

Zest Healthcare Ltd

# Zest Living Homecare

## Inspection report

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### Ratings

Overall rating for this service

Requires Improvement 

Is the service safe?

Requires Improvement 

Is the service effective?

Good 

Is the service caring?

Good 

Is the service responsive?

Good 

Is the service well-led?

Requires Improvement 

# Summary of findings

## Overall summary

Zest Living Homecare is a domiciliary care agency providing personal care to adults in their own homes. The service was supporting five people at the time of the inspection.

Not everyone who used the service received personal care. The Care Quality Commission (CQC) only inspects where people receive personal care. 'Personal Care' 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

People's support needs and areas of risk were appropriately assessed, however we found that people did not always have the correct risk measures put in place to protect them from harm. Staff were not provided with detailed guidance they needed to follow as a measure of keeping people safe.

Quality assurance and governance measures were not always effectively monitoring or assessing the quality and safety of care being provided. Governance measures did not always enable the provider to review the provision of care and make necessary improvements. We have made a recommendation regarding improved quality assurance monitoring systems.

Medication management procedures were in place. Staff received the required medication training, had their competency levels regularly checked and had access to an up to date medication policy. However, we did find that one person did not have topical cream procedures in place; this was raised with the registered manager and immediately addressed.

Infection prevention and control (IPC) arrangements and procedures were in place. Staff received IPC training, were provided the relevant personal protective equipment (PPE) and knew the importance of complying with IPC policies as a way of keeping people safe.

Accident and incident reporting procedures were in place and people were safeguarded from harm. The provider had an up to date safeguarding policy that staff were familiar with and reporting procedures were clearly embedded. Staff expressed the importance of escalating any concerns and we received feedback that assured us that people felt safe when receiving care by Zest Living Homecare.

Recruitment of staff was safely and effectively managed. Pre-employment recruitment checks were conducted, disclosure and barring service (DBS) checks were carried out and suitable references were obtained. Staffing levels were regularly monitored, however at the time of the inspection it was noted that levels of staff had decreased; the provider explained that recruitment was an on-going activity.

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. We did note that some of the care records needed to clearly indicate that consent to care had

been provided.

We received positive feedback about the quality and safety of care being provided. People, relatives and healthcare professionals told us safe, kind and compassionate care was delivered.

Staff were familiar with people's support needs; people told us that they delivered care and support that was centred around their preferences and wishes. However, not all care records contained the same consistent level of tailored and person-centred information.

Concerns had been raised regarding the culture and regulatory responsibilities of the provider; these were discussed during the inspection. However, we did receive positive feedback about the positive approach to care that was being provided. One external professional told us, "They've been fabulous."

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 9 August 2019 and this was their first inspection.

Why we inspected

This was a planned inspection following their registration with CQC.

Enforcement

We are mindful of the impact of the COVID-19 pandemic on our regulatory function. This meant we took account of the exceptional circumstances arising as a result of the COVID-19 pandemic when considering what enforcement action was necessary and proportionate to keep people safe as a result of this inspection. We will continue to monitor the service.

We have identified a breach in relation to 'safe care and treatment' at this inspection.

Please see the action we have told the provider to take at the end of this report.

Follow up

We will request an action plan from the provider to understand what they will do to improve the standards of quality and safety. We will work alongside the provider and local authority to monitor progress. We will 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 not always safe

Details are in our safe findings below

**Requires Improvement** ●

### 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 not always well-led

Details are in our well-led findings below

**Requires Improvement** ●

# Zest Living Homecare

## 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 carried out by one 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.

The service had a manager registered with the Care Quality Commission. This means that 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 24 hours' notice of the inspection. This was because we needed to be sure the provider or registered manager would be in the office to support the inspection.

Inspection activity started on 4 June 2021 and ended on 26 July 2021. We visited the office location on 21 July 2021.

#### What we did before the inspection

We reviewed information we received about the service. We sought feedback from the local authority and professionals who work with the service. The provider was 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 the information to plan our inspection.

#### During the inspection

We spoke with the registered manager, two members of staff and two external professionals. We also spoke with two people who were receiving personal care and two relatives who were involved in their loved one's care packages. We reviewed a range of records, including four people's care records, medication administration records, as well as a variety of records relating to the management of the service.

#### After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at audit and governance data, as well a variety of policies and procedures.

# Is the service safe?

## Our findings

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

This was the first inspection for this newly registered service. This key question has been rated 'requires improvement'. This meant some aspects of the service were not always safe and there was limited assurance about safety. There was an increased risk that people could be harmed.

### Assessing risk, safety monitoring and management

- Safety monitoring, assessment and management of risk was not always clearly established or regularly reviewed.
- People's support needs and areas of risk were assessed. However, we found that care records did not always contain the relevant risk assessments or guidance that staff needed to follow, and people were not always protected from harm. For example, epilepsy and falls risk assessments had not been created and therefore exposed people to risk.
- Specific areas of individual risk were not always being monitored. Care records indicated that risk had been established and needed to be monitored however, there was no evidence that any monitoring, or management of risk was in place. For example, one person's mental health and well-being was not routinely monitored.

