

# Lilies24 Healthcare Ltd

# 10 Wood Road

### **Inspection report**

10 Wood Road Kimberworth Park Rotherham S61 3RQ Date of inspection visit: 27 June 2022

Date of publication: 27 July 2022

### 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

Lilies24 Healthcare Ltd, 10 Wood Road is a domiciliary care service providing personal care and support to people living in their own homes.

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. At the time of our inspection, there were four people receiving personal care from the service.

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

People were treated well and with respect. People who used the service and their family members described staff as caring, kind, thoughtful and patient. They told of several instances when the registered manager went beyond expectations to ensure people's needs were met.

Staff understood how to protect people from harm or discrimination. There were sufficient numbers of staff deployed to meet people's needs and ensure their safety. Risks to people were assessed and their safety was monitored and well managed. Safe recruitment processes were followed to make sure the right staff were employed. Infection prevention and control practices were followed to minimise the spread of infection, including those related to COVID-19.

People's needs and choices were assessed to make sure the service was right for them. Staff knew people well and provided them with the care and support they needed in a way they preferred. 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 received the training, supervision and support they needed. Staff worked closely with other health care professionals to ensure people's needs were met holistically.

People were involved in decisions about their care and support. There was a clear focus on supporting people to maintain and develop their independence. All members of the staff team spoke of people with respect and empathy. Staff respected people's privacy, dignity and their right to confidentiality. People and family members were encouraged to express their views and opinions and make decisions about the care provided. Their feedback was very appreciative of the service.

People and their relatives had access to a complaint's procedure, if they wished to raise a concern. The registered manager carried out audits to check the quality and safety of the service. Spot checks were carried out to monitor staff performance. People were asked for their views and any suggestions were used to 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 19 April 2021 and this is the first inspection.

#### Why we inspected

This inspection was prompted by a review of the information we held about this service including when the service registered with CQC.

#### 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 effective?	Good •
The service was effective.	
Details are in our effective findings below.	
Is the service caring?	Good •
The service was caring.	
Details are in our caring findings below.	
Is the service responsive?	Good •
The service was responsive.	
Details is in our responsive findings below.	
Is the service well-led?	Good •
The service was well-led.	
Details is in our well-led findings below.	



# 10 Wood Road

### **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 undertook this inspection.

#### 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. The registered manager was also the nominated individual

#### Notice of inspection

We gave the service notice of the inspection. This was because the service is small, and we wanted to be sure the registered manager would available to speak with us.

Inspection activity started on 27 June 2022 and ended on 30 June 2022. We visited the location's office on 27 June 2022.

#### What we did before the inspection

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 reviewed information we had received about the service since it registered with us. We used all of this information to plan our inspection.

#### During the inspection

During the site visit we spoke with the registered manager and deputy manager. We reviewed a range of records. This included two people's care plans and records. We looked at three staff files in relation to recruitment and staff supervision. We reviewed records relating to the management of the service, such as records of staff meetings.

#### After the inspection

We continued to seek clarification from the service to validate evidence found. We looked at training data, quality assurance records, and policies and procedures. We spoke by telephone with three people who used the service, four relatives and two members of staff to gain their views about the service. We received feedback from a health social care professional who was involved in people's care.



### 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 for 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

- People were protected from the risk of abuse.
- People told us they felt safe with the staff, who treated them very well. People said they would let the registered manager know if they had any concerns about their safety or the way they were treated. One person said, "The staff are lovely. I don't want anybody else!"
- Staff completed safeguarding training, were aware of the different types and indicators of abuse and knew how to report any concerns.
- Relatives told us they were confident the service protected their family member's safety.

Assessing risk, safety monitoring and management

- Risks to people's personal safety were assessed, monitored and managed effectively.
- Risk assessments considered risks associated with people's care and support. This included people's home environment, mobility and health conditions. This meant staff were provided with clear information about the risks people faced and how to manage them safely, without being overly restrictive.
- People's plans were updated as their needs became evident or changed.
- Staff were confident about reporting any concerns about people's safety.

