

Grayson Home Care Limited

Grayson Home Care

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

This inspection took place on 30 October 2018 and 8 November 2018 and was announced. At our last inspection in November 2015, we rated the service good. At this inspection we found the evidence continued to support the rating of good and there was no evidence or information from our inspection and ongoing monitoring that demonstrated serious risks or concerns. This inspection report is written in a shorter format because our overall rating of the service has not changed since our last inspection.

Grayson Homecare provides domiciliary care services to adults and older people with varying needs living locally to the service. The office is staffed daily to cover business hours and an out of hours phone service is also available. At the time of our inspection the service was providing personal care to 43 people.

Not everyone using Grayson Homecare receives regulated activity; CQC only inspects the service being received by people provided with 'personal care'; help with tasks related to personal hygiene and eating. Where they do we also take into account any wider social care provided.

The service had a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

The registered manager continued to oversee the service provided to people. Throughout discussion the registered manager demonstrated a thorough knowledge of people using the service and the staff team. The registered manager was supported by a team of office based staff and care staff who provided care and support to people in their homes.

Staff we spoke with clearly explained how they saw the overall culture and aims of the service, explaining that the support provided for people was their priority. Staff told us the registered manager always provided support and expected staff to be friendly, approachable and treat people with dignity and respect.

The registered manager had systems in place to monitor the quality of the care provided and make improvements to the quality and safety of the service. These included audits on areas covering care records and medication records.

People continued to remain safe as staff knew how to recognise and respond to concerns of ill-treatment and abuse. The provider followed safe recruitment procedures when employing new staff members. When people needed it, they were safely supported with their medicines by trained and competent staff members.

The provider followed effective infection prevention and control guidance when supporting people in their own homes. The equipment that people used was maintained and kept in safe working order and the provider undertook safety checks with people at their home addresses.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible. The policies and systems in the service supported this practice.

People's needs were assessed before they started using the service. Care and support plans were in place detailing how people wished to be supported and people were involved in making decisions about their care. The plans made good use of personal history and described individuals care, wellbeing and support needs. Staff knew the people they were supporting and provided a personalised service.

People were protected from the risk of poor nutrition and staff were aware of people's nutritional needs. People were supported during visits to and from external healthcare specialists.

The provider had an effective complaints procedure in place and people who used the service and their relatives were aware of how to make a complaint.

The provider worked closely with outside agencies and other stakeholders such as commissioners and social workers and ensured people's transfer between services was planned safely.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Good ●

The service remains Good.

Is the service effective?

Good ●

The service remains Good.

Is the service caring?

Good ●

The services remains Good.

Is the service responsive?

Good ●

The service remains Good.

Is the service well-led?

Good ●

The service remains Good.

Grayson Home Care

Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection checked whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

This inspection took place on 30 October 2018 and was announced. We told the provider we would visit on 25 October 2018. They were given notice because the location provides a domiciliary care service; we needed to be sure that someone would be in the office. Inspection site visit activity started on 30 October 2018 and ended on that date. We visited the office location to see the manager and office staff; and to review care records and policies and procedures. We contacted staff, people and their relatives by telephone on 8 November 2018.

The inspection was carried out by one adult social care inspector.

Before the inspection we reviewed information we held about the service. This included notifications the provider had sent us about events or incidents that occurred and which affected their service or the people who used it. We contacted the local authority adult safeguarding and quality monitoring team as well as Healthwatch, the consumer champion for health and social care, to ask if they had any information to share. We used this information to plan our inspection.

We did not ask the service to complete a Provider Information Return before this inspection. This is information we require providers to send us at least once annually 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 three people who used the service and two relatives for their feedback. We spoke with the registered manager and four members of staff. We looked at four people's care plans, risk assessments, daily notes and medication administration records. We reviewed four staff's recruitment records, as well as training, supervision and appraisal records for the staff team, and meeting minutes, audits and a selection of other records relating to the management of the service.

Is the service safe?

Our findings

At this inspection, we found people continued to receive care and support to protect them from risks to their safety, harm and abuse as at the previous inspection in November 2015, and the rating continues to be Good.

People who used the service told us they felt safe in the presence of staff and that their needs were met safely. They said, "Yes, I feel very safe. They always make sure I have everything I need", "They lock up when they're leaving and make sure I've got everything before they go" and "They help me with having a shower and have always made sure I feel safe. I trust them too." One relative said, "Yes, I trust them, they have given me my peace of mind back."

We discussed the staffing rotas with the registered manager who told us, "We always try to keep the same carers for consistency." People we spoke with confirmed this was the case. We saw that some calls were completed by individual carers and some with two carers where a person's needs were more complex. One relative and one person who used the service felt that the covering of calls could be better. They said there were times when their calls were both early and late. We discussed call times with the registered manager who advised that the service advised of a 15 minute period before or after specified call times to accommodate any circumstances where staff may be running late. They said that where possible, people would always be contacted by the office if there were any issues.

