

TLS Care Ltd

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Inspection report

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15 May 2023

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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

TLS Care Ltd is a domiciliary care agency providing personal care to people in their own homes. At the time of our inspection there was 1 person using the service.

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.

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

Recruitment process required minor improvements. We have made a recommendation about recruitment. Individual risks were assessed, and measures were put in place to keep people safe. The registered manager reviewed care plans and risk assessments to ensure they remained current. The care being provided was from a consistent staff team.

Staff had received relevant training in relation to their role. 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 registered manager assessed people's needs before they began to use the service. People had support to prepare their meals and drinks where they needed this.

A relative told us staff were kind, caring and respectful towards their family member. Staff encouraged and supported people to be as independent as possible.

Staff told us the information provided in the care plan gave clear guidance on how care should be delivered to people. People's end of life wishes and preferences were not recorded. We have made a recommendation about this. Relatives knew how to raise issues or complaints.

Quality assurance processes were in place, however as the service was very small and had only just started taking on packages, most processes had not started, however, the company's quality assurance policy recorded how the registered manager would ensure systems were robust.

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 05 December 2018, 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 well led.

Details are in our well led 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 ●

TLS Care Ltd

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 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.

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 the provider or registered manager would be in the office to support the inspection.

Inspection activity started on 12 May 2023 and ended on 15 May 2023. We visited the location's office on 12 May 2023.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. 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.

During the inspection

We spoke with 1 relative about their experience of the care provided. We spoke with the registered manager and 2 staff members. We reviewed a range of records. This included 1 person's care records. We looked at 2 staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

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

- There were enough staff to ensure there had been no missed visits. One relative told us, "They've been very reliable and text me when they are going to be late."
- We looked at the recruitment procedures followed for staff. Whilst most checks had been completed including completion of application forms, pre-employment checks, which included references from previous employers and Disclosure and Barring Service (DBS) check. The registered manager had not kept any interview notes for 1 staff member and employment history did not go back to education. The registered manager acted during the inspection to find the missing information.

We recommend the registered manager ensures recruitment checks are in line with current guidance.

Systems and processes to safeguard people from the risk of abuse

- Staff had received training and were able to demonstrate they knew the process for reporting concerns. A staff member told us, "If I observe anything unusual or worrying. I would report to my boss, if I was not happy I would report to CQC or the local authority."
- The registered manager was clear about their safeguarding responsibilities and aware of the appropriate actions to take if a safeguarding concern was raised to them.

Assessing risk, safety monitoring and management

- Appropriate risk assessments were in place to reduce any risk of harm. For example, risks around people's mobility, skin care and environment.
- Staff were aware of people's risks and promptly reported any changes in people's risks or concerns about safety to the registered manager.

Using medicines safely

- At the time of our inspection the service was not providing support to anyone with medicines.
- The registered manager was aware what processes would need to be put in place to ensure medicines were managed safely when needed.

Preventing and controlling infection

- We were assured the provider was effectively managing the prevention and control of infection. The provider had policies for infection control.
- Staff told us they were provided with personal protective equipment (PPE).

Learning lessons when things go wrong

- Whilst the service had not had any accidents, incidents, or complaints they had set up systems to capture

all information required and would use this for future analysis of trends and themes.

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

- Assessments were carried out prior to people using the service. A relative told us, "When we first started the manager came and asked lots of questions about what we wanted."
- Care plans and risk assessments were kept under review and updated by the registered manager whenever there was a change in need.

Staff support: induction, training, skills and experience

- Staff were supported to complete a variety of training. A staff member said, "We have completed online training, [registered manager] is trying to book some face-to-face training. I have done practical training with the other company I work for." Another staff member said, "I had an induction and training, the training was good."
- The registered manager carried out competency assessments with staff during their induction.
- A relative told us staff seemed well trained. "The care we have is good. I do think the [staff member] is well trained."
- The registered manager was in the process of booking face to face moving and handling training and sent us evidence this was being scheduled.

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

- People's food and drink preferences were assessed, and staff supported people with their preferences. A staff member told us, "I help with the food, [person] tells me what they want, and I do it. Today I made cake."
- Staff had received training to ensure they prepared food hygienically.

