

JKD Trading Limited

The Great Care Company - York

Inspection report

3 Concept Court
Kettlestring Lane
York
YO30 4XF

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11 May 2021

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22 June 2021

Ratings

Overall rating for this service	Good ●
Is the service safe?	Good ●
Is the service effective?	Good ●
Is the service caring?	Outstanding ☆
Is the service responsive?	Good ●
Is the service well-led?	Good ●

Summary of findings

Overall summary

About the service

The Great Care Company - York is a domiciliary care agency, providing care and support to people living with physical disabilities, or dementia and older people.

At the time of our inspection there were 32 people who received a personal care support package.

Not everyone who used the agency received personal care. The 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.

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

People's wellbeing and happiness were made a priority by the provider, who exceeded contractual obligations to ensure people's independence, welfare and social/emotional needs were promoted and provided for. The leadership team sought creative ways to provide a personalised service and had achieved excellent results through exploring best practice and professional support and implementing it to enhance people's lives.

People received exceptional care from friendly, kind care workers who understood their individual care needs and preferences. They were provided with flexible and responsive support, which promoted their diverse personal, cultural, social and emotional needs.

The care workers were highly motivated and were actively involved in and contributed to the continuous improvements in care and support. The provider and registered manager were dedicated to providing individualised care that met the highest of standards and promoted people's independence and quality of life.

Communication within the agency was excellent at all levels and encouraged mutual respect between care workers and people who used the service. People received exceptionally effective care. Care workers collaborated with people and relatives to find out people's interests and needs so they could provide person-centred, tailored packages of care that had a positive impact on outcomes for people.

There was a truly holistic approach to assessing, planning and delivering care and support. Each person who used the service had a personal plan linked to their preferences and needs. Their wishes and choices were recognised and valued, and people received excellent support to achieve a full and satisfying way of life. Care workers were caring, kind and compassionate with people, recognising them as individuals and treating them with respect and dignity.

Care workers knew how to recognise and report any concerns to keep people safe from harm. Recruitment practice was safe.

People said their care workers were skilled and competent. Care workers had received appropriate induction, training and support to enable them to carry out their role.

Care workers worked collaboratively with local health and social care services to ensure people had access to any support they required. Systems were in place to ensure effective infection prevention and control. People's medicines were managed safely in line with their individual needs and preferences.

People were supported to have maximum choice and control of their lives and care workers supported them in the least restrictive way possible; the policies and systems in the service supported this practice.

The provider and registered manager provided open, democratic leadership and were respected and admired by their staff. An effective auditing process was in place to monitor the quality and safety of service provision. There was organisational learning from significant incidents and concerns/complaints were well managed.

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 25 November 2019 and this is the first inspection.

Why we inspected

This was a planned inspection based on the fact this is a new service and yet to be rated.

We looked at infection prevention and control measures under the Safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to COVID-19 and other infection outbreaks effectively.

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 exceptionally caring.

Details are in our caring findings below.

Outstanding ☆

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 ●

The Great Care Company - York

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.

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

Inspection team

One inspector and an Expert by Experience carried out this inspection. 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.

The service had a manager registered with the Care Quality Commission. This means that they and the provider are legally responsible for how the agency is run and for the quality and safety of the care provided.

Notice of inspection

We gave a short period of notice for the inspection because of COVID-19. We had to arrange safe working procedures for our inspection.

Inspection activity started on 11 May 2021 and ended on 14 May 2021. We visited the office location on 11

May 2021.

What we did before the inspection

We reviewed information we had received about the agency since the last inspection. We sought feedback from the local authority who work with the agency. 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 agency, what the agency does well and improvements they plan to make. We took this into account when we inspected the agency and made the judgements in this report. We used all of this information to plan our inspection.

During the inspection

The Expert by Experience spoke with three relatives and nine people about their experience of the agency. The inspector spoke with the registered manager, the nominated individual, and three care workers. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

We reviewed a range of records. This included three people's care records and five people's medicine records. We looked at three care worker files in relation to recruitment, training and supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection

We continued to seek clarification from the registered manager and nominated individual 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.

Systems and processes to safeguard people from the risk of abuse

- Policies, in relation to safeguarding and whistleblowing, reflected local procedures and relevant contact information.
- Care workers were trained in safeguarding and had the skills and knowledge to identify and raise concerns internally and to relevant professionals.
- The registered manager was aware of their responsibility to liaise with the local authority if safeguarding concerns were raised.

