

Tracys Care @Home Limited

Tracy's Care@Home Limited

Inspection report

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service effective?

Good ●

Is the service caring?

Good ●

Is the service responsive?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Tracy's Care@Home is a domiciliary care service providing personal care to people living in their own homes. At the time of the inspection there were 4 people using the service. 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 were cared for safely. Staff knew how to keep people safe from abuse or harm. Risks to people's health had been assessed and plans were in place to reduce any risks identified. People received their medicines safely and there were effective practices to protect people from infection. Safe recruitment practices were in place and people were assured they had regular staff who supported them.

We made a recommendation about assessment of fire and health and safety risks in people's homes.

Needs were assessed prior to people receiving support and their independence was promoted. People were confident staff knew how to support them; staff were skilled and had undertaken training to enable them to fulfil their roles. Staff were supported in their roles.

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.

Staff were polite, pleasant and respectful. Care was provided in a dignified and respectful way. People described the service they received as excellent. One person said, "This is an extremely good service, they [care staff] always arrive on time and are always willing to help".

Care was person-centred. People made choices about the way they wanted their care provided and were encouraged to do things for themselves to remain as independent as possible. People knew who to speak with if they had any complaint or concern. There was a complaints procedure in place so any complaint would be dealt with appropriately.

People and staff had confidence in the registered manager to manage the service well and were encouraged to give feedback. The registered manager had a good understanding of the regulatory requirements of their role. There were systems in place to monitor the quality and performance of the service to help drive improvement.

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 27 April 2022 and this is the first inspection.

Why we inspected

This inspection was prompted by a review of the information we held about this service.

Follow up

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

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

The service was safe.

Details are in our safe findings below.

Good ●

Is the service effective?

The service was effective.

Details are in our effective findings below.

Good ●

Is the service caring?

The service was caring.

Details are in our caring findings below.

Good ●

Is the service responsive?

The service was responsive.

Details are in our responsive findings below.

Good ●

Is the service well-led?

The service was well-led.

Details are in our well-led findings below.

Good ●

Tracy's Care@Home Limited

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 undertaken by 1 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 who is also the nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

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.

Inspection activity started on 8 February 2022 and ended on 8 February 2022. We visited the location's office/service on 8 February 2022.

What we did before the inspection

We reviewed the information we had received about the service. We used information gathered as part of monitoring activity that took place on 18 November 2022 to help plan the inspection and inform our judgements. The provider was not asked to complete a Provider Information Return (PIR) prior to this inspection. A PIR is information providers send us to give some key information about the service, what the service does well and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with 2 people who used the service to find out their experience of the care provided. We spoke with 3 members of staff including 2 care workers and the registered manager. We reviewed a range of records which included 2 care plans, 2 staff recruitment files and a variety of records relating to the management of the service, including 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.

Assessing risk, safety monitoring and management

- Assessment of risk to people's care had been undertaken and plans were in place to guide staff how to mitigate the risk identified. Staff knew how to keep people safe and mitigate any risks identified.
- People told us staff understood how to provide them with safe care. One person said, "Staff know what they are doing and feel safe with them."
- Environmental risks had been assessed by the registered manager to keep staff safe at work and reduce any unnecessary risks to people, however there was limited documentation around this. We discussed this with the registered manager who was receptive to our comment and following the inspection sent us assessment records they would now complete.

We recommend the provider seek guidance from a reputable source regarding assessments relating to fire and health and safety risks within people's homes.

Systems and processes to safeguard people from the risk of abuse

- People were cared for safely and were protected from the risk of harm. Staff knew what signs to look for to keep people safe.
- People told us they felt safe with the staff who supported them.
- Staff received safeguarding training and knew how to recognise and report any concerns of abuse. There were up to date procedures and information available to support them.
- The registered manager understood their responsibilities to keep people safe and knew to notify the relevant authorities if any safeguarding issues arose.

Staffing and recruitment

- People told us they were happy with the staff who came to support them.
- People were safeguarded against the risk of being supported by unsuitable staff because there were appropriate recruitment practices in place. Staff were checked for any criminal convictions and satisfactory employment references were obtained before they started to work for the service.
- There were enough suitably qualified, experienced and skilled staff to provide people with safe care.

Using medicines safely

- People's medicines were managed safely.
- Staff received training in administration of medicines and checks were in place to ensure medicines were being administered as prescribed.

Preventing and controlling infection

- People were protected from the spread of infection. The service had effective infection prevention and control measures to keep people safe.
- Staff followed current government guidance when using PPE.

Learning lessons when things go wrong

- At the time of the inspection there had been no incidents where things had gone wrong. The registered manager said they would use any opportunity to reflect and look at ways to improve the service if or when things went wrong.

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 the service commencing. One person said, "I spoke with [registered manager] about what I needed." Another said, "I was fully involved in the care planning."
- Care records showed people's needs and choices. This ensured their care and support was provided in line with the principles of best practice.

Staff support: induction, training, skills and experience

- People were supported by staff who had received sufficient training to meet their needs. Training included moving and handling, infection prevention and control, health, nutrition, dementia awareness, mental capacity act and health and safety. There was also opportunity to undertake more specialist training such as managing End of Life care.
- Staff told us they felt supported. One staff member said, "I have had supervision, my practice has been observed and [registered manager] does 'spot checks' when we are on visits."
- All staff had completed an induction and worked alongside the registered manager before they worked alone. One said, "My induction was good, very in depth, better than I have ever had anywhere else."
- Staff competencies were tested, and the registered manager was in the process of developing a training matrix to ensure she had the assurance and oversight of all staff training as the service grew.

