at the office and also within the person's home. The staff member confirmed that they received regular supervisions with the registered manager which gave them the opportunity to discuss work related issues or concerns.

The registered manager and staff we spoke with understood that they were required to obtain people`s consent before they provided care and support. They told us that they always asked the person if it was ok to assist them and always respected the person's wishes. For example, the registered manager told us they contacted the person who used the service and their relative to inform them about the inspection taking place and to obtain their consent for us to contact them and obtain feedback. We also saw that a representative of the persons had signed consent forms within their care file. Written consent had been reviewed and was up to date.

We saw that the person who used the service was encouraged and supported to eat a healthy and balanced diet. Staff told us that they supported people to do this, when necessary. The person told us, "I enjoy my meals. The quality of my food is excellent. I get sufficient food to eat. I like all kinds of food as long as it is tasty and blended well."

The person who used the service was supported to attended appointments at their GP or other health related professionals. Their relative told us that care staff supported their family member to attend regular appointments in relation to their health and staff worked flexibly around their appointments to ensure they were supported on the days they had to attend hospital appointments.



Is the service caring?

Our findings

The relative we spoke with told us their family member was looked after in a kind and caring way. They told us their family member had regular staff which they liked and got on well with. They knew staff well and were familiar with their routines. The person told us, "All my personal care is given in private. If eating out, the utmost discretion is applied."

Staff had developed positive and caring relationship with the person they cared for and demonstrated that they knew about the persons' individual preferences, likes, dislikes and daily routines. One staff member we spoke with was able to tell us how they maintained people's privacy, dignity and independence. We were not able to observe care being delivered but when one staff member spoke with us they talked about the person they supported in a kind, caring and sensitive way.

The relative of the person who used the service was very positive and complimentary about the staff that provided their family members care. They told us, "They show respect, give choices in selecting what to wear, what to eat and places to go." They went on to tell us, "My [person]carers are fully aware of their needs and capabilities and offer them the utmost attention in their personal and social care. My [person] extremities tend to get cold very quickly and their carers will always ensure that they have an extra blanket to cover their hand and feet. [Person] is always given a choice as to which T.V. programmes they wish to watch. They are always invited to say where [person] would like to go when going out."

The person who used the service was encouraged to maintain positive relationships with friends and family. We were told that staff always kept their family informed of any changes that related to their relative's needs.

The person who used the service and their relative told us they had been consulted and involved in their care planning. We saw documented evidence of this within the care plan.

The person's private and confidential information was stored securely and we saw that confidentiality was maintained by the registered manager. The registered manager was aware of how to contact advocacy services for people to use, when required.



Is the service responsive?

Our findings

The person who used the service received appropriate care and confirmed that staff were responsive and flexible when providing support to them. Feedback from the relative of the person who used the service demonstrated that the care provided was responsive to the person's individualised and changing needs.

Staff had access to personal information which was kept in a folder in the person's home. This contained a copy of their care plan and risk assessments. The support plan that was in place gave appropriate information and guidance to staff so that they could provide care safely and appropriately. We saw that this plan of care was person centred. For example, it contained detailed information about the person's life, their interest and their preferences and preferred routines. We found that the staff we spoke with had a detailed knowledge and understanding of the person's complex and changing needs. The relative we spoke with told us, "The staff are most certainly responsive to [person's] needs."

The person who used the service and their relative were given an information pack when they commenced the service which contained information on how to make a complaint. The relative we spoke with confirmed that they knew how to make a complaint but had no issues or concerns about the care and support provided by YESUK. They also told that they were in regular contact with the registered manager and would raise any concerns directly with them, if the need arose.

A staff member told us they would report any concerns raised with them to the registered manager so they could be addressed and resolved quickly and to the satisfaction of person who used the service.



Is the service well-led?

Our findings

The service was well led with robust systems and processes in place that had been established and further developed since the service first registered with the Care Quality Commission. This ensured the service operated effectively and safely. We saw records that related to risks to the person's health and well-being were up to date and had been regularly reviewed. In addition the provider had kept current and consistent records that related to staff who were employed at the service to provide care to the person which ensured staff had the appropriate skills and competencies to carry out their role effectively and safely.

The provider had systems in place to review and analyse information that related to the quality of the service and the views of visiting professionals, staff and commissioners were sought.

We found the service operated in accordance with their statement of purpose which is a document that sets out what the service aims to do and how they will achieve the objectives. The registered manager told us they had invested time and effort in the development and continual improvement of the service they provided. For example, the care and support plan seen demonstrated personalised care provided a high level of detail that enabled staff to provide the necessary support and care in a person centred way.

The relative we spoke with was very complimentary about the registered manager. They considered the service was managed, "Excellently." There were systems in place to formally monitor the quality of the service. The relative of the person who used the service confirmed that the registered manager had regular contact with them to ensure that they were happy with the service.

One staff member told us that they considered the registered manager to be both approachable and competent.

Although the service currently only supports one person, the registered manager demonstrated that they had effective systems in place which ensured that the quality of the service provided was constantly monitored and reviewed in order to drive further improvement. The registered manager provided an open and inclusive service to the person they supported, their family and outside professionals involved in the care of this person.