

Guardian Homecare UK Ltd

# Guardian Homecare (Burnley)

## 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

Guardian Homecare (Burnley) is a domiciliary care service, providing personal care and support to people in their own homes. At the time of the inspection, the service was supporting 183 people.

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

People felt safe when staff supported them, and staff managed risks to people's safety appropriately. No-one had experienced any missed visits and people told us staff stayed as long as they should. Most people told us staff arrived on time, but some told us staff were sometimes late and they were not always informed of this. The registered manager was addressing this. The provider recruited staff safely and staff knew how to protect people from abuse. Staff followed safe infection control practices and administered people's medicines as prescribed.

People felt staff had the knowledge and skills to meet their needs. Staff received an appropriate induction and training. They supported people to eat and drink enough and to access healthcare services when needed. 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 treated people well. People liked the staff who supported them and told us staff were friendly, caring and respectful. Staff involved people in decisions about their care and respected their right to privacy and dignity. They encouraged people to be independent when it was safe to do so.

Staff offered people choices and provided them with personalised support that reflected their needs and preferences. Most people were supported by staff who knew them. People valued the visits from staff, which helped some avoid feelings of social isolation and loneliness. People felt comfortable raising concerns. Complaints had been investigated and responded to appropriately, but complaints documentation needed to be clearer.

Staff understood their responsibilities and the provider's aims and provided care which resulted in good outcomes for people. People, relatives and staff felt the service was managed well. Staff and management worked in partnership with community agencies to ensure people received the support they needed. People's views were sought about the service. Management completed regular checks to ensure people received high quality, safe care.

For more details, please see the full report which is on the Care Quality Commission (CQC) website at [www.cqc.org.uk](http://www.cqc.org.uk)

### Rating at last inspection

The last rating for this service was good (published 12 October 2017). Since this rating was awarded, the

registered provider of the service has changed. We have used the previous rating to inform our planning and decisions about the rating at this inspection.

#### Why we inspected

This was a planned inspection based on the new provider's date of registration.

#### Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

## 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 

# Guardian Homecare (Burnley)

## **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 Care Act 2014.

#### Inspection team

The inspection was carried out by an inspector, an assistant inspector and three Experts 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

Guardian Homecare (Burnley) is a domiciliary care agency. It provides personal care to people living in their own houses and flats.

The service had a manager registered with the Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

#### Notice of inspection

This inspection was announced. We gave the provider 48 hours' notice, to ensure they would be available and to give them time to gain people's consent for us to contact them for feedback.

Inspection activity started on 27 February 2020 and ended on 28 February 2020. We visited the office location on both dates and the Experts by Experience contacted people supported by the service and their relatives by telephone on 27 February 2020, to gain their feedback about the service.

### What we did before the inspection

We reviewed information we had received about the service since their registration. We sought feedback from the local authority and Healthwatch. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England. We used this information to plan our inspection. The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send to us to give us key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report.

### During the inspection

We spoke on the telephone with 42 people and relatives about the support provided by the service. We spoke with the registered manager and four care staff. We reviewed a range of records, including three people's care records and medication records. We looked at two staff recruitment files and staff supervision and appraisal records. We also reviewed a variety of records related to the management of the service, including policies and audits.

### After the inspection

We contacted two community professionals for their feedback about the service.

# Is the service safe?

## Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

### Using medicines safely

- People's medicines were managed safely. Staff had completed the necessary training and been assessed as competent to administer people's medicines safely. People and relatives were happy with how medicines were managed. One person commented, "They give me my medication. I get it on time, and they do it properly."

### Staffing and recruitment

- The provider recruited staff safely, to ensure they were suitable to provide support to people.
- There were sufficient staff available to meet people's needs. No-one we spoke with had experienced any missed visits and people told us staff stayed for the full duration of the visit.
- Most people told us staff visited them on time, however, some people told us staff were sometimes late and they weren't always notified of this. The registered manager acknowledged this and provided evidence staff were reminded during staff meetings and in memos to contact the office when they were running late, so that people could be notified. She told us lateness had increased recently due to local road works and staff sickness and annual leave. She was in the process of recruiting additional staff to address this.

### Systems and processes to safeguard people from the risk of abuse

- The provider had systems to protect people from the risk of abuse and avoidable harm. Staff had completed safeguarding training and understood the action to take if they witnessed or suspected abuse.
- People and relatives told us staff provided safe care. They commented, "I feel safe with the carers, they make sure I don't bump into things. When they use the hoist to move me, I have no worries as they know what they are doing and how to handle me well" and "My [relative] is safe when the carers are looking after him, he is looked after very well."