We found no evidence that people had been harmed however, people were not always receiving safe care and treatment and were exposed to unnecessary harm. This was a breach of regulation 12 (Safe care and treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

- Internal and external environmental risk assessments were completed; staff were aware of the environmental risks and how these needed to be managed.

### Using medicines safely

- Medication management procedures were in place.
- Electronic medication administration records (MARs) were in place; staff complied with medication administration policies. However, we did note that one person did not have the necessary topical MARs in place. This was immediately responded to and addressed.
- People received support by staff who had been appropriately trained and regularly had their competency levels checked.
- An electronic medication administration recording system enabled staff to follow clear administration instructions and the allowed the registered manager to maintain effective oversight in relation to medicine management.

### Preventing and controlling infection

- We were assured that safe IPC procedures were in place.
- Staff received IPC training and were provided with sufficient PPE.

- The registered manager was familiar with COVID-19 guidance and best practice and communicated such policies and arrangements with the staff team.
- Staff were involved in a weekly COVID-19 testing regime which the registered manager had direct oversight of.

#### Staffing and recruitment

- Staffing levels were monitored, and recruitment procedures were effectively managed.
- At the time of the inspection staffing levels had decreased but the registered manager confirmed that there was an on-going recruitment drive.
- Safe recruitment procedures were in place; pre-employment checks were carried out ensuring that people were being supported by suitably recruited members of staff.

#### Systems and processes to safeguard people from the risk of abuse; Learning lessons when things go wrong

- People were safeguarded against the risk of abuse and processes were in place to respond to any lessons learnt.
- Safeguarding policies and procedures were in place; staff received the relevant safeguarding training and understood the importance of escalating their concerns and protecting people from harm.
- Staff and relatives all expressed that safe care was provided. People told us, "I feel very safe with Zest staff. It's one of the best agencies" and "Staff I can trust; I do feel safe and I trust them."
- Accident, incidents and safeguarding reporting procedures were in place. Staff were familiar with the relevant procedures and the registered manager understood the importance of following up on any such concerns.

# 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 was 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.

- Principles of the MCA (2005) were complied with.
- Measures were in place to ensure people received the expected level of care in the least restrictive way possible; people were not unlawfully restricted or deprived of their liberty.
- Care records did not always contain the relevant level of information in relation to people's capacity to consent or best interest decisions that had been agreed. We raised this with the registered manager who addressed our concerns.

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

- People's needs, and choices were assessed and delivered in line with standards, guidance and law.
- People received care that was centred around their assessed needs, choices and decisions. Care records contained information such as, "I want to remain independent in my own home, I am a very independent [person]."
- People were involved in their care package process from the outset; they were empowered to make decisions and encouraged to engage in decisions that needed to be made about their day to day care.

Staff support: induction, training, skills and experience

- Staff were effectively inducted into their roles, provided with the necessary training and development opportunities and supported on a day to day basis.
- Staff were expected to complete a range of different training modules and courses; these helped to enhance their skills, abilities and competency levels, ensuring people were receiving the most effective level

of care.

- Staff expressed how supported and valued they felt by the provider. One staff member told us, "I'm definitely valued."

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

- Nutrition and hydration support needs were established; people were supported to maintain healthy balanced diets, when required.
- People's care records contained relevant, up to date nutrition and hydration information and provided staff with guidance they needed to follow.
- People were supported to make decisions around their meal preferences and staff were familiar with people's likes and preferences. Care records contained information such as, 'I am a very independent [person] I like to cook my own meals' and 'Please ask me what I would like for my lunch.'

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

- People received consistent, effective and timely care by both Zest Living Homecare staff and other healthcare professionals.
- Staff were familiar with people's support needs and would liaise and correspond with other agencies as and when needed.
- Zest Living Homecare worked in collaboration with other professionals such as occupational therapists and district nurses. One healthcare professional told us, "They are really professional, they go above and beyond."

# 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

- People were well treated and received care and support that was tailored around their support needs. One person said, "The support is really good; they are caring." One relative said, "They are very good, very caring, seem to know what they are doing,"
- Staff provided respectful and dignified care. One person said, "They're very good, they're kind, caring, they're excellent and very considerate." One relative told us, "They treat [person] as a friend."
- Equality and diversity support needs were assessed and supported from the outset. Staff delivered care that was centred around the person's needs and was always delivered with compassion and consideration. One healthcare professional told us, "They've been fabulous. Staff provide all the care service users need."

Respecting and promoting people's privacy, dignity and independence

- People's privacy and dignity was respected, and independence was promoted. One relative told us, "[They] support [person] to make own choices and "They [staff] are respectful towards [person] and our home."
- People's care records contained tailored information, staff knew just what level of support each person needed and provided this with dignity and respect. One person told us, "[They] treat me with dignity and respect, staff know exactly what I need."
- People's independence was promoted; staff encouraged people to make decisions about the care they needed. One person told us, "Staff always communicate and always seek consent." One care record stated, 'I want to remain independent in my own home with assistance from Zest Living Homecare.'