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

- At the time of the inspection the service was not providing any support to people who had any nutritional needs. The people using the service were independent and if needed had support from their families.
- Staff had received nutrition and hydration awareness training and the registered manager was aware of the need to have plans in place for people who needed support with their nutrition.

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

- Staff knew to contact health professionals in an emergency
- At the time of the inspection the service was small, and people were able to access health services for themselves. The registered manager told us they had previously liaised with the local authority and an occupational therapist and offered guidance and advice to people about accessing services when needed.

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's consent was sought before any care was given. One person said, "They [staff] always ask me what I want or need before they wash me."
- People's care records contained signed consent forms, and when appropriate, people and their relatives were involved in any decisions about the care they needed.
- People were encouraged to remain as independent as possible. One staff member said, "I encourage people to do things for themselves and help when need."

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 cared for by staff who were polite and very good at what they did. One person said, "Staff are very polite, do what they are asked and know what they are doing."
- Staff met people's equality and diversity needs. These were identified in people's support plans, so staff knew how to respect people's preferences.

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

- People were involved in the care planning and were kept informed and consulted with about any changes. One person said, "I was fully involved in the care plan, I speak with [registered manager] if there were any changes I wanted."
- Care plans included people's preferences and how they wished to be treated. One person said, "The staff are very respectful and always ask me how they can help."
- No one being supported currently required the support of an advocate. An advocate is someone that helps people to speak up about their care. There was a policy in place which directed staff as to how they would access advocacy services should they need to.

Respecting and promoting people's privacy, dignity and independence

- People were encouraged to be independent. One staff member said, "I encourage people to do things for themselves and then help where needed."
- People told us their confidentiality was maintained. One person said, "I have no idea about other people using the service."
- Staff knew how to maintain people's privacy and dignity. Staff described how they close curtains and shut doors, so people are not observed and check with people how they want their personal care done.

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; 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's care was personalised. Care plans detailed people's preference as to how they wished their care and support to be delivered.
- People were actively involved in their care and discussed with staff their preferences. One person said, "We [care staff and person] always talk about what I want and need, everyone is respectful of my wishes."
- Staff were able to support people with any activities they may wish to undertake. The registered manager told us they would provide support to take people out, so they were not socially isolated. However, at the time of the inspection the people receiving support were fairly independent and accessed activities for themselves.

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.

- People's care plans had information regarding their communication needs including information regarding any visual or hearing aids required and if a person was able to communicate verbally.
- Staff communicated with people in their preferred way.
- The registered manager was able to explain the alternative formats available for written communication, such as large print, easy read or translating into another language.

Improving care quality in response to complaints or concerns

- At the time of inspection there had not been any complaints about the service. The provider had a complaints policy and procedure in place.
- People knew how to raise concerns and were confident they would be dealt with properly.

End of life care and support

- End of life training had been completed and an End of Life Policy was in place.
- At the time of the inspection, the service was not supporting anyone who required end of life support.

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.

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

- At the time of the inspection the service was small, and the registered manager provided some of the care. This meant they had good oversight of the care being delivered and was in regular contact with people and staff so any issues around quality performance could be addressed quickly.
- Basic systems and processes were in place to monitor the quality and performance of the service. Audits of records had recently been put in place, these needed to be embedded and developed as the service grew. The registered manager was aware of the need to develop the systems to help drive improvements and give their full oversight of the service as it grew.
- Staff were clear about their roles and responsibilities towards the people they supported and felt supported in their role. The registered manager undertook 'spot checks', which ensured they provided the care and support at the standard required.
- Staff spoke positively about the registered manager. One said, "[Registered manager] is very hands on, they make sure everything is ok, responds quickly to any concerns and updates care plans when needed. They are always there and available for any problems."

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- People were at the heart of everything the service did. The registered manager and staff were focused on providing individualised care and achieving good outcomes for people and their families.
- Staff felt supported and able to raise any issues or concerns they may have without fear of what might happen as a result. Staff told us, they felt well supported and listened to at work.
- The registered manager was always available, contacting staff each day when they had completed their shift and sometimes working alongside staff to provide the care and support needed. This enabled the registered manager to fully understand the needs of the people and challenges the staff may face.

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 registered manager understood their duty of candour responsibility. The duty of candour requires providers to be open and honest with people when things go wrong with their care, giving people support and truthful information. Policies and procedures were in place.
- Staff knew how to whistle-blow and knew how to raise concerns with the local authority and Care Quality Commission (CQC) if they felt they were not being listened to or their concerns acted upon.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Continuous learning and improving care

- The registered manager sought feedback from people using the service. One person said, " I was asked for my feedback and I will speak with [registered manager] if I need to."
- Care plans demonstrated people's equality characteristics were considered and respected.
- Staff said they were able to give feedback and make suggestions. They felt listened to. One staff member said, " When I found it was quite cold in one person's home I telephoned [registered manager] and she contacted a family member and a plug-in heater was provided straight away."
- Throughout the inspection the registered manager was open and responsive to any suggestions as to how they could improve their systems to ensure they were robust enough as the service developed and grew.

Working in partnership with others

- At the time of the inspection there had been limited opportunity to work with other partners. The registered manager said if and when they needed to, they were open to working with other health professionals and organisations, which they had done when they had supported someone at end of life.
- Following the inspection, the registered manager informed us they were in contact with another service looking at contingency plans should they every be able to not provide the support needed.