

Tees Healthcare Services Limited

# Tees Healthcare Services Limited

## Inspection report

20 Stanley Hall Drive  
Wakefield  
WF1 4GG

Tel: 07786728464

Date of inspection visit:  
15 March 2023

Date of publication:  
05 April 2023

## 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

Tees Healthcare Services Ltd is a domiciliary care agency providing support for people in their own homes. The service was supporting around 12 people at the time of the inspection.

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

People spoke positively about their experience of receiving care from this provider. One person's relative said: "They are all just lovely, really nice people." Another said: "I think we are so lucky to have them, we had another company before and these are so much better."

The registered manager carried out regular audits of the service, and these identified where there were any shortfalls so that there was continuous improvement.

Staff told us the registered manager was accessible and supportive and said they could contact them at any time of day or night.

Medicines were managed safely, with regular reviews of people's medication taking place, as well as management audits.

The provider took steps to involve people in their care, and we saw evidence of this within people's care records and reviews. Staff told us they routinely checked people's preferences when providing care to them.

Care took place in accordance with people's consent, and where people lacked the capacity to consent to their care, appropriate alternative arrangements had been implemented.

People told us they felt safe when receiving care, and said they would feel confident to raise concerns.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

### Rating at last inspection

This service was registered with us in October 2021 and this is the first inspection.

### Why we inspected

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

### 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 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.

# Tees Healthcare Services Limited

## **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 and staff.

#### Inspection team

This inspection was carried out by 1 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.

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

The inspection was unannounced. Inspection activity started on 15th March and ended on 22nd March 2023.

#### What we did before the inspection

We reviewed information we had received about the service since it was registered. 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. This information helps support our inspections.

We used all of this information to plan our inspection.

#### During the inspection

We spoke with the registered manager, 5 members of staff and 4 people's relatives.

We reviewed a range of records. This included 3 people's care records. We reviewed a variety of records relating to the management of the service, including audits, medication records and policies and procedures.

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.

# 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 for this newly registered service. This key question has been rated Good. This meant people were safe and protected from avoidable harm.

### Using medicines safely

- People's medicines were managed safely.
- Records of medication administered were accurately maintained.
- Staff told us they had received training in relation to medicines management and said they felt confident when handling medicines. They said this was regularly audited by the registered manager.

### Systems and processes to safeguard people from the risk of abuse

- People's relatives gave us positive feedback about safety. They said they felt their loved ones were safe when receiving care.
- Staff told us they were confident in reporting any concerns they had. Records showed they had received training relating to safeguarding.

### Assessing risk, safety monitoring and management

- Risks people were vulnerable to were identified during the initial assessment of a person's needs, and appropriate risk assessments were put in place. These were detailed and personalised.
- Staff told us they always had time to read people's care records before providing care, so that they understood how to manage risks and care for the person safely.

### Preventing and controlling infection

- The provider's records showed staff had received training regarding infection control, and staff we asked told us this training was useful to them.
- Personal protective equipment (PPE) was available for staff to use and staff confirmed it was plentiful.
- People's relatives told us staff always used PPE when providing care.

### Staffing and recruitment

- Staff were safely recruited.
- Appropriate background checks had been carried out before people started work.
- Staff told us they felt the recruitment process had been thorough, and they felt equipped to undertake their roles effectively when they started work.

### Learning lessons when things go wrong

- Staff told us they would be confident to report any incidents or accidents directly to the registered manager.
- The registered manager told us they were committed to continuous improvement and saw untoward incidents as a learning opportunity.

# 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.

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, whether any restrictions on people's liberty had been authorised and whether any conditions on such authorisations were being met.

- We found the provider had systems in place for obtaining people's consent, or acting in their best interests. Staff had a good knowledge of this process.
- The registered manager understood their responsibilities in relation to consent and capacity, and all legal requirements were adhered to.

Staff support: induction, training, skills and experience

- Staff told us they had received relevant training, and said it was effective and useful to their roles.
- Staff told us they found the management support they received to be good, and said they could contact the registered manager any time they needed support or guidance.
- The provider's training records showed a wide range of training was offered across relevant areas.

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

- Assessments of people's needs were undertaken before they began to receive care. These assessments were used to develop care plans.
- Records showed the management team monitored care to ensure it was in line with current guidance.

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

- There were details in each person's care file showing that their needs in relation to nutrition and hydration had been assessed.
- Staff told us they knew people's personal preferences in relation to food and drink because they were familiar with people's care plans and personal tastes.

Staff working with other agencies to provide consistent, effective, timely care

- Staff told us they knew when to contact outside assistance, and people's relatives confirmed this. One relative said: "We have the district nurse seeing [my relative] at the moment and the care staff follow her instructions."
- Where external professionals were involved in people's care, their guidance and advice was incorporated into people's care plans.



# 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.

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

- People, and their had been involved in planning their care, and their input was clear to see in their care records.
- The registered manager told us people's views and preferences about care were recorded at their initial assessments, and their feedback was regularly sought.

Ensuring people are well treated and supported; equality and diversity

- People' relatives told us when staff were providing care they treated people very well. One relative told us: "They are so lovely, they speak so kindly to [my relative] and really understand them."
- Care assessments we checked showed information about people's cultural needs was gathered so that staff understood any cultural or diversity issues they should be aware of when providing care, although we did note this was not always fully completed. We raised this with the registered manager during the inspection and they assured us they would address this.

Respecting and promoting people's privacy, dignity and independence

- People's relatives told us their loved ones' dignity and privacy was upheld when they were receiving care. One relative told us about a recent incident where there relative had been able to be more independent than usual, and said staff encouraged and empowered this.
- Care records contained information about how people's privacy and dignity should be upheld.

# 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 requires good. This meant people's needs were met through good organisation and delivery.

### 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 had appropriate arrangements in place to ensure they complied with the AIS, including a suitable policy.
- The registered manager told us none of the people using the service at the time of the inspection required documentation in an alternative format, but understood their responsibilities to supply this if required.

### Planning personalised care to meet people's needs, preferences, interests and give them choice and control

- Each care plan we looked at held detailed information about people's interests and preferences.
- Staff said they knew people's preferences and interests because they always had time to read people's care plans. One said: "If I'm assigned a new person, I always go through their care plan before so I feel like I really know them."
- One person's relative said: "Even though they [the staff] are carrying out personal care duties, they make sure [my relative] is expressing their choices about how they want things done."

### Improving care quality in response to complaints or concerns

- The provider had appropriate arrangements in place for receiving and addressing complaints.
- People's relatives told us they would feel confident to complain if they needed to.
- At the time of the inspection, no formal complaints had been received.

# 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.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

- The registered manager had a good oversight of the service, and monitored performance to identify where improvements could be made.
- People's relatives said they thought the service was well managed. Staff told us rotas were well-organised to ensure they could undertake their calls on time.
- Staff told us they understood their roles, and knew what was expected of them.

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

- People's relatives told us the care provided achieved good outcomes; the registered manager told us about times when they have been able to promote a person to live more independently, and a relative told us they found the service to be "far superior" to another care provider they had experience of.
- Staff told us they found the culture supportive. They said the registered manager was always available and provided them with a good level of support. One described the registered manager as "inspiring."

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- The registered manager told us they regularly contacted both people using the service as well as staff to obtain their feedback and involve them decisions about care and how the service was being operated. Documentation we saw supported this.
- People's relatives told us they felt the service worked in partnership with others, and the registered manager confirmed this, giving examples of working with external healthcare professionals to ensure people received the care they needed.