### Assessing risk, safety monitoring and management

- The provider had processes to support people to manage risks to their health and wellbeing. Risk assessments guided staff on how to support people and were updated regularly. Staff kept relatives informed of any changes.
- The provider had systems to manage accidents and incidents appropriately. Staff completed accident and incident records and these were overseen by the registered manager and provider to ensure appropriate action was taken.

### Preventing and controlling infection

- People were protected against the risk of infection. Staff had completed infection control training and used personal protective equipment when they supported people. One person commented, "They [staff]

wear aprons and gloves when needed."

#### Learning lessons when things go wrong

- The provider had systems to share information about lessons learnt when something went wrong. When there was learning from complaints, concerns or incidents, the registered manager shared this with staff to improve future care.

# 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.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. 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 service delivered care which met people's needs. Senior staff completed an initial assessment, which included information about people's needs and risks. The assessment was used to create people's care plans, which guided staff about how to support them effectively.
- The provider had policies and procedures for staff to follow which reflected CQC regulations and relevant guidance.

Staff support: induction, training, skills and experience

- The provider ensured staff received the induction and training they needed to meet people's needs. Staff were happy with the induction and training provided at the service. They completed initial training and observed experienced staff before providing care.
- People and relatives felt staff had the knowledge and skills to provide good support. Their comments included, "They [staff] are skilled. When [main carer] is off, all the other carers do it correctly" and "The staff are well trained. They seem to have the experience they need to do the job, and they know what is in the care plan and what they have to do."

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

- Staff supported people to eat and drink enough. Documentation included information about people's dietary needs, risks and preferences and staff were aware of these.
- People and relatives were happy with the support staff provided with meals and drinks. One person told us, "The carers make my meals. Sometimes they will heat things up, make sandwiches or make me a salad. They do whatever I want them to do, as they always give me the choice."

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

- Staff supported people to access health and social care services, which included emergency services, GPs and pharmacists when necessary.
- Documentation included information about people's healthcare needs, medical history, medicines and any allergies.

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 Act 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. Where people may need to be deprived of their liberty in order to receive care and treatment in their own homes, the DoLS cannot be used. Instead, an application can be made to the Court of Protection who can authorise the deprivation of liberty.

We checked whether the service was working within the principles of the MCA.

- The service was working within the principles of the MCA. Documentation included information about people's capacity to make decisions about their care. Where they lacked capacity, the provider had processes to make best interests decisions in consultation with their relatives. The provider had not submitted any applications to the Court of Protection to deprive anyone of their liberty.
- People, or where appropriate their relatives, had signed consent forms agreeing to their care. Staff gained people's consent before supporting them. One person commented, "The carers always ask if it's alright for them to do whatever they're doing."

# 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.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. 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 told us staff were kind, caring and treated them well. They liked the staff who visited them. Their comments included, "The carers are polite and friendly, they couldn't be better" and "The two carers I have are brilliant. They're used to me and I'm used to them, and we get on well."
- Staff respected people's diverse needs. One relative told us how staff respected their family member's cultural and spiritual needs, and this made them feel at ease.
- We noted information about people's personal characteristics, such as their ethnic origin, religion and gender, was documented in some care plans but not others. The registered manager told us she would address this to ensure staff were aware of people diversity and what was important to them.

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

- People were involved in decisions about their care. Senior staff discussed people's care needs with them during the initial assessment. During visits, staff encouraged people to make every day decisions about their care when they could. Where people were unable to, staff consulted their relatives.
- Information about local advocacy services, which can support people to express their views, was included in the service user guide given to people when the service started supporting them. At the time of our inspection, no-one was being supported by an advocate.

Respecting and promoting people's privacy, dignity and independence

- People's right to privacy and dignity was respected. People told us, "I like the carers, they are good company and very polite. They respect me and that shows in the way they talk to me and how they support me" and "[Relative] likes his carers. They are polite to him and show him respect. They would never do anything against his wishes."
- Staff encouraged people to maintain their independence. Documentation included information about what people were able to do and what they needed support with. One relative told us, "My [father] is never rushed and is encouraged to do things independently."
- Staff respected people's right to confidentiality. People's care records were stored electronically and were password protected, so they were only accessible to authorised staff. Staff members' personal information was stored securely. The provider had a confidentiality policy for staff to refer to.