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

- Systems were in place to identify and reduce the risks to people who used the service. People's care plans included risk assessments. These provided care workers with a clear description of any risks and guidance on the support people needed.
- The registered manager monitored and analysed accidents, incidents and safeguarding concerns to aid learning and reduce the risk of them happening again.
- The registered manager made sure people were supported safely. Environmental risk assessments were completed and care worker training, to ensure people were cared for safely, had been carried out. There was an open culture in which all safety concerns raised were highly valued as integral to learning and improvement.
- Families were confident that their relatives received safe care. A relative said, "I know my family member feels safe with the care workers and has never complained about them."

Staffing and recruitment

- Care workers were recruited safely, and appropriate checks were carried out to protect people from the employment of unsuitable staff.
- The provider only recruited care workers who met their values for compassion and caring.
- Care worker levels were sufficient to keep people safe and a contingency plan was in place to cover shifts in times of illness or leave. One person said, "The care workers are usually on time and the office will phone if they are going to be late."

Using medicines safely

- Medicines were safely received, stored, administered, recorded and destroyed when they were no longer required. People were encouraged to manage their own medicines where they had those skills.
- Care workers had completed medicine management training and the management team carried out regular checks of the medicine records to ensure these were given as prescribed.

- People said they received their medicines on time and one person told us, "The care workers take my tablets out of the box and also apply my cream without any problems."

Preventing and controlling infection

- The provider had an updated infection prevention and control (IPC) policy which included Coronavirus and other healthcare acquired infections.
- Care workers, people and relatives received regular updates, about changes to government guidance during the Coronavirus pandemic, by newsletters, emails and phone calls.
- Care workers had completed IPC training and had access to personal protective equipment (PPE), including masks, face shields, gloves and aprons. They knew when to use PPE to reduce the risk of people acquiring healthcare related infections.

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

- The provider had a robust assessment policy and procedure for people during the Coronavirus pandemic. People were satisfied they had input to this process. One person said, "We had choices with the care plan and the care workers are flexible."
- The management team completed COVID-19 risk assessments for people in line with current government guidance.
- Care was provided by a consistent staff team who were matched to people's needs and preferences. One person told us, "The staff definitely meet my needs and the regulars are family orientated."

Staff support: induction, training, skills and experience

- Care workers were supported to carry out their roles. A care worker induction process was in place.
- The provider ensured care workers had access to appropriate training and monitored their uptake of this. One care worker said, "We have on-line training which is easy to access and understand."
- Spot checks were completed to ensure care workers had the skills to provide effective care. They received feedback on their performance.
- People felt care workers had appropriate skills to meet their needs. One person said, "I felt perfectly safe when I used to be hoisted last year and felt the care workers were well trained."

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

- People were supported with food and nutrition where required.
- Two people said, "They will make a meal if required and tidy up around," and "They tell me what food I have in and ask what I want to eat from that."

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

- Staff worked effectively with professionals to ensure people received coordinated care.
- Staff worked with people, relatives and healthcare professionals to help people access support to keep them healthy.
- People felt the care workers were effective and efficient in a crisis. Two people told us, "I had a fall about six months ago so the care worker stayed with me until the ambulance arrived," and "The care workers have reported back to the office who have phoned the doctors or district nurse."

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.

- Systems and processes to assess capacity were in place and used where necessary.
- People (and relatives with power of attorney) were routinely involved in decisions about their care; care workers sought people's consent and supported them to have choice and control over all aspects of their support.
- People's rights were protected; the management team assessed people's mental capacity and made best interest decisions when needed.

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 outstanding. This meant people were truly respected and valued as individuals; and empowered as partners in their care in an exceptional service.

Ensuring people are well treated and supported; respecting equality and diversity

- There was a strong, visible and person-centred culture and staff built positive relationships with people. For example, every person had specific care workers who only changed if they were on leave. One person said, "My care workers are a crew of three. I think they recruit good staff; they are excellent."
- People received exceptional care and support from care workers who were extremely compassionate and caring. Without exception, people told us their care was, "Brilliant," "Respectful and caring," and "The care workers are upbeat, and I am cheered by their cheerfulness."
- The provider and care workers recognised and respected people's diversity and took their cultural and social needs into account, finding innovative ways to meet them. For example, an electronic tablet had been purchased for a person whose first language was not English. Care workers had uploaded a translation app onto the tablet so that person could hold direct conversations with care workers about their support needs.
- The provider went above and beyond their contractual obligations and had an 'Extra Mile' system and funding in place to give people additional hours of care at no cost to the individual. The service had provided 94 hours of free care in the last year.
- Care workers commitment and enthusiasm for their work was reflected in their actions. They spoke about taking people out for picnics in the park to break social isolation, sitting with people at Christmas time when they had no other company around and providing them all with a home cooked Christmas dinner. One relative told us, "They take my family member out for an hour maybe once a month which gives me respite and they do not charge for it."

