

Your TL Homecare Ltd

Your TL 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?

Requires Improvement 

Is the service well-led?

Requires Improvement 

Summary of findings

Overall summary

About the service

Your TL Homecare is a domiciliary care agency providing care to people in their own homes. The service provides support to children aged 4 to 18 years of age, people over and under the age of 65, people living with dementia, people living with a physical disability and people living with mental health needs.

Not everyone who used the service received personal care. CQC only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do, we also consider any wider social care provided. At the time of our inspection there were 28 people using the service, of which 25 people were being supported with the regulated activity of personal care.

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

People had risk assessments in place. However, the information in these was limited and did not provide clear guidance to direct staff to provide care safely. In addition, where people lived with specific health conditions, records did not direct or guide staff to provide person centred care.

The quality assurance system was not effectively used to identify shortfalls of the service and did not support driving change or development of the company.

People and their relatives told us the staff team were professional and made them feel safe. One relative told us, "I can now go away without worrying. I know the staff will arrive each time and will phone me if they have any concerns."

Staff were recruited safely. An induction process was in place which supported new staff to prepare for their role. Staff had received training to prepare them for their role. The registered manager conducted checks of staff knowledge and skills and discussed the outcomes of these with staff to ensure safe practice.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice. People and relatives told us staff sought consent when providing care and acted in a professional manner.

People and their relatives told us they were involved in the assessment and review process and found the staff to be responsive to their needs.

We received several positive comments from people and their relatives about the staff which included, "The [staff] do a fantastic job. They do everything asked of them and more. I couldn't ask for a better care company. I cannot commend them enough."

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 06 September 2021 and this is the first inspection.

Why we inspected

This inspection was a planned review based in the date of registration.

Enforcement and Recommendations

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 and will take further action if needed.

We have identified breaches in relation to the governance of the service.

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 continue to monitor information we receive about the service, which will help inform when we next inspect.

This was an 'inspection using remote technology'. This means we did not visit the office location and instead used technology such as electronic file sharing to gather information, and video and phone calls to engage with people using the service as part of this performance review and assessment.

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 not always responsive.

Details are in our responsive findings below.

Requires Improvement ●

Is the service well-led?

The service was not always well-led.

Details are in our well-led findings below.

Requires Improvement ●

Your TL 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)
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 using the service and staff.

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.

Registered Manager

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

We gave the service 48 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the provider or registered manager would be in the office to support the inspection.

What we did before the inspection

We sought feedback from the local authority. 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. We used all this information to plan our inspection.

During the inspection

This performance review and assessment was carried out without a visit to the location's office. We used technology such as video and telephone calls to enable us to engage with the registered manager, people using the service and staff, and electronic file sharing to enable us to review documentation.

Inspection activity started on 11 October 2022 and ended on 20 October 2022.

We spoke with one person and four relatives of people who used the service. We spoke with five members of staff including the registered manager and care staff.

We reviewed a range of records. This included four people's records and medication records. We looked at four staff members files in relation to recruitment. A variety of records relating to the management of the service were also reviewed. These included training records, incident and accident records and quality assurance processes.

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 of 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

- Risks to people had been assessed. However, these did not identify individual risks or mitigating actions for staff to follow to keep people safe. For example, for people who lived with specific conditions there was minimal information in risk assessments to guide staff to provide appropriate support, or to be aware of signs which may indicate they required additional support. The staff team were consistent and knowledgeable of people and their needs, therefore, there had been no negative impact resulting from this shortfall. We spoke with the registered manager who told us they would take immediate action to address this.
- A lone working risk assessment had been completed by the registered manager. However, this had not been scored correctly and lacked information to mitigate risks to staff when working alone in the community. This was discussed with the registered manager who took action immediately and made amendments to the record.

Systems and processes to safeguard people from the risk of abuse

- People and their relatives told us they felt safe with the care staff provided. A relative told us, "[Family member] is relaxed and trusts [staff] which makes me feel [family member] is safe."
- Staff had received training in safeguarding and were aware of their role and responsibility in recording and reporting concerns internally and to external organisations including the local authority and Care Quality Commission (CQC).

Staffing and recruitment

- People received their care and support when needed. One relative told us, "Staff arrive between agreed time frames for each visit. If staff are going to be late, they will call ahead in advance. However, this is rare, and staff always remain for the length of call and on occasions remain longer than the contracted time."
- Staff told us their work schedule allowed for travel time between each persons' home.
- A process was in place to ensure the safe recruitment of staff. This included exploring employment gaps, obtaining references and completion of Disclosure and Barring Service (DBS) checks. Disclosure and Barring Service (DBS) checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.

Using medicines safely

- Medicines were administered by trained and competent staff.
- Medicine Administration Records (MAR) contained information of people's medicines and how these should be administered.

Preventing and controlling infection

- An infection control policy was in place which had been reviewed to ensure it was reflective of current government guidance.
- Staff had received infection control training and understood how to help prevent the spread of infection.
- People and their relatives told us staff wore facemasks at all times and, when required, gloves and aprons.

Learning lessons when things go wrong

- A process was in place to report and record incidents and accidents.
- Staff meetings were held regularly and provided an opportunity to reflect over any incidents which had occurred and discuss measures to reduce re-occurrence.

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

- People's needs were assessed prior to them using the service. Information obtained was reviewed by the registered manager to ensure the service and staff were able to meet the person's requirements.
- One person told us, "The registered manager visited me before I started to receive care and asked me what I needed and what they were able to assist with. They sent me a care plan which my [family member] and I checked and signed." A relative said, "[Family member] and I were involved in the assessment process. We checked it and agreed it with a few changes. There have been changes as we go along."