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

- People's medical and health needs were recorded in their care plan to ensure staff working with people were fully aware of these.
- The registered manager was aware of who to contact if people required additional support from other 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.

In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS). 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

- The registered manager understood their responsibilities under the Act.
- Staff had been trained and understood the importance of ensuring people made their own choices about their lives. A staff member told us, "[Person] chooses their food and their clothes, I say do you like this one or that one."

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

- Staff had developed positive relationships with people. A staff member said, "I really like my work and the client, and we talk all the time."
- A relative was pleased with the care they had received for their family member and said, "The carer is very caring towards [family member] and works well with the family."
- The registered manager was committed to ensuring equality and diversity was respected at the service and staff had received training.

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

- People and their relatives were involved in making decisions on how they wanted their care to progress. The registered manager told us, "We have tried to be very flexible and call times were decided by family. We are slowly introducing another staff member to support the package."
- Care records confirmed the support requested had been provided by staff.
- The registered manager told us their main achievement at present is, "Providing care the way it should be done. The [staff member] is very good, and [person and family] like [staff members] care. They trust them."

Respecting and promoting people's privacy, dignity and independence

- Care plans included what people could do for themselves and where they needed support from staff.
- Staff treated people with dignity and respect. A relative told us, "[Staff member] is very respectful in our home." A staff member said, "I always close the curtain when supporting with personal care."
- When staff spoke with us about people, they were respectful and positive about the person they were supporting. One staff member told us, "The client is doing well, and their mobility has improved so they are now able to go upstairs."

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

- The care plan was detailed and recorded how the person wanted their needs and preferences to be met. The registered manager reviewed and updated the care plan to reflect the person's changing needs.
- People received care from consistent staff daily. A staff member told us, "I have worked with this client since they started using the service, so I know them very well."

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 people should get the support they need in relation to communication.

- People's communication needs were assessed and recorded in their care plan.
- The registered manager understood their responsibility to provide information in alternative formats if needed.

Improving care quality in response to complaints or concerns

- The service had a complaints procedure which set out how any complaints received would be managed. This was shared with people when they began to use the service. The service had received no complaints since its registration.
- A relative told us, "If I had any concerns I would go straight to [registered manager]. To be honest if they were not what I expected I would have done something about it."

End of life care and support

- At the time of the inspection no one using the service needed end of life care and support. The registered manager was aware to seek guidance and support should anyone using their service require this type of support.
- Care plans did not document people's wishes and preferences in relation to their end-of-life care.

We recommend the provider seeks best practice to ensure people's wishes and preferences at the end of their life are captured.

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

- The registered manager was open and honest about the difficulties they have had in obtaining packages of care. The service since registration had spent periods of time dormant (when a service has no packages of care).
- The service had only recently started providing a package of care to 1 person. The registered manager was committed to providing good care to people and told us they would like to grow the business.
- The registered manager had systems and processes in place to ensure good oversight of the service on a day-to-day basis and frequently assessed the quality and safety of their systems. However, they had not been operating long enough to implement and embed their systems and processes fully. We discussed they would need a robust quality assurance system in place for when the service expanded their care packages and their staff team.
- Documents were in place ready to monitor accidents, incidents and complaints and audit processes would be put into place for care plans, recruitment files and medicines monitoring as the business developed. The processes they intended to follow were clearly recorded in their quality assurance policy.
- Spot checks on staff were carried out to ensure the care provided was good and staff were following the care plan. A staff member told us, "I do the spot checks we check if the client is happy, if staff are wearing PPE, if they leave home tidy."
- Staff told us they felt the registered manager was approachable and spoke positively about the management of the service. A staff member told us, "I enjoy my job, I have meetings and I can contact the manager at any time." Another staff member said, "It is a very good company, and we talk all the time. Care is changing and we need to be aware of the small things that might affect clients."

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 was clear about their responsibility to be open and transparent in line with their duty of candour responsibility.

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

- The registered manager planned to introduce surveys as the business grows but currently used the spot check process and informal visits to gain feedback from people and relatives.

- The culture was positive, and the registered manager had a good understanding of equality and diversity. They said, "I make sure I accept people without discrimination. We will not discriminate."

Working in partnership with others

- The service had not had the opportunity to work with many health and social care professionals at present. However, the registered manager was a health care professional and fully understood how this would be crucial when the service expanded.