The provider had a safeguarding policy and staff were suitably trained to identify and respond to any safeguarding concerns. They assessed people's needs to identify risks and had risk assessments in place which outlined how those risks should be managed to protect people from avoidable harm.

Procedures were in place for the safe management of people's medicines. Where people required support with their medicines, information relating to the level of support which was needed was recorded in their care plan. Staff told us they had completed relevant training and felt competent in managing people's medicines. Records we reviewed confirmed this.

People had personalised emergency plans in place which detailed the assistance that they would need in an emergency. For example, what type of mobility equipment they used.

Accidents and incidents continued to be appropriately recorded. Monthly analysis was carried out to identify any causes or contributory factors and corrective actions took place. The staff we spoke with were aware of the reporting procedures for accidents and incidents.

Staff described the importance of the management and prevention of infection within the service and stated they had completed training. Records we reviewed confirmed this. Staff had access to personal protective (PPE) and this included disposable gloves and aprons used when undertaking personal care tasks.

The provider continued to follow safe recruitment practices. They used application forms, interviews and

references to assess the suitability of new staff. Disclosure and Barring Service (DBS) checks helped to make sure new staff were not barred from working with adults who may be vulnerable.

Is the service effective?

Our findings

At this inspection, staff continued to be supported in receiving ongoing training to develop their knowledge, skills and experience. This enabled them to meet people's needs as effectively as we found at the previous inspection in November 2015, and the rating continues to be Good.

People continued to be supported by staff who had the knowledge and skills required to meet their needs. People and relatives told us they were confident that staff had completed training they required for their role. People told us, "They are definitely well trained" and "They just seem competent. The staff know what they're doing. They are very calm and professional." Relatives told us, "Staff do a fabulous job and assist my relative well", "The staff seem to cope very well", and "The staff know how to use all the equipment we have in place and are very good at what they do."

Staff were positive about their induction and training opportunities and felt able to approach the registered manager should they wish to undertake additional training. Staff told us they regularly met with the registered manager. They found these meetings beneficial as they were able to discuss any concerns they had as well as receiving feedback on their practice. Supervision and appraisals were also completed in line with the provider's policy.

People's needs were assessed prior to their service starting to ensure their specific needs and requirements could be met. For example, assessments identified people's preferred methods of communication and staff were provided with guidance on how to effectively communicate with people. Assessments also covered people's individual needs relating to their physical and health needs.

We checked whether the service was working within the principles of the MCA, whether any restrictions on people's liberty had been authorised and whether any conditions on such authorisations were being met. We found evidence in care plans that people had consented to care and our discussions with the registered manager and staff showed they understood the requirements of the MCA. The registered manager told us they had not needed to make any applications to the Court of Protection.

Staff assisted people to eat and drink whenever this was required. Each person's care plan detailed any particular likes or dislikes and these were respected by staff who also understood the importance of offering people choice in what they had to eat and drink.

People were supported to access and receive healthcare services. Care records contained evidence of visits to and from external specialists including GP's, occupational therapists and district nurses. Staff told us, "The district nurses are very approachable when we contact them. They often will meet us at people's homes to discuss changes that we need to be aware of."

Is the service caring?

Our findings

At this inspection, people consistently gave positive feedback about the caring nature of the staff. Relatives told us they felt the registered manager, the registered provider and staff genuinely cared about their relatives. The rating continues to be Good.

Staff continued to be caring and respect the people they supported. People told us, "The staff are very friendly, calm and professional. They are also very respectful of both me and my family", "Staff are very kind, very thoughtful and overall just fantastic. I don't know what we would have done without them" and "The girls are very caring towards me and I can see that they do their best. They are my lifeline." Another person said, "All I can say is they are a lovely team of people who obviously care very much about the people they look after." Relatives told us, "The staff have been great with my relative. I can't thank them enough", "I think they staff are very good" and "The staff are very gentle with my relative, they have so much patience too."

People's communication support needs were recorded and these described how people were given information in a way they could understand and the level of support they required with their individual communication needs. People's choices were also documented in their support plans.

People's independence continued to be promoted by the staff where possible and care records described what people could do for themselves and what they needed staff to support them with. Staff told us, "One person I care for has equipment to assist with walking on days they are not feeling 100%. We always have a chat about what they think they can do, and then we give it a go. It is a real confidence boost for them when people do more than they think they can."

Care records described how staff were to respect people's privacy and dignity and staff had received appropriate training. People told us, "The staff will always give me time and knock on the door and ask if I'm decent before they come in" and "When I'm having any kind of personal care the staff are very professional. It's not an easy situation to find yourself in, but the approach of staff is just right. I trust them completely." Relatives said, "The staff are very respectful and dignified with my relative", "The staff are part of the family now. They have always respected us as a family and I feel that they really understand what is important to us."

