

One To One Home Care Limited

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Inspection report

The Ferns
Whiteball
Wellington
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TA21 0LS

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Ratings

| | |
|---------------------------------|--------|
| Overall rating for this service | Good ● |
| Is the service safe? | Good ● |
| Is the service well-led? | Good ● |

Summary of findings

Overall summary

About the service

One to One Homecare Limited provides personal care and support to people living in their own homes. Some people who received a service lived in supported living houses which they shared with other people. The service provides support to people who have a learning disability and/or mental health needs. At the time of our inspection there were seven people receiving the regulated activity of personal care.

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

We expect health and social care providers to guarantee autistic people and people with a learning disability the choices, dignity, independence and good access to local communities that most people take for granted. Right support, right care, right culture is the statutory guidance which supports CQC to make assessments and judgements about services providing support to people with a learning disability and/or autistic people.

Based on our review of key questions safe and well led The service was able to demonstrate how they were meeting the underpinning principles of Right support, right care, right culture.

Right Support

People were supported to have maximum choice, control and independence. People and/or their representatives were involved in decisions about their care and support.

Staff supported people in their own homes to continue to be in control of their day to day lives. Care provided was flexible to fit in with people's wishes.

People were supported by small staff teams who knew them well. People had trust in the staff who supported them.

Right Care

People received kind and compassionate care. Staff knew people well which enabled them to provide person-centred care in accordance with people's wishes and preferences.

People received care which met their individual needs. Staff worked with other professionals to make sure

people received the right care and treatment.

People were supported to follow their own interests and hobbies.

Right Culture

People were supported by a management team who worked hard to promote a culture where people were valued and respected as individuals. This culture enabled people to live the lives they chose. Staff spoken with treated everyone as an individual.

People were cared for by staff who felt valued by the organisation and supported by the management team.

Communication between staff was good which meant people received care and support in accordance with their up to date wishes and needs.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection

The last rating for this service was good (report published 19 February 2019)

Why we inspected

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

The overall rating for the service has not changed from good based on the findings of this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for One to One Homecare Limited on our website at www.cqc.org.uk.

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?

Good ●

The service was safe.

Details are in our safe findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-Led findings below

One to One Homecare 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 carried out by one inspector.

Service and service type

This service is a domiciliary care agency. It provides personal care to people living in their own homes.

This service also provides care and support to people living in two 'supported living' settings, so that they can live as independently as possible. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for supported living; this inspection looked at people's personal care and support.

Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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.

At the time of our inspection there was a registered manager in post. The registered manager 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 13 June 2022 and ended on 14 June 2022. We visited the location's office on 13 June 2022.

What we did before the inspection

We used information gathered as part of monitoring activity that took place on 20 April 2022 to help plan the inspection and inform our judgements. This included written feedback from four people who used 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 met with one person who lived in a supported living setting who was unable to use words to communicate. We also spoke on the phone with two people who used the service. We spoke with three staff about their experience of working for the agency.

The registered manager/ provider and the business development manager were available throughout the inspection.

Is the service safe?

Our findings

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

At our last inspection we rated this key question Good. The rating for this key question has remained Good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- Risks to people were minimised because staff knew how to recognise and report abuse. Staff spoken with were confident that any issues raised would be taken seriously and fully investigated.
- The person we met was unable to speak with us. However, they looked very comfortable and relaxed with the staff who were supporting them.
- People told us they felt very safe with the staff who supported them. One person said, "My support worker is wonderful. I can talk to her."
- The registered manager told us they worked with the local authority and other professionals to make sure people received the support they needed to keep them safe.

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

- People lived safely and free from unwarranted restrictions because the staff assessed, monitored and managed safety well. For example, we saw that one person liked to go out into their local area. The risk assessment said they should always be accompanied by a member of staff to minimise risks to them and other people. Staff were familiar with the risk assessment.
- Some people needed equipment to support them with their mobility. We saw that equipment used was regularly checked and serviced to minimise risks.
- Advice from other professionals was incorporated into support plans to make sure people received safe care and support. For example, one person had been assessed by a speech and language therapist. They had made recommendations about the consistency of the food needed to minimise the risk of the person choking and this had been put into practice.
- All incidents and accidents were recorded and seen by a member of the management team. This enabled the service to learn from mistakes and make improvements where necessary.

