

Willow Home Care & Support Services Limited

Willow Homecare & Support Services Limited

Inspection report

4 Dudley Street
Grimsby
Lincolnshire
DN31 2AB

Tel: 01472344222

Date of inspection visit:
22 June 2022

Date of publication:
18 July 2022

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

Willow Homecare & Support services is a domiciliary care agency providing care and support to people who live in their own homes in Grimsby and surrounding areas. The service provides support to older people, people living with dementia, learning disabilities or autism spectrum disorder, and mental health needs. It also supports people who misuse drugs or alcohol, have an eating disorder, a physical disability or sensory impairment. At the time of our inspection there were 218 people who were receiving a service from this provider.

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

The provider has a robust ongoing recruitment campaign to recruit more staff. The service considered travel time for staff to ensure people received the amount of care agreed in their care plan.

The service has effective safeguarding procedures in place and manages safeguarding's promptly. Staff knew the safeguarding policy and had a good understanding of their responsibility to protect people from harm. Lessons are learned and communicated to support service improvement

People are involved in managing risks and risk assessments were person centred. Staff were aware of people's risks and how to manage them. Staff told us "I would always read the risk assessment first if I was going to see someone new," and "They provide the right information and we have time to read them."

Staff managed medicines consistently and safely. Staff are trained and follow clear policies and procedures on infection control that meet relevant national guidance.

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 provider had clear and effective governance systems in place that identify and manage risks through audits and action plans. This information is used to drive improvements in the service. All relevant legal requirements were understood and met, including notifying the CQC of significant incidents that had occurred.

The service involves people, their relatives and friends in a meaningful way. All staff understand the need to provide a good quality service. One person told us, "I enjoy making sure people are cared for and they can stay in their home for as long as possible."

Quality assurance arrangements were applied consistently and identified current and potential concerns and areas for improvements. Concerns were investigated and lessons were shared and acted on.

The service worked in a transparent and collaborative way with relevant stakeholders and agencies to support service development and joined up care.

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

Rating at last inspection and update

The last rating for this service was requires improvement (published 15 July 2021) and there were breaches of regulation. The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

Why we inspected

We carried out an announced inspection of this service on 13 April 2021. Breaches of legal requirements were found. The provider completed an action plan after the last inspection to show what they would do and by when to improve well led.

We undertook this focused inspection to check they had followed their action plan and to confirm they now met legal requirements. This report only covers our findings in relation to the Key Questions Safe and Well-led which contain those requirements.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating. The overall rating for the service has changed from requires improvement to good. This is based on the findings at this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Willow Homecare & Support services 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

Willow Homecare & Support Services 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

This inspection was carried out by one inspector and an Expert by Experience made calls to people and their families. 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 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.

Notice of inspection

We gave the service 24 hours' notice of the inspection. This was because we needed to be sure the provider or registered manager would be in the office to support the inspection.

Inspection activity started on 21 June 2022 and ended on the 24 June 2022. We visited the office location on the 22 June 2022.

What we did before the inspection

We reviewed the information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with 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 of this information to plan our inspection.

During the inspection

We spoke with three people who use the service and six relatives about their experience of the care provided. We spoke with 12 members of staff including, both registered managers, nine care workers 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. This included five care records and medication records. We looked at other records relating to the management of the service including recruitment, staff training and supervision, and systems for monitoring quality.

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 requires improvement. At this inspection the rating has changed to good. This meant people were safe and protected from avoidable harm.

Staffing and recruitment

At our last inspection we recommended the provider consider reviewing their staffing systems to ensure rotas are planned with travel time between care visits. Also, to ensure people are introduced to the staff who will be providing their care. The provider had made improvements.

- The provider had an effective system in place that calculated travel time and the amount of travel to be paid, they also had a robust recruitment plan in place to recruit more staff. People told us they have regular carers, comments included "We have never had any problems with our carers, they know us well," and "I know all my carers and they are absolutely brilliant."
- People told us they receive the care that has been agreed in their care plan, comments included "They arrive on time and stay for the allocated time," and "There are always enough carers to help me."
- The provider had appropriate recruitment procedures in place for the recruitment of staff. These procedures included criminal record checks, identity checks and references from previous employers. This meant only suitable people were recruited by the provider.

