

Home Care For You Ltd

# Homecare For You Preston

## Inspection report

Moor Park Court  
St. Georges Road  
Preston  
Lancashire  
PR1 6AQ

Tel: 01772709914

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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

Homecare For You Preston is a domiciliary care service providing personal care to people living in their own homes. At the time of the inspection 129 people were receiving care from the service.

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

Staff were recruited safely and sufficient staff were in place. Most people told us staff usually arrived on time for their visits however, some people said they were not always informed when staff were going to be late. Risks were managed safely and people were protected from the risks of abuse. Medicines were managed safely.

People told us, staff asked permission before undertaking any care or activity. The service took action to ensure capacity assessments had been completed where required. 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. A range of training was provided to the staff team. The feedback was mainly positive about the skills of the staff team. Professionals were positive about the service.

People received good care and they were involved in decisions. People's individual and diverse needs were considered. Staff were matched to people according to their preference, needs, culture and gender.

Care files contained information to support the care for people however, most people could not confirm a review of their care had taken place. People were supported to access the community where relevant, technology was being used to develop visit schedules and monitor call logs. A system to deal with complaints was in place. The registered manager discussed an ongoing complaint currently under investigation.

Audits and monitoring was taking place. Staff told us and records confirmed team meetings had been completed, the registered manager told us surveys and questionnaires were planned in the near future. We received positive feedback about the registered manager. A new manager was in post and was in the process of applying to the Care Quality Commission as the registered manager going forward.

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 on 26/02/2019 and this is the first inspection.

### Why we inspected

This was a planned inspection.

### 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?

The service was safe.

Details are in our safe findings below.

Good ●

### Is the service effective?

The service was effective.

Details are in our effective findings below.

Good ●

### Is the service caring?

The service was caring.

Details are in our caring findings below.

Good ●

### Is the service responsive?

The service was responsive.

Details are in our responsive findings below.

Good ●

### Is the service well-led?

The service was well-led.

Details are in our well-Led findings below.

Good ●

# Homecare For You Preston

## 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

Two inspectors visited the service and one Expert by Experience undertook telephone calls to people and relatives. 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.

#### Notice of inspection

We gave the service 48 hours' notice of the inspection. This was because 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

Prior to the inspection we looked at the information we held about the service, including feedback, complaints and notifications the provider is required to send to us by law. We also sought feedback from a number of professionals about their views of the service. 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. We used all of this information to plan our inspection.

#### During the inspection

During the inspection we spoke with eight people and four relatives over the telephone. We also spoke with

12 staff members. These included six care staff, a team co-ordinator, the training managers, a senior member of management, the newly recruited manager, and the registered manager who was also the nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider. We also looked at three staff files in relation to recruitment and supervision, training records, five care files, medication records, call monitoring information as well as a range of records relating to the operation and management of the service.

After the inspection

We continued to seek clarification from the service to validate evidence found.

# 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.

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

- Risks were assessed and managed.
- Individual and environmental risk assessments had been completed, which provided staff with information about how to manage these. Where some people's risk assessments were noted to be more generic in their content the service took immediate action to ensure these were individualised and reflected people's needs.
- Systems were in place which demonstrated incident and accidents were reported, investigated and actions taken as a result where required. The service confirmed going forward they would ensure investigations and outcome would include lessons learned to reduce any future risks.

Staffing and recruitment

- Staff were recruited safely.
- Records confirmed relevant checks had been completed. On the whole people we spoke with were happy with the staff who delivered their individual needs. One person said, "Some very, very good carers [staff], but at least once a week there will be someone I have not seen before. I have to keep explaining to new people what I need." Where a concern had been raised in relation to one staff member the service took immediate action to investigate and address the concerns.
- Electronic staffing rotas confirmed regular staff names had been allocated to people. The Registered manager told us a dedicated senior manager was responsible for monitoring people's visits and where these had not been completed in line with their care package an investigation was completed with action where required.
- The feedback was that mostly staff arrived for their visits on time. One person told us, "[Staff] always come between [timeline]; they let you know if there is a delay." However, others told us they were not always informed when staff were going to be late. One said, "Carers who know me will ring to say they are running late but otherwise I don't hear anything."