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

- Care plans indicated the level of support which people required at mealtimes.
- People and their relatives were happy with the level of support which was provided at mealtimes and felt the staff had a good understanding of people's dietary requirements. One relative told us, "I hear staff always encouraging [family member] to eat, especially recently where [family member] has lost weight. They give [family member] a choice and if [family member] doesn't eat much, offer an alternative."

Staff support: induction, training, skills and experience

- People and their relatives told us they were confident in the staff skills and knowledge. One relative said, "The staff demonstrate a good knowledge of using equipment safely. They do not take short cuts and will wait for a second carer before using equipment to support with transfers."
- Staff completed an induction process which included a mixture of online and face to face training and shadowing of experienced staff members. Staff told us they received ongoing checks of their practice, supervisions and appraisals.
- Staff told us they received regular supervisions and used these sessions to discuss further training to enhance their skill and knowledge.
- One staff member told us they were being supported by the registered manager in obtaining additional qualifications to support the development of their career.

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 health professionals where required. One relative told us, "The staff were quick to request a district nurse to visit when [family member] skin integrity changed and deteriorated." Another relative said, "Staff are quick to identify any concerns and will discuss with us if they feel a referral is necessary to another professional or the doctor."

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 MCA 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

- People and their relatives told us the staff always sought consent when providing care and support. One person said, "They check with me before providing me support. I feel in control of my care."
- Staff had received training in the Mental Capacity Act and understood how to put this into practice.

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; Respecting and promoting people's privacy, dignity and independence

- People and their relatives told us the staff provided care, which was kind and respectful, which promoted and encouraged people to maintain their independence. One person told us, "The staff are very caring and listen to me at all times." A relative said, "[Family member] is never rushed. The staff take time and encourage [family member] to do what they are able."
- Staff understood the importance of providing care which was dignified and respectful. Staff told us the registered manager conducted spot checks to ensure they demonstrated dignity and respect in their practice.

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

- People and their relatives told us they were involved at all times in decisions relating to their care. One relative said "I hear the staff checking with [family member] throughout the care visit to ensure [family member] is comfortable. The staff wait and listen for [family member] to respond before carrying on. They allow [family member] time to do things at a pace which they request."

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 improvement. This meant people's needs were not always met.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- People's care plans did not contain information relating to specific health conditions and how this impacted on the person. In addition, we saw care plans which contained the names of other people. The staff team were consistent and were familiar with people's needs and there had been no negative impact as a result of these shortfalls. We discussed this with the registered manager during the inspection who told us they had commenced a review of all care records to address this.
- Staff understood the importance of providing care which was person centred. One staff member told us, "It is important to ensure care revolves around a person, their wishes and values at all time."

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- Care plans contained information advising of people's preferred form of communication. The registered manager was aware of their responsibility in ensuring the provision of information in alternate formats when required.
- People and the relatives told us they felt the staff listened well and were professional in their response. One relative told us, "Staff communicate effectively and listen to [family member] and allow time for [family member] to respond."

Improving care quality in response to complaints or concerns

- A complaints policy was in place which was shared with people, their relatives and staff.
- A complaints log contained a summary of each complaint made and actions which had been taken by the registered manager.
- People and their relatives told us they felt confident in raising concerns if necessary and felt these would be responded to in a timely manner.

End of life care and support

- There was nobody in receipt of end of life care at the time of the inspection.
- Staff had received training in end of life care and told us of the importance of providing care in a sensitive manner which was responsive to people's needs and the needs of the family.

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 inconsistent. Leaders and the culture they created did not always support the delivery of high-quality, person-centred care.

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; 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

- A quality assurance system was in place. However, this was not effective in identifying the concerns raised during this inspection in relation to discrepancies in care records and a lack of information in risk assessments.
- Where incidents had occurred, the registered manager had not always raised alerts with the local authority or the CQC where required. For example, we found incidents of missed medication and falls which had occurred but had not been reported. We discussed this with the registered manager who told us they would be implementing a process to ensure all future incidents were shared with the appropriate external organisation in a timely manner.

We found no evidence that people had been harmed however, systems were not robust enough to demonstrate management oversight and support continuous improvement of the service. This was a breach of regulation 17 (Good Governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

- People, their relatives and staff told us they found the registered manager to be approachable and supportive. One staff member told us, "The registered manager has an open door and is available to people, relatives and staff at all times. I feel comfortable approaching [registered manager] with any concerns and know I will be listened to."

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

- Surveys, telephone reviews and home visits conducted by the registered manager provided people and their relatives opportunity to express their views and opinions of the care which was received. One person told us, "I have received questionnaires but am happy with care. The registered manager conducts short review visits as well which is nice. [Registered manager] checks I am happy with everything and if I would like any changes. [Registered manager] is very approachable and professional."

Continuous learning and improving care

- The registered manager was keen to develop and improve the company and welcomed feedback to support this process.
- Staff told us the registered manager was supportive of the team and encouraged staff to attend additional training to enhance their knowledge and skills.

Working in partnership with others

- The registered manager worked with other health and social care professionals to ensure appropriate care was in place. This included ensuring people had equipment such as mobility aids to support them in remaining safe at home.

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 17 HSCA RA Regulations 2014 Good governance The quality systems in place were not effective in the monitoring of the service or identifying areas for improvement.