

K&P Home Care Ltd

Right at Home Ilkley, Keighley & Skipton

Inspection report

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Date of inspection visit:
10 January 2023

Date of publication:
23 February 2023

Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service effective?

Good ●

Is the service caring?

Good ●

Is the service responsive?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Right at Home Ilkley, Keighley and Skipton is a domiciliary care agency that provides care for people in their own homes. 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 the inspection the service was supporting 17 people with personal care, including older people and people living with dementia.

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

People and relatives spoke very positively about the care and support provided. They were happy with the call times and said they were supported consistently by the same staff. They felt safe and told us staff were caring and compassionate. People's privacy and dignity were respected.

Staff knew people well and supported them based on their needs, wishes and preferences. They had the skills to support people appropriately and received regular support, supervision and training. Recruitment was managed safely.

People's care needs were assessed and they received effective support with their dietary and health needs. Medicines were managed safely. The service was responsive to people's health and social care needs. Staff followed good infection prevention and control practices, including wearing personal protective equipment when supporting people.

Staff asked people for consent before providing any care. 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.

The provider and the registered manager were approachable and passionate about providing high quality care. They provided strong and visible leadership to the team. Audits and checks were in place to monitor the quality and safety of the service. One relative said, "Managers and care givers alike have been consistently friendly, compassionate, supportive, prompt and responsive."

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 20 January 2020 and this is the first inspection.

Why we inspected

This was a planned inspection as the service did not have a rating.

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 were 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 ●

Right at Home Ilkley, Keighley & Skipton

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 Health and Social Care Act 2008.

Inspection team

The inspection was carried out by one inspector and an Expert by Experience. 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.

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 a short period notice of the inspection to be sure that the provider or registered manager would be in the office to support the inspection. Inspection activity started on 6 January 2023 and ended on 13 January 2023. We visited the location's office on 10 January 2023.

What we did before inspection

We reviewed information we had received about the service. We sought feedback from the local authority and professionals who work with the service. 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

We spoke with 3 people who used the service and 8 relatives about their experience of the care and support provided. We spoke with 6 members of staff including the nominated individual, registered manager, the quality and compliance manager and care staff. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

We reviewed a range of records including 3 people's care records and multiple medication records. We looked at 3 staff files in relation to recruitment, staff supervision and training. We also reviewed a variety of records relating to the management of the service including audits and 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 is the first inspection of this newly registered service. This key question has been rated good. This meant people were safe and protected from avoidable harm.

Staffing and recruitment

- People and relatives told us call times were reliable and they were supported by the same staff. One relative said, "They [staff] are really caring, compassionate and on time."
- Staff confirmed they consistently supported the same people, and this helped build understanding and trust. The provider had a process where they offered a minimum visit time of one hour. The registered manager told us this meant calls were not rushed and there were increased opportunities to build relationships between people and staff.
- An electronic log system was in place and call times were regularly checked to ensure they were on time and the correct length.
- Staff were recruited safely. The provider had robust procedures in place to ensure staff had the right skills and values to work in a care setting.

Systems and processes to safeguard people from the risk of abuse

- People and relatives told us they felt safe. One relative said, "The three main carers are wonderful. My [relative] is very safe."
- Staff received training in safeguarding procedures and demonstrated they knew how to report poor care and abuse. Safeguarding was also a topic that was regularly discussed in spot checks and supervisions.
- Safeguarding incidents were reported to the relevant authorities and investigated by the registered manager.

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

- Risks associated with people's care, health and the environment were assessed. Records were regularly reviewed and guided staff on how to minimise the risks. Risk assessments were clear and helped promote safety.

- Staff knew people well and how to reduce the risks they were exposed to .

- There was a strong culture evident across the service of learning lessons when things went wrong.

Accidents and incidents were recorded and action taken to prevent events happening again. For example, one person had experienced a number of falls and the registered manager worked with the family and other professionals to introduce equipment into their home to reduce the risks of falls.

Using medicines safely; Preventing and controlling infection

- People received their medicines safely.
- Medication administration records were clear, accurate and audited regularly. Staff administering medication had training and their competency was regularly reviewed to ensure they were up to date and

safe.

- Staff had training in infection prevention and control. They used personal protective equipment safely.

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.

Staff support: induction, training, skills and experience

- People and relatives were confident in the abilities of staff.
- Newly recruited staff received a comprehensive face to face induction and the opportunity to shadow more experienced staff. Spot checks were carried out regularly to monitor how staff were supporting people. This included a range of detailed observations
 - The office had a well-equipped training room and the registered manager spoke passionately about the value of high quality training in providing effective care and support. Training records showed staff had completed essential training and additional training specific to the needs of people using the service.
 - Staff received support and guidance through regular supervision and appraisal meetings.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law; Supporting people to eat and drink enough to maintain a balanced diet

- People's needs were assessed before being offered a service. The registered manager visited people in their own homes to gather detailed information in order to formulate care plans and risk assessments. They described the support required for each call and contained person centred information. The provider had a process to ensure people had face to face introductions with new staff before they started offering care and support.
- People received appropriate support to ensure they had enough to eat and drink. People's preferences were recorded in their care plans. Where there were concerns about people's nutrition the provider was proactive in offering support. For example, they identified one person ate better in a social situation so the call times were reviewed to facilitate this.