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

- The service was exceptional at helping people to express their views so that care workers and managers at all levels understood their views, preferences, wishes and choices. People said their consent was sought for a range of situations and their relatives, advocates and significant others were included in the annual care reviews. People said they had excellent communication with care workers and were involved in decision-making around their care. People were not rushed and were given time to speak and when they did, care workers listened and acted on what they said and respected their views.
- People were actively engaged with and supported local charities in their wider community. For example, care workers had supported one person to raise a substantial amount of money for a charity close to their heart. Despite severe mobility problems the person completed 100 stand ups to match their birthday celebrations.
- There was an inclusive culture, which focused on developing friendships and strong relationships between people, staff and families. One relative said, "The care workers chat to my relative whilst working; I also enjoy

their company."

- People's emotional and social needs were seen as being as important as their physical needs. For example, care workers told us how they ensured people were reminded that they were not alone by buying them flowers, giving them a cake on their birthday and drawing their portraits as part of their 'Extra Mile' scheme. The provider told us, "The funding is there for staff to apply for and use to enhance people's wellbeing and reduce social isolation." One person said, "The care workers always look in the book [Funding Scheme] to see what else they can offer me."

Respecting and promoting people's privacy, dignity and independence

- The provider was aware of the need to maintain confidentiality in relation to people's personal information. People's care plans were stored securely, and computers were password protected.
- People told us that care workers were always respectful of their privacy and dignity. One person said, "The care workers definitely treat and speak to me respectfully and they call me by my first name having first asked my preference."
- Staff received equality and diversity training and were aware of the importance of supporting people in a non-discriminatory way which reflected their cultural preferences.

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

- Care records were detailed, up to date and reflected the care being delivered. When people's needs changed, their care and support was assessed and amended in their care file.
- People received person-centred care; care workers had a detailed understanding of their needs and what was important to them. A person told us, "The care workers certainly listen to me. I get on really well with my regular and they know and respect my decisions about care."
- People and their representatives were involved in reviews of their care.

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 made information for people available in formats they could understand.
- People were supported to tell staff about their wishes and views; their care plans included information about how they communicated. One family member said, "The care workers talk to my relative and give them time to reply despite them originally being shy."

Improving care quality in response to complaints or concerns

- The provider managed complaints well. Information on how to raise a complaint was included in the booklet given to people when they first started using the service.
- People and their relatives told us they knew how to contact the provider should they have any concerns or complaints. One person told us, "In the last year I had to complain to the office about one issue. It was sorted out to my satisfaction and there has been no reoccurrence."

End of life care and support

- No one using the agency was receiving end of life care. However, as part of the assessment and care planning process, information on people's wishes in this area was gathered. This would assist care workers in the provision of responsive, sensitive end of life care, should this ever be required.

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

- People said the way the agency was led was exceptional and distinctive. Its vision and values were imaginative, and people were at the heart of the service. Family values, happiness and people's health and wellbeing were at the forefront of the support given. Comments were received included, "They are very caring, happy and their work is excellent," and "They are punctual, very friendly and I have seen an improvement in my relative's health since they started providing care."
- The provider's leadership was exemplary with a strong emphasis on promoting independence and inclusion. All of the feedback was exclusively positive, and people expressed great satisfaction with the care they received.
- Staff told us how the provider and registered manager acknowledged their hard work through various incentives and bonuses. Staff felt extremely valued and respected by them.
- Staff were motivated by and proud of the service. There were consistently high levels of constructive engagement with people and staff from all equality groups. Managers developed their leadership skills and those of others. Staff told us, "The provider is interested in me; I have developed more confidence and my skills have grown", "Working here is like being with an extension of my family" and "This is a great service, I can work flexibly around my family commitments and I have a fantastic relationship with people who use the service."
- There was a strong framework of accountability to monitor performance and risk leading to the delivery of demonstrable quality improvements to 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; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Continuous learning and improving care

- The management team were compassionate, inclusive and effective. They demonstrated a high level of experience and capability to deliver excellent care.
- There was highly effective management oversight of what was happening in the service. When asked questions both the provider and registered manager were able to respond immediately and demonstrated an in-depth knowledge in all areas.
- The registered manager communicated all relevant incidents or concerns both internally to the provider and externally to the local authority or CQC as required by law. A relative said, "I am happy with the level of

communication between the manager, care workers and myself. You can get hold of someone when you need to."

- The commitment to continuous improvement was underpinned by a comprehensive range of audits in place which focused on positive outcomes for people. Monitoring of the service was very thorough. If any shortfalls were identified, then action was taken within agreed timescales. This ensured any identified improvements were put into place in a timely way to improve people's quality of life.

Working in partnership with others

- The registered manager and staff team worked in partnership with health care professionals such as GPs and district nurses, to improve people's health and wellbeing.