# Is the service responsive?

## Our findings

Responsive – this means we looked for evidence that the service met people's needs.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. 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

- Staff provided individualised care which reflected people's needs and preferences. People and relatives were happy with the support provided. They told us, "The regular staff know me very well and how I like things done", "The staff do anything I need doing, I just have to ask" and "They [staff] go beyond what they are asked to do." Staff gave people choices and encouraged them to make every day decisions about their support. One relative told us, "The carers let my [relative] make his own choices when they visit. We have no complaints about the service he gets at all."
- Most people were supported by regular carers or were supported by a number of different carers and were happy with this. However, some people told us they would like more regular carers. The registered manager told us the service aimed to provide people with regular carers whenever possible, but this could not always be maintained due to staff vacancies, sickness or annual leave. She was recruiting additional staff to address this.
- People's care plans were detailed and individualised. They included information about people's needs, risks and preferences, what they were able to do for themselves and how staff should support them to achieve good outcomes. They were updated regularly or when people's needs changed.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- The service was following the Accessible Information Standard. Documentation included information about how people communicated, any support they needed with communication and how staff should provide it. Information, such as the service user guide, could be provided in different formats such as large print or braille, to suit people's needs.

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

- Many people valued the visits from staff, which helped them avoid social isolation. They told us, "I couldn't do without them, they are like family" and "The regular carers know me and know when I'm down, they try to cheer me up." One relative commented, "[Staff member] is so good. She talks to [relative], she's a member of the family."
- Information about people's hobbies and interests was included in their care plan. Staff supported some people to go out regularly, for example on shopping trips.

#### Improving care quality in response to complaints or concerns

- The provider had processes to respond to people's complaints or concerns. A complaints policy was available and information about how to make a complaint was included in the service user guide. People told us they felt able to raise any concerns with staff or management.
- Complaints had been investigated appropriately and action taken when improvements were needed. However, documentation was not always clear or completed in line with the provider's complaints policy. The registered manager assured us she would address this.

#### End of life care and support

- The provider had processes to provide people with effective end of life care. Staff received end of life care training as part of their induction. The registered manager told us staff worked closely with GPs, district nurses and relatives to ensure people's end of life care needs were met and their wishes respected. No-one was receiving end of life care at the time of our inspection.

# 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.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. 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

- The provider and staff ensured people were provided with individualised care which resulted in good outcomes for them. Almost everyone we spoke with would recommend the service to others.
- Most people were happy with how the service was being managed. Their comments included, "The staff and the manager are all very approachable. When I have phoned up, they have dealt with me straight away" and "I think the management is good, I'm getting well looked after." A small number of people raised concerns about the management of the service in relation to staff lateness and not having regular carers. The registered manager was addressing these issues.
- Staff were clear about the service's aim to provide people with high-quality care and how to deliver it. One staff member commented, "I understand that my role is to give safe, effective care and promote people's independence and dignity and respect and keep things confidential."

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 provider had a duty of candour policy and was aware of their responsibilities. No incidents had occurred that we were aware of, which required duty of candour action.

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

- The provider understood their role and regulatory responsibilities. The registered manager ran the service on a day to day basis, with support from a deputy manager, team leaders and care co-ordinators. The registered manager was based at the service, had regular contact with people and relatives and was familiar with people's needs, risks and preferences. She and senior staff checked care documentation regularly, to ensure it had been completed appropriately by staff.
- Management completed regular observations of staff, to ensure they supported people safely and in line with good practice.
- Staff understood their roles and responsibilities, which were made clear during their induction, training, supervision, observations, staff meetings and daily handovers.

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

- The service regularly sought people's views about the care they received through telephone calls, visits

and satisfaction surveys. Satisfaction surveys from September 2019 showed people and relatives had expressed a high level of satisfaction with most aspects of the service. Some people had expressed concerns about not being notified when staff were running late, and the registered manager had, and continued to, address this with staff.

- Staff meetings took place regularly and staff felt involved in the service. They found the registered manager and office staff approachable and were able to raise any concerns. Staff felt valued, fairly treated and well supported. One staff member told us, "I think the management is quite good actually. You can approach them, and they try to help."

#### Continuous learning and improving care

- The registered manager had plans to improve the care people received, by recruiting more staff to ensure people received their support from regular, familiar carers whenever possible.
- Further audits were due to be completed by the provider, to identify any shortfalls and make improvements where needed.

#### Working in partnership with others

- The service worked in partnership with people's relatives and a variety of health and social care professionals. These included social workers, GPs, community nurses, pharmacists and hospital staff. We did not receive any concerns from the community professionals we contacted for feedback.