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

- People and relatives said people's health needs were supported. One relative told us staff recognised changes in one person's needs and described staff as being "on the ball".
- Care plans contained clear information about people's health needs and we saw evidence of liaison with relevant health and social care professionals.

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.

- Staff received training and understood the principles of MCA and how this applied to their role. They gave us examples of how they promoted choice and independence. One staff member said, "It's their home. They have control."
- People confirmed staff who supported them asked for consent before undertaking any care tasks.

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 relatives told us staff were caring and compassionate. One person said, "They [staff] have made a lot of difference for me." A relative said, "They [staff] often bend over backwards to help."
- A relative told us about how staff had supported their relative to regain their independence and mobility. A person said, "The support means we can stay in our own homes."
- We saw examples of people being supported with hobbies and projects which boosted their wellbeing and motivation. The provider told us about one person who had been supported to achieve a dream with the support of consistent staff.
- Staff we spoke with demonstrated caring values and a strong desire to provide people with personalised care. They spoke about promoting people's independence and gave person centred examples of how they respected people's privacy and dignity. One staff member said, "It is a privilege to go into people's houses."
- People received support from the same staff so their care was consistent. Staff had formed warm and genuine relationships with people and relatives. They confirmed call times were not rushed and there were opportunities to talk with people.
- Care records were written in a respectful way, which indicated warmth and compassion.

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

- People and relatives told us staff listened to their views. Most people and relatives said they were involved in regular reviews of their care. We saw evidence people's views were recorded and changes made to people's care plans accordingly.
- The provider carried out regular satisfaction surveys with people and relatives. The results were very positive.

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; End of life care and support

- People and relatives said person centred care was provided. Care plans were personalised and provided clear information about people's life history, interests and preferences. We saw examples of the service being responsive to changes in people's needs.
- Staff had a good understanding of people's social needs. They supported people with their hobbies and interests and to be part of the local community.
- At the time of the inspection the service was not supporting anybody at the end of their life. However, staff received training and the registered manager told us plans were in place to further develop the knowledge and skills of staff in this area.

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.

- The service identified people's communication needs as part of their initial assessment. Care plans provided guidance about the most effective way to communicate with people.
- Systems were in place to meet people's communication needs. For example, the provider had supported one person with a pictorial staff rota to help them recognise which staff would be visiting them. Another person who had limited vision was supported with a large print and colour coded medication administration record.

Improving care quality in response to complaints or concerns

- The provider had a system to monitor complaints and compliments. This also included recording low-level concerns. The information was used to improve future practise.
- We saw the provider had received a high level of compliments about the quality of the service provided.

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; Continuous learning and improving care

- The provider fostered a positive culture that promoted high standards and person centred care. Weekly 'reflection meetings' were held with the provider and office team. The registered manager spoke passionately about examples where improvements had been made as a result of these meetings.
- Staff said they were happy working for the service. They expressed their loyalty and said they felt appreciated. They praised the management team and said they were approachable and supportive. One staff member said, "They [management team] are always there if you need them." Another staff member said, "I feel proud to work for the company and how we make a difference to people's day every day."
- The provider was in the process of introducing an integrated electronic care planning and call monitoring system. This had had been specifically developed by the provider to meet the requirements of the service. The new system meant all calls and records made would be available for real time review. The registered manager told us this would be introduced in February 2023 and formed part of their ongoing commitment to improvement.

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

- There were robust processes in place to monitor the quality and safety of the service. These included detailed audits which produced clear action plans. These had been reviewed and actioned promptly. There was additional oversight from the provider's quality team and the nominated individual.
- The registered manager understood the duty of candour and showed commitment to this. They had complied with the requirements to notify CQC of various incidents.

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

- People and relatives confirmed they felt involved in their care. One relative said, "The manager is lovely. Their heart is in the right place."
- Staff were involved in regular team meetings. They included dedicated time to discuss the needs of people, best practise examples and team development opportunities.
- The service worked in partnership with people, relatives, and health and social care professionals to provide good outcomes for people. There was an open culture where people and relationships mattered.
- The provider conducted an annual satisfaction survey with people, relatives and staff. The results were

very positive with 100% of people surveyed saying they would recommend the service. The service had also received good ratings and feedback from independently published reviews. The service had received maximum ratings and overwhelmingly positive feedback.

- The provider was proactive in developing community links, including fund raising for local charities. They were also on a committee supporting local businesses and individuals to increase accessibility for people living with dementia.