Staffing and recruitment

- People were cared for by staff who had been safely recruited. Staff files showed the provider carried out checks and took up references before new staff started work. This helped to make sure people were cared for by staff who had the right skills and character to safely support them.
- People were cared for by small teams of staff who knew them well. This helped to make sure people received consistent care from staff who were familiar with their needs. One person told us, "My support worker is always there for me."

- The provider had experienced difficulty in recruiting new staff and had been pro-active in making changes to ensure people received their care and support. Changes had included reducing the number of people they provided care to.

Using medicines safely

- Where people required help with medicines, they received support from staff who had received specific training to carry out the task.
- Clear medicine administration records were kept. These records showed when medicines had been administered or refused which enabled their effectiveness to be monitored.
- All medicines received from the pharmacy were recorded on to medication administration records and added to stocks held. However, we found that stocks available to people did not always reflect the numbers recorded. We discussed this with the registered manager who gave assurances that stock checks would be added to the monthly medicines audit.
- Some staff had received training in the use of epilepsy rescue medication. This meant people who required this support in an emergency situation, could be safely assisted.

Preventing and controlling infection

- Risks of infection were minimised because there was a clear infection prevention and control policy for staff to follow.
- Staff had been kept up to date with government guidelines regarding COVID-19 and were taking part in regular testing to minimise the risks of infection to people.
- Staff had access to good supplies of personal protective equipment and were using it appropriately when supporting people.
- Staff had helped to make people feel safe during the pandemic. One person told us, "I was very scared when they came to me all dressed up. But they were brilliant and helped me with my anxiety."

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 our last inspection we rated this key question good. The rating for this key question has remained 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

- People were very happy with the care and support they received and felt it had improved their quality of life. One person told us, "On the whole since One to One gave us a regular support worker life has become easier for us all."
- Management and staff put people's needs and wishes at the heart of everything they did. Staff told us that all care and support was personalised to each individual and their wishes and needs. One person spent part of their week at the supported living house and part living with family.
- The service was flexible to accommodate people's changing needs and wishes. One person wrote, "I am very pleased with the support I receive from One to One, the staff are always there to help me with anything needed, the office is good at giving me my rota and they are accommodating in giving me times for appointments. I have been with the company for seven years and had no problems."
- People who lived together in the supported living house followed their own routines and interests. This included spending time with family and attending outside occupation during the day.
- Staff knew people well which enabled them to provide person centred care. Throughout the inspection staff and managers talked about people as individuals. Staff observed, showed kindness and compassion to the person they were caring for.
- People were supported by staff who were very happy working for the service and said they felt communication at all levels was good.

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 was open and approachable. Staff told us there was always a member of the management team available to ask advice from or discuss concerns with.
- The provider took action to make sure they were accessible to staff and people. In response to some unrest amongst staff they had introduced a weekly 'Open office.' This was time set aside to enable anyone to meet with them if they had any worries or concerns.

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

- People benefitted from a provider who had a management structure which provided clear lines of responsibility. In addition to the registered manager there was a business development manager and an operations manager.
- People knew who the managers were and said they always felt able to go to them with worries or concerns. One person told us, "If I had any issues I would go to [provider's name.] Could always talk to him."
- The quality of the service provided was monitored by audits and regular spot checks on staff. This enabled any shortfalls to be identified and action taken to make improvements.
- A small team of team leaders had oversight of people's care packages. They worked alongside other staff to lead by example and monitor standards of care provided.
- People were supported by a management team who met regularly to share information and make decisions about any changes needed. We were told that team leaders used to meet regularly but this had stopped during the pandemic and had not been reinstated. One team leader said they thought the reintroduction of these meetings would be beneficial and we passed this to the provider.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- People and/or their representatives were involved in the planning and reviewing of their care and support. Care plans gave details of who had been consulted. One person told us they knew what was in their care plan and staff followed it.
- People were asked their opinions in quality monitoring surveys. We saw returned surveys which showed a high level of satisfaction with the care and support people received.
- All staff received one to one supervision which was a time for them to share any concerns or highlight any training needs. It also enabled the provider to address any issues in a confidential way.
- People were cared for by staff who worked in partnership with families and other professionals to make sure people's needs were met. This had included meetings to make decisions in people's best interests when they lacked capacity to make decisions for themselves.