Records were kept securely and could be located when needed. This meant only care and management staff had access to them, ensuring the confidentiality of people's personal information as it could only be viewed by those who were authorised to look at records.

Staff completed equality and diversity training and understood the importance of making sure people were not discriminated against. The registered manager understood the role of advocacy services and told us people could be supported to access advocates when necessary. An advocate is someone who supports people to make sure their wishes and views are heard on matters that are important to them.

Is the service responsive?

Our findings

At this inspection, we found the service continued to be responsive to people's care and support needs as they were during the previous inspection in November 2015. The rating continues to be Good.

People had their needs assessed and their care records demonstrated a good understanding of their individual needs. People's care records were person centred, which means the person was at the centre of any care or support plans and their individual wishes, needs and choices were taken into account.

People had support plans in place covering a wide range of needs including personal care, nutrition and hydration, mobility, medicines and skin integrity which detailed how people wished to be supported. Support plans and risk assessments could be updated immediately if staff observed changes to people's needs. A member of staff told us, "The office is very good at making sure we are informed of any changes in the needs of people we visit. Records are updated very quickly."

The service was responsive to people's changing needs and liaised with external healthcare professionals to ensure people's needs were met. For example, we saw advice had been sought regarding one person's medication following discharge from hospital.

The registered manager gave examples of where the service had made changes to people's care packages when this was requested by people. This included changes to call times and increases in visit times to accommodate people's social needs. For example, carers often supported people to visit the seaside and other attractions which they otherwise would not have been able to do. One staff member told us they could see how important it was for the person to visit the coast so they made this possible for them. The registered manager also told us the service had supported people to integrate into the local community to attend support groups after years of them not engaging with other people. This demonstrated that the service supported people who were at risk of social isolation.

People and their relatives were involved in making decisions about their care and had given their written consent to the care and support they received. Care records were regularly reviewed, updated and evaluated. One person told us, "They visited me when I first enquired about the service. (Registered provider name) went through what I thought I needed help with, and then suggested what help the service could offer me. They were here over an hour and it was very thorough. There have been a few changes along the way but I would say they came up with the right package for me and continue to get it right." One relative told us, "We have been very impressed by the service, the owners in particular are very responsive to any queries" and "We have had a home visit from the owner to check that we were getting everything we needed."

People were actively encouraged to raise concerns. People and their relatives told us they knew who they could go to with any concern or complaint and all felt that they would be listened to. One relative told us, "We had care staff arrive too early which we contacted the office about. I have no issue with raising concerns and have always had an appropriate response." The provider's complaints policy described the procedure

for people to follow when raising a concern or making a complaint, and the timescales they could expect to receive a response. Complaints were recorded, investigated and the complainant informed of the outcome including the details of any action taken.

The registered provider had a policy in place to provide staff with guidance on the Accessible Information Standard. The Accessible Information Standard (AIS) was introduced by the government in 2016 to make sure that people with a disability or sensory loss are given information in a way they can understand. It is now the law for the NHS and adult social care services to comply with this standard.

Is the service well-led?

Our findings

At this inspection, staff told us they continued to be well supported by the provider and the registered manager of the service as at our previous inspection in November 2015. The rating continues to be Good.

People and relatives were consistently positive about the service they received and told us they considered the service to be well-led. One person told us, "I cannot praise them enough. The staff are fabulous and always do their best. I would recommend Grayson Homecare 100% to anyone needing a service like this." One relative told us, "They have a difficult job to do and can't always get it right but I would not be with them if I didn't think they did their best."

The service had a positive culture that was person centred, open and inclusive. Staff we spoke with felt supported by the provider and the registered manager, and told us they were comfortable raising any concerns. One staff member said, "We are like a family and I have never worked for such a lovely service. I have always been able to approach the owners and they have been very flexible with me about my childcare needs. It is a real pleasure to work for them."

The provider continued to check the quality of the service and to seek people's views about it. The provider carried out regular audits to ensure people who used the service received a high standard of care. These included audits for care records, medication and safeguarding. The registered manager also undertook 'spot checks' in the community to monitor the quality of the service delivered by staff. Team meetings were held regularly and included discussions about lessons learned.

The registered manager told us they encouraged people, their relatives and staff to share their concerns and opinions to help them improve the quality of the service. Relatives of people and staff told us the registered manager often conducted regular reviews of care and was very knowledgeable about people's care and support needs. In addition, we saw many positive comments and compliments on the quality of the service had been received by the provider. Comments included, "The standard of care my relative has received is first class" and "I'm so pleased we chose you and your team for our care package."

The service continued to work closely with health care commissioners and other service providers.

The registered manager continues to notify the CQC of all significant events, changes or incidents which had occurred at the service in line with their legal responsibilities. The provider had policies and procedures in place that considered guidance and best practice from expert and professional bodies and provided staff with clear instructions.