Systems and processes to safeguard people from the risk of abuse

- People were protected from the risks of abuse.
- People told us they felt safe receiving care from the service. One person said, "We have developed a good level of trust with carers." Staff understood the procedure to take if abuse was suspected.
- Systems had been developed which supported investigations and the records confirmed the actions taken as a result of these.

Using medicines safely

- Medicines were managed safely.
- Staff told us and records confirmed they had received training and competency checks for medicines management. On the whole no concerns were raised about people's medicines administration. However, two people said staff did not always prompt them to take their medicines.
- Medicines records had been completed and monthly checks of the records had been undertaken. We noted one record where guidance about a medication had not been documented. The registered manager provided assurances that they would take action to ensure any shortfalls in medicine records would be addressed immediately. They told us they were discussing with local pharmacies the use of medication administration records developed by them.

#### Preventing and controlling infection

- People were protected from the risks of infection.
- Most people confirmed staff were careful about infection control. One said, "[staff are] very good; they all wear gloves and they deal with the waste properly." However, one person told us staff did not always clean the equipment used.
- A range of policies and procedures were in place in relation to infection control, and staff had received infection control training which supported them in the delivery of care. We saw personal protective equipment was available for staff to use. Whilst people all confirmed staff wore gloves during care tasks, they could not confirm staff made use of aprons. We discussed this with the registered manager who took action to ensure all staff utilised appropriate equipment.



# 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, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- People were protected from unlawful restrictions and consent had been considered.
- Records included information in relation to best interests decisions. Where two records required mental capacity assessments to be completed the registered manager took immediate action to ensure these were undertaken and reflected people's needs.
- Consent forms had been completed however, these were confusing and had not always been signed appropriately. The registered manager took immediate action to ensure consent forms were easier to follow and had been completed in full.
- Staff told us they always sought permission before undertaking any care or activity. People told us the staff were very good at asking for consent before undertaking tasks. One person said, "[Staff are] very good at that."

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

- People's individual needs had been assessed and their choices were considered.
- Assessments were completed by the local authority prior to the delivery of care by the service. Care files contained information about the assessed needs of people.

### Staff support: induction, training, skills and experience

- A skilled and supported staff team delivered people's care.
- Staff told us they had received relevant training, records and the training matrix confirmed this. People were confident in the staff skills. One said, "The carers seem to have lots of experience and do a very good job. They definitely know what they are doing." However, some feedback was that sometimes people had to explain their needs to staff.

- Induction programmes were in place to support new staff in their role. Staff received regular supervisions and appraisals were ongoing.

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

- People were supported to eat and drink.
- Records included information about the support required with their meals where relevant. Staff told us and training records confirmed they had received training to support people with their nutrition and fluids. People raised no concerns with the support they received with their meals. They said, 'The staff were happy to make what they asked for.'

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

- People were supported to access professionals and support.
- Care records confirmed relevant professionals had been involved in reviews of their needs where relevant. A professional told us the service worked well with them and provided appropriate support to people. The service worked closely with the local authority commissioning team.
- Information and guidance was available in the office to support staff knowledge and skills.

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

- People were treated with dignity and their diverse needs were considered.
- Care files contained information about people's individual needs. Staff told us the service was very good at matching people with staff according to their needs, choice, culture and gender. They also told us that the service ensured their needs, cultural and gender choice was also considered. Up to date policies were in place as well as person centred values and equality and diversity training was provided to staff.
- Information relating to advocacy services and how to access them was available. Advocacy seeks to ensure people are able to have their voice heard on issues which are important to them.
- People were positive about the care they received. They told us the service had a flexible approach and staff supported them with tasks they found difficult. People said staff were, "Friendly and helpful" and "Nice, caring staff." However one person commented that there was "A big gap between the good carers and the not so good carers."

