

Severn Vale Home Care Limited

Good Oaks Home Care - Worcester

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

Good Oaks Homecare Worcester is a domiciliary care agency providing personal care to older people, people living with dementia, mental ill health, sensory impairments or physical disabilities. At the time of our inspection there were 32 people receiving personal care from 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

Staff knew how to keep people safe from harm. Risk assessments for people and their homes were in place. Staff were recruited safely and received the training needed to provide safe care. Medicines were administered safely.

People received effective care from staff who received a detailed induction. Care plans contained enough detail for care to be provided. Managers ensured staff were competent and confident in their roles, so people received safe 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.

People received care which was person centred. Staff knew the people they supported well and took time to ensure their needs were being met. Feedback from people and their relatives was used to improve the care provided.

Staff were responsive to the needs of each individual. They spent time getting to know people so they could understand how to communicate with them. Complaints were well managed and responded to in a timely way.

The service was well managed. The management team had good oversight of the care being provided. They used a range of tools such as audits to continually develop and improve the service.

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 13 January 2021, and this is the first inspection.

Why we inspected

This was a planned inspection to provide a rating for the 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 ●

Good Oaks Home Care - Worcester

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

One inspector carried out a site visit and 2 Experts by Experience made calls to people and relatives. 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 the service 48 hours' notice of the inspection. This was because we needed to be sure the registered manager would be in the office to support the inspection.

Inspection activity started on 07 June 2023 and ended on 12 June 2023. We visited the location's office on 07 June 2023.

What we did before the inspection

We reviewed information we had received about 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 2 people who used the service and 9 relatives about their experience of the care provided. We spoke with 9 members of staff including the registered manager, senior staff, care staff and the nominated individual. 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. We looked at 3 staff files in relation to recruitment and staff support and a range of records relating to how the service operated and was managed.

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.

Systems and processes to safeguard people from the risk of abuse

- The provider had systems and processes in place to keep people safe. One person said, "I feel very safe, I have a door camera and they [staff] say who they are and where they are from. They are lovely girls."
- Staff were trained to recognise the signs of abuse. They understood how to report this and gave examples of when this had happened.
- The registered manager understood when to make safeguarding referrals to the local authority and CQC and ensured these were followed up promptly to help keep people safe.

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

- People's safety and ongoing risk was generally well managed. Some risk assessments would benefit from more detail such as how to use specific moving and handling equipment. The registered manager ensured action was taken during the inspection to improve this.
- Staff were well trained and often supported the same people which further mitigated the risks to people when using equipment. One relative said, "I'm very impressed with the staff, all very good, continuity of care is good. We have regular carers as much as possible."
- The provider had regular meetings with staff to discuss areas where lessons could be learnt. Staff confirmed they felt able to contribute to these discussions to ensure practice was improved.

Staffing and recruitment

- Staff were recruited safely and in line with the providers policy.
- People and their relatives told us there were enough staff to meet their needs. One person said, "They [staff] are generally on time, 10 minutes either way but I don't mind anyway as I'm glad to see them. The office or staff member will always let me know anyway if they are running late."
- A relative said, "He never feels rushed, enough staff I think, always ask if there is anything else either of us needs which is nice."
- All necessary pre-employment checks were being completed. This included asking for references and completing checks with the Disclosure and Barring Service. These 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 safely. Staff received training in how to administer medicines and the management team completed regular checks to ensure they were competent in this.
- The registered manager completed regular audits to ensure all medicines were administered

appropriately and on time. Medicines including creams were recorded on the medicines administration sheets and protocols were in place for items that could be given if required.

Preventing and controlling infection

- People and their relatives said there had been no issues with staff using personal protective equipment (PPE) while providing care. One relative said, "They [staff] always wears gloves and an apron."
- Staff had received training in the use of PPE and followed the guidance set out in the providers policy.

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

- The provider had systems and processes in place to ensure people's needs were assessed. This included their protected characteristics under the Equality Act 2010 such as gender, age, culture, and ethnicity.
- The registered manager reviewed and updated care plans on a regular basis and as people's needs changed.
- Staff were knowledgeable about people's day to day needs. One person said, "Staff are well trained. They know exactly what their [relative's] needs are and have a nice relationship with them."

Staff support: induction, training, skills and experience

- People and relatives told us staff had the appropriate training to provide their care. One relative said, "They are well trained carers, very good. A new member shadows an experienced carer so they can learn the job."
- New staff to the service completed an induction. This included shadowing experienced staff and completing essential training for their role.
- The registered manager ensured staff completed all mandatory training and offered additional specialist training such as for the use of equipment if required.