Systems and processes to safeguard people from the risk of abuse; Learning lessons when things go wrong

At our last inspection we recommended the provider consider reviewing their safeguarding processes to ensure appropriate actions are taken in response to all safeguarding concerns. The provider had made improvements.

- The provider now had systems in place that helped reduce the risk of abuse to people.
- People we spoke with told us they felt safe in the care of staff. One person told us "100% I feel safe." A relative told us "[Persons name] has never felt unsafe, staff are absolutely marvellous."
- Staff received safeguarding training and were clear about their responsibilities in responding to and reporting any safeguarding concerns.
- The provider now had processes in place for recording and investigating accidents and incidents. Accidents and incidents were analysed to ensure lessons learned to improve the service.
- Staff knew how to report incidents and complete appropriate records. Accidents and incidents were recorded in care records and staff attended the office to complete the relevant forms.

Assessing risk, safety monitoring and management

- Risks were managed safely. Risks associated with people's care had been identified and plans were in place to minimise risks occurring. Staff told us they had access to risk assessments, and they provided the

right information to manage people safely.

- Risk assessments were person centred and reviewed regularly. People told us they were involved in managing their risks, comments included "They came to see me and reviewed my care" and "I was involved in the writing of the care plan and risk assessment."
- Environmental risks were also considered for each property staff visited. This ensure the safety of all staff and people.

Using medicines safely

- Medicines were managed safely. The provider had a system in place to ensure people received their medicines as prescribed.
- People had a medication care plan which stated what assistance people required with medicine management.
- Staff told us, and records confirmed, they had received training in administering medicines and their competencies were checked.

Preventing and controlling infection

- Preventing the spread of infection was managed well. Staff had undertaken training and were aware of the responsibilities to protect people from the spread of infection. There was an up to date infection control policy in place.
- Staff told us they were provided with personal protective equipment (PPE) and hand sanitisers were also available. People told us "Staff wash their hands and wear gloves and aprons" and, "They wear masks and wash their hands."

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 requires improvement. At this inspection the rating has changed to 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

At our last inspection the provider had failed to operate effective systems to monitor the quality and safety of the service. This was a breach of Regulation 17 (Good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement has been made at this inspection and the provider was no longer in breach of regulation 17.

- An effective quality monitoring system was now in place which monitored the quality and safety of the service through a robust audit system. One staff member told us "We have systems in place for audits and if they are not working we will speak to the manager to look at doing them a different way."
- Reports were completed and any actions identified were addressed for continuous learning and improving care.
- The registered manager and staff had a clear understanding of their roles and how this contributed to the good level of care people received. Staff told us they felt confident speaking to their managers.

At our last inspection the provider failed to notify the CQC of significant events in line with the regulatory requirement. This was a breach of Regulation 18(2) of the Care Quality Commission (Registration) Regulations 2009.

Enough improvement has been made at this inspection and the provider was no longer in breach of regulation 18 (2).

- The registered manager understood their role in terms of regulatory requirements and ensured CQC were notified of significant incidents that had occurred.

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

- The provider sought feedback from people and relatives through telephone calls and surveys. People told us they had been sent questionnaires to complete.
- The management team were committed to providing a good quality of care and involved people in their

care and support to ensure their preferences and choices were considered. One person told us "They keep me informed, they do a brilliant job and we are very grateful."

- The provider employed two people to review competencies and complete spot checks on staff to ensure staff supported people in the right way.
- The registered manager demonstrated they were committed to continuous improvement of the service through their audits and action plans with achievable time frames.

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 demonstrated an open and transparent approach and understood their responsibilities under the duty of candour.
- The provider had a quality assurance system in place regarding, reporting, investigating and learning from incidents when things went wrong, any actions were fed into the service and provider governance meetings.

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

- People and their relatives were asked about their experience of care delivered and the provider was able to use this information to establish improvements in quality and care.
- Staff told us they attended regular team meetings where they were able to express their views and discuss any issues. One staff member told us "They [managers] are always open to suggestions."
- The provider worked in partnership with GP's, district nurses and other health care professionals.
- Professionals were asked to contribute to care plans and met managers in people's homes to review care planning.