Respecting and promoting people's privacy, dignity and independence

- People's privacy and dignity was respected.
- Care files directed staff to ensure people's privacy and dignity was maintained. Staff told us the service provided female staff to deliver care to female people who used the service where they requested. Staff confirmed they always asked permission before undertaking any care or activity.
- Most people told us the staff treated them with respect and provided care to them at a pace of their choosing. One said "[Staff are] respectful, not at all rushed." However, others told us at times staff are 'rushed.'

# 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

- Assessments of people's needs had been completed.
- Care plans contained information about people's individual needs and how to support them. records had been signed by people or their representative where relevant.
- Some care files had been signed to confirm they had read and agreed to them. Some people told us the review of their care was due. However, not all people confirmed that reviews of their care had been completed. The manager confirmed where required reviews of people's care needs was ongoing and planned dates for reviews were in place.

End of life care and support

- People's end of life care and support was considered.
- Policies were in place to support staff in delivering end of life care, and training had been provided to support this.
- Where people were receiving end of life care, the electronic systems provided information about how to support their individual needs.

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.

- People's communication needs were supported.
- The electronic systems identified where people required support with their communication for example; where people were deaf or blind an alert was set up on the electronic system to inform the staff and the office of this.
- Staff were provided with training to support good communication with people. Staff told us where people's first language was not English; staff members who had an understanding of their language supported them with their care. However, one person we spoke with told us staff were not always able to communicate with their relative.

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

- People were supported to avoid social isolation where relevant.
- People told us staff supported them to access the community. One person told us about the support they

received accessing appointments.

- An electronic system was in place to ensure people received their individualised care as required. Staff received information about people's needs and their planned visits via handheld devices. The registered manager told us hand held devices enabled them to monitor the visits undertaken in line with their needs.

Improving care quality in response to complaints or concerns

- Complaints and concerns were responded to.
- People told us they would contact the office if they had any concerns. A policy was in place to support and guide people, relatives and staff on making and managing complaints.
- Systems were in place to manage complaints. Complaints forms had been completed and included details of the investigation and the actions taken. Evidence was seen in relation to an ongoing, recent complaint. The registered manager discussed the actions they had taken as a result of this.
- A range of positive feedback was seen. Thank you cards included, 'Thank you for all your help and support and always being there for me.' The service shared positive feedback with staff during team meetings.

# 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

- A person centred, and open culture which supported good outcomes for people had been developed.
- A range of certificates was visible in the office. These included; certificate of registration and employers liability. All people who used the service were provided with a guide about the service and information about what was available to them.
- All of the staff team, senior team and registered manager was positive of the inspection process. Information was provided promptly throughout the inspection. The registered manager told us the new manager in post had commenced the application to be the registered manager.

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 acted when things went wrong and understood their responsibilities.
- Audits were being undertaken. The registered manager confirmed audits of staff files had been commenced following our inspection. Where further action was required this would be addressed.
- Records were seen which confirmed the service recognised when things had gone wrong and the plans to take action to address these.

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

- The registered manager and the staff team were clear about their roles and responsibilities.
- Staff were positive about the registered manager and management team and the support they provided. Comments included, "[We have] full support of the management, absolutely flexible."
- The feedback from people and relatives was mixed about the management. One comment was, "Managers are very attentive and will sort out problems, [Senior team member] is very approachable." However, another told us, "The office seems very disorganised, lots of different managers."

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

- People and staff were engaged and involved.
- Regular team and managers meetings were taking place. Notes confirmed the dates and attendees as well as the topics discussed; including any actions where required.

- One person confirmed they had been asked for feedback about the service. Another told us they had been asked for feedback during a visit by staff to them. The registered manager told us a survey was due to be sent to people in February. We saw copies of the template for this.

#### Continuous learning and improving care

- Continuous learning and improving care was considered.
- Policies and guidance was available for staff to follow. Guidance and information was available in the office to support staff knowledge.

#### Working in partnership with others

- The service worked in partnership with others.
- The service worked closely with the local authority commissioning team in relation to the packages of care for people. The feedback we received from a professional was that the service worked closely with them and raised no concerns.