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

- Where appropriate staff ensured people received food and drink to ensure they maintained a healthy diet. Staff gave examples of asking people what their preferences were and ensured they had eaten where this was part of the care provided.

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

- People receiving care had a range of professionals involved and it was clear from the records staff liaised and followed information provided to them.
- The provider encouraged staff to look for additional support for people. A staff member was given time to explore options such as dementia cafes to give people choice about the care they received.

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 were included in all decisions about their care and this was documented in their records.
- The registered manager demonstrated a good understanding of the MCA and how this would be used to keep people safe from harm.

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 were treated with kindness and respect. People we spoke with said, "They [staff] are always chatting to me as they are concerned about me." A relative said, "Very caring indeed, always treats us both with respect and dignity, we can have a laugh and a joke, my husband enjoys his visits."
- People and relatives said staff were caring and knew them well. One relative said, "They [staff] do ask consent and have a nice demeanour and always ask if they need anything else or another cup of tea, lovely attitude." Another relative said, "Very kind and caring staff, some even visited her in hospital which was lovely."
- Staff spoke with compassion about the people they supported. They gave examples of how they had built relationships with people and used this to ensure care was person centred. One staff member said, "When I am delivering care, I feel it is important to be in the moment with the person, so they have all my attention."
- Staff respected people and delivered care in a way which was respectful and considered the choices and preferences of each person. One relative said, "Definitely kind and caring staff, she has no objection to male or female carers, they always treat her with dignity and respect and encourage her to do what she can. She is independent minded."
- The management team knew people and their relatives well and this helped staff to provide person centred care.

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

- People were involved in making decisions about their care. This was written in the care plans and the daily records which were very detailed.
- Relatives comments about being involved in discussions about their family member's care were mixed. One relative said, "Staff have chatted to me about her care." Another relative said, "I'm not aware of a care plan or any paperwork being filled out."
- People and relatives had the opportunity to give feedback. One relative said, "I have done 2 surveys."
- The registered manager listened to feedback and used this to make changes and improvements if needed. A relative said, "A recent review highlighted inconsistency from the staff and since then it has been brilliant."

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 and responsive care. One person said, "[Staff member's name] is marvellous. I'm never rushed. It's very good."
- Staff considered the needs of the people they supported and knew them well. Staff gave examples of attending groups with people to ensure their cultural and social needs were being met. A relative said, "They [staff] even accommodate times on a Sunday so we can attend church and visit earlier to help us."
- The registered manager audited care plans and the daily records and gave feedback to staff about the quality of these, so they were continually being improved and easy to use.

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.

- Staff understood how people liked to communicate. This was set out in care plans and staff used these to meet the individual needs of people in their care.
- The registered manager ensured people had access to the information in a format they could understand such as easy read.

Improving care quality in response to complaints or concerns

- People and relatives felt confident they could raise a concern, and this would be responded to appropriately. One relative said, "I have never had to complain, I would call the office, very good at answering the phone, even at the weekend."
- The registered manager ensured complaints were responded to in line with the providers policy. Records showed complaints and concerns were responded to promptly and actions taken.

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

- People and relatives said they felt positive about the service and found managers and senior staff to be approachable. One person said, "The manager is [manager's name], he is very approachable, I have met him once and spoken on the phone." A relative said, "The manager is [manager's name] for everyday stuff, they are friendly and approachable. They occasionally visit with the carers for hands on experience, so they know what goes on."
- Staff told us the service was well-managed. The management team had a system in place for welcoming new staff and rewarding those who had been there for some time in staff meetings. One staff member said, "I feel valued. A simple thank you means a lot."
- Staff used words such as supportive and approachable to describe senior staff and said it was a good company to work for.
- Staff attended regular staff meetings, they received regular supervision and updates from the management team.

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

- People were informed if something went wrong, or staff were going to be delayed. Most felt they had good contact with staff in the office. One relative said, "Good Oaks Home Care is very good, overall, they turn up when they say they will, they post a note saying which staff will visit." A person said, "They should really come and assess more and the timings could be better."
- The registered manager understood their responsibility to inform CQC about events which affected their service such as safeguarding, or absence of the manager for more than 28 days.

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

- The service was well managed. The registered manager was supported by a team of trained coordinators. The provider was involved in the day to day running of the service which added an extra level of support for people and staff.
- The provider ensured the service was supported by a strong leadership team who were experienced in providing bespoke care packages to people.
- The registered manager had oversight of the service and used audits of care records and observations of

staff practice to ensure care was being provided as it should be. These were used to continually improve the service and ensure staff were competent to do their roles.

Working in partnership with others

- The registered manager and staff ensured each person had the right professionals involved in their care and support, so they felt safe and happy. This included health professionals and social care staff.