

You in Mind (Homecare) Limited

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Inspection report

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

You in Mind (Homecare) Limited is a domiciliary care service providing personal care to people in their own homes. 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. At the time of the inspection personal care was provided to 32 people.

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

Pre-employment checks ensured suitable staff were employed. Any identified risks were managed with decisions recorded. People felt safe with the staff who provided their care.

People had received assessments of their needs to ensure the service was suitable. Records included associated information where known risks were evident. Staff used this information to provide safe care for people, and to ensure they remained safe whilst in people's homes.

People were protected from known risks from infection. This included those associated with Coronavirus. Routine infection prevention and control practices had been reviewed and updated. Staff clearly understood when and where to wear personal protective equipment.

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 and their relatives spoke positively about the personal care they received. People received their care and support from regular staff who understood their needs and supported their independence.

There were enough appropriately skilled staff to meet people's assessed needs. Staff training was managed electronically. Where refresher training required completion, follow up communications had been recorded for staff to complete this. Staff confirmed training was appropriate to carry out their roles safely, following best practice. Where assessed, people received support from skilled staff to take their medicines safely as prescribed.

Staff received safeguarding training and were clear on how and when to raise their concerns. The provider had embedded systems and processes which were followed to investigate any concerns. Where appropriate, actions were implemented to keep people safe.

The provider had implemented a range of checks to maintain and improve standards of service. Where areas of improvement were identified, action plans were in place and reviewed for their effectiveness.

For more details, please see the full report which is on the Care Quality Commission (CQC) website at www.cqc.org.uk

Rating at last inspection

The last rating for this service was requires improvement (published 14 November 2019) and there was a breach of regulations. The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection improvements had been made and the provider was no longer in breach of regulations.

Why we inspected

We carried out an announced comprehensive inspection of this service on 7 October 2019. A breach of legal requirements was found. We undertook this focused inspection to check they had followed their action plan and to confirm they now met legal requirements. This report only covers our findings in relation to the Key Questions Safe and Well-led which contain those requirements.

The ratings from the previous comprehensive inspection for those key questions not looked at on this occasion were used in calculating the overall rating at this inspection. The overall rating for the service has changed from Requires Improvement to Good. This is based on the findings at this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for You in Mind (Homecare) Limited on our website at www.cqc.org.uk.

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?

Good ●

The service was safe.

Details are in our safe findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our safe findings below

You in Mind (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 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

This service is a domiciliary care agency. It provides personal care to people living in their own homes. The service had a manager registered with the CQC. This means 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 registered manager would be in the office to support the inspection. Inspection activity started on 16 September 2020 and ended on 17 September 2020. We Visited the office location on 17 September 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. We spoke with five staff, three people receiving a service and four relatives. The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information

about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report.

During the inspection

We spoke with the registered manager and the business manager.

We looked at information in four people's care records, medicine administration records and daily notes. We looked at seven staff recruitment, supervision and training records, and records relating to the management of the service including audits, checks and oversight used to maintain and improve the service.

Is the service safe?

Our findings

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

At the last inspection this key question was rated as requires improvement. At this inspection this key question has now improved to good. This meant people were safe and protected from avoidable harm.

Staffing and recruitment

At our last inspection the provider had failed to ensure all required checks had been completed to ensure staff employed were always suitable for the role. This was a breach of regulation 19 (Fit and proper persons employed) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 19.

- All employees completed a robust recruitment process which recognised the importance of employing a diverse workforce. Pre-employment checks were completed to ensure staff were suitable for the role.
- People received consistent support from regular staff who knew their needs. One person said, "Yes, regular staff attend who we know. It's helpful because they know how I like things done."
- There were enough skilled employees to attend to people's individual needs. Where staff were unable to attend a call, for example due to sickness, cover was provided. One staff member said, "We have a really good team and the office ensure if we are running late there is cover available for the next call should we need it."

Systems and processes to safeguard people from the risk of abuse

- Robust systems and processes were in place and used by staff to raise any concerns. Clear records supported the actions taken to prevent similar incidents.
- Staff had completed training in safeguarding adults from abuse and demonstrated a clear understanding of the required actions to raise any concerns for further investigation.
- The registered manager discussed how some safeguarding refresher training was required due to the impact on pausing training sessions due to Coronavirus restrictions. Communications confirmed this was in progress. One staff member said, "We have some good processes and work as a team to ensure people are safe. Any concerns are investigated, and we discuss outcomes to prevent anything similar."
- Staff were able to raise concerns verbally and electronically. All concerns were investigated and where required actions were implemented to keep people safe from harm. One person told us, "Staff are friendly; they put me at ease, and I feel safe with them around."

Using medicines safely

- Medicines were managed and administered following best practice guidance. Where people required support to take prescribed medicines, up-to-date risk assessments and care plans were in place to ensure staff understood how to provide this support in a safe managed way.
- Staff were suitably skilled and qualified to assist with people medicines. Staff received on-going observations on their medicines practice and competencies to ensure they followed best practice guidance.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- Pre-assessments of people's needs provided information for staff to support people with any risks and for staff to remain safe in people's homes. These were reviewed and updated where required.
- Systems and processes were followed to ensure the detailed recording and investigation of any accidents or incidents. Provider oversight was used to check the actions implemented remained effective and looked for trends where remedial changes could be made to keep everyone safe.

Preventing and controlling infection

- People were protected from known risks from infection. This included exposure to Coronavirus. A staff member told us, "At the start of the pandemic we struggled to get all the PPE we required. This has really improved now, and we have plenty. We get all the latest government guidance and I feel better prepared to keep everyone safe."
- Routine infection prevention and control practices had been reviewed and updated. Staff clearly understood when and where to wear personal protective equipment. People confirmed staff routinely used disposable gloves, aprons and face masks.

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 the last inspection this key question was rated as requires improvement. At this inspection this key question has now improved to good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- At our last inspection the provider did not have a clear oversight of the service to deliver safe care and support with regards to staff recruitment. During this inspection we found the provider had implemented improvements. Appropriate checks had been completed and recorded prior to staff commencing their roles.
- The registered manager was passionate about supporting staff in their roles and was clear about their own roles and responsibilities. Staff understood their roles and responsibilities and when to escalate any concerns.
- A range of audits and checks were completed to maintain and improve the service people received. For example, systems and processes ensured staff training remained up to date, tracked medicines administration for accuracy, and ensured care records remained current.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Continuous learning and improving care; 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

- Feedback was encouraged, and information was used to help maintain and improve standards of service. One staff member said, "It's been difficult to hold staff meetings together as a group under Coronavirus. We are still in regular contact with the office and have completed a survey. All feedback is acknowledged and responded to."
- We received positive feedback from people, their relatives and staff about the management of the service. Communication was good and pro-active. One person said, "I am very pleased with [registered manager], they are pro-active and respond to any concerns I raise to ensure we get the best service."
- The provider was responsive to issues and concerns; they understood their responsibility to be open, honest, and apologise to people if things went wrong.
- Systems were in place to ensure lessons were learnt when things went wrong. Continuous learning was promoted by the registered manager. Any learning was shared with the staff team during staff meetings and supervisions.
- Checks were completed to ensure staff were compatible with people and reflected any diverse needs. Where people had requested a choice of preferred care worker this was provided.

Working in partnership with others

- The registered manager worked closely with other health professionals for the benefit of people's health and wellbeing. Where people received palliative care, joined-up support had helped relatives to manage at a difficult time. One relative said, "They all have areas of experience and can provide care and support that I couldn't do on my own. Its enabled [person] to remain at home which I never thought possible."