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

- People were supported to express their views and were involved in decisions about their care. One relative told us, "They [staff] came and took down what we required and what we wanted." One person confirmed that they were involved in the care plan and risk assessment process.
- Regular care reviews were held; people were supported and encouraged to share their views and experience of the provision of care they received.
- People expressed that would confidently raise any concerns and provide feedback regarding the quality and safety of care being provided.

# 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

- People received personalised care that was tailored around their needs and preferences. However, not all care records contained the same level of detailed information.
- Two care records contained detailed, person-centred information which offered staff a good level of information in relation to people's likes, preferences, hobbies and interests. choices. For instance, 'In the past I really enjoyed gardening and dancing' and 'I love walking, making wine and gardening.'
- People, relatives and staff told us that the quality and safety of care was centred around people's care and support needs. One healthcare professional told us, "Staff have provided all the care the [person] has needed, they really have been amazing."

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 support needs were identified and supported.
- Care records contained the required level of communication support people needed and how staff needed to provide this level of care. For example, one record stated, 'Speak loudly as I am hard of hearing.'
- Alternative formats of communication could be provided. We received assurances that the relevant support would be accommodated as and when needed.

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 encouraged to maintain positive relationships, avoid social isolation and maintain a sense of independence.
- Although the provider was supporting people with personal care, a degree of companionship was also offered. Staff enjoyed building positive relationships with people and people enjoyed the visits they received. One person said, "I have good relationships with staff."
- The provider helped to ensure that people's interests and hobbies were supported. One person's care record stated, 'I enjoy watching television, I am interested in all types of sports.'

Improving care quality in response to complaints or concerns

- The provider had an up to date complaints policy and process in place
- The complaints procedure ensured that all complaints were addressed and responded to in line with the

organisation policy.

- At the time of the inspection, no complaints were being investigated. We were assured that people would feel confident raising any concerns / complaints to the provider.

End of life care and support

- End of life care was not being provided at the time of the inspection. However, Zest Living Homecare do provide this level of care and support should it be requested.
- Staff were supported with end of life care training; the provider and staff team acknowledged the level of tailored, specialist care that needed to be delivered during such sensitive times.

# 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 'requires improvement'. This meant the service management and leadership was not always consistent. Leaders and the culture they created did not always support the delivery of high-quality, person-centred care.

Continuous learning and improving care

- Audit systems and quality assurance checks were not always identifying areas of improvement or development required.
- The quality and safety of care was not always sufficiently monitored, reviewed and assessed. Care records did not always contain the relevant information that was required.
- Reviews were taking place but there were no quality assurance surveys being circulated as a way of capturing views and suggestions in relation to the provision of care.

We have made a recommendation the provider improves their quality assurance and governance systems as a way of effectively assessing the provision of care being provided.

- The provider was responsive to the feedback and was committed to making the necessary improvements that were needed.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- Roles and responsibilities were not always clearly understood. Quality performance measures and management of risk were not effectively in place and regulatory compliance was not always complied with.
- A recent breakdown in the relationship between the nominated individual and registered manager had (for a period of time) negatively impacted the provision of care being provided; this raised some concerns about the positive culture, regulatory responsibilities and functions that needed to be met.
- Levels of risk were not always effectively managed; control measures were not always put place and people were exposed to unnecessary and avoidable harm.
- People were encouraged to remain empowered and were included in the provision of care they received. One person told us, "I landed on my feet when they [provider] agreed to take on my care package."

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

- Zest Living Homecare engaged and liaised with people, relatives and public about the provision of care being provided but this was not always documented
- Satisfaction / quality surveys were not circulated and the views, opinions and suggestions of the care being delivered was not always captured.

- Staff expressed that they felt thoroughly supported by the provider and felt that their contributions were valued. Staff told us, "I really enjoy it, there's always someone on the end of the phone, [manager] is just really approachable, I feel valued and they take of us [staff team], they genuinely listen."
- Relatives and people receiving care provided us with positive feedback about their experiences of care. Feedback we received included, "Very reliable, any problems - for example, if somebody is off they call us up - and suggest another time" and "They provide care to me, they arrive on time and are very kind and considerate."

#### Working in partnership with others

- The service worked in partnership with other external agencies and healthcare professionals.
- We received feedback which confirmed that that external services and agencies were involved in the provision of care people received.
- Effective partnership work meant that people received a holistic level of care. Healthcare professional told us, "They're the best I've worked with and I've been doing this job a long time" and "The staff have been great."

#### 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 provider understood the duty of candour responsibilities that needed to be complied with.
- We received assurances that open, honest and trusting relationships had developed. One person told us, "I have staff I can trust; I've had bad experiences in the past, but I do feel safe and I trust them."

This section is primarily information for the provider

## Action we have told the provider to take

The table below shows where regulations were not being met and we have asked the provider to send us a report that says what action they are going to take. We will check that this action is taken by the provider.

Regulated activity	Regulation
Personal care	Regulation 12 HSCA RA Regulations 2014 Safe care and treatment  Safe care and treatment was not always being provided; people were not always protected from avoidable harm.