#### Staffing and recruitment

- The registered manager carried out recruitment checks to make sure only suitable staff were employed.
- Staff we spoke with said they had undergone checks before they started working for the agency. This was confirmed by the records we saw. Staff told us they felt the registered manager was careful to make sure people were in safe hands.
- People received consistent care and support from suitably skilled and experienced staff. People confirmed staff maintained good timekeeping and stayed for the agreed length of time. People and staff told us the registered manager often 'went the extra mile', staying beyond the allocated time to make sure people felt well cared for, happy and settled.
- People and staff told us visits were consistently carried out by the same staff. One person said, "I have the same two staff. They are very good. They've become like my family."

#### Using medicines safely

- People received their medicines as prescribed.
- Those people who needed support with their medicines told us they were happy with the support they received, as their medicines were correctly administered and on time.
- People's care plans and records of their medicines were clear, and any associated risks had been

#### assessed.

- Staff who administered people's medicines had received appropriate training. They were clear about what to do in the event of a medicines error.
- The registered manager told us they checked staff's ability in practice, to ensure they supported people with their medicines safely and correctly.

#### Preventing and controlling infection

- Staff had received infection control training.
- The service had an up to date infection prevention and control and COVID-19 policy.
- The provider made sure an adequate supply of personal protective equipment (PPE) was available to staff. The provider was also making sure PPE was used effectively and safely, and was accessing testing for staff.
- People and relatives confirmed staff wore PPE while supporting people.

#### Learning lessons when things go wrong.

- There was a system in place for recording, monitoring, managing and learning from any accidents and incidents.
- Learning was identified and used in a timely and effective way and information was shared effectively within the staff team.



## 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

- People's needs had been assessed, including information about their health, their background, their interests, preferences, family and friends and their home environment. This information was used to develop each person's care plan.
- The registered manager worked with the person, their relatives and relevant health professionals to ensure care was in line with all of their needs.
- Care was delivered safely, using a very personalised approach. This enabled staff to deliver consistent care and understand people's wants and needs.

Staff support: induction, training, skills and experience

- Staff had the necessary skills, knowledge and experience to perform their roles. The registered manager told us she had signed up to undertake a 'train the trainer' course to enable her to deliver training to the team. She placed an emphasis on providing good quality training for staff.
- One person told us, "The staff are very good. The manager is a trained nurse with some years' experience. She has a lot of knowledge and I have confidence in her. She has helped me in many ways."
- New staff received initial training and a formal induction. They spent time shadowing more experienced staff and got to know people well before supporting them independently.
- Staff spoke positively about the training and support they received, which was geared to their needs. They felt this helped them to carry out their roles effectively.

Supporting people to eat and drink enough to maintain a balanced diet; Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- Staff were aware of people's dietary needs and people who required specialist diets were supported appropriately.
- People's needs around eating and drinking were recorded in their care plans and people were supported to ensure they received good nutrition and hydration where this was part of their care package. There was evidence that timely intervention from the Lilies24 team had improved one person's diet considerably. This helped to maintain and improve their health and wellbeing.
- One relative told us, "The staff are always polite, very caring. They (staff) are always keeping me updated on my family member's care and any health worries. I couldn't wish for better care for my family member."
- The service monitored people's wellbeing and where people had on-going health conditions, staff sought assistance from other agencies and professionals in a timely way.

• The service worked collaboratively with healthcare professionals and specialists involved in people's care and treatment. This helped make sure people received the right healthcare.

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, whether appropriate legal authorisations were in place when needed to deprive a person of their liberty, and whether any conditions relating to those authorisations were being met.

- The service was working within the principles of the MCA.
- People told us they were asked to consent to their care, and this was reflected in their care plans and records.
- •. One person said, "Staff know my independence is important to me and respect that. They check."
- The registered manager was aware of the key principles of the MCA and understood their responsibilities if they accepted a package of care for a person who lacked capacity.
- Staff confirmed they had been provided with relevant training. They understood the requirements of the MCA and were aware of good practice guidance.



# 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

- People were treated well, and their individual rights were respected and promoted.
- People spoke very positively about the care and support they received. People told us the care they received was very sensitive and kind.
- People told us of several instances when the registered manager 'went the extra mile'. One person said they had been involved with a brass band for many years and this was very important to them. They had received an invitation to attend a concert but did not think they could attend. This was because they would not return home until well after 11pm. The registered manager's immediate response was that the person need only call her when leaving the venue. She would be there for them when they arrived home.
- People told us they were very well supported and treated with respect. A relative said, "The staff are genuinely caring, gentle, thoughtful and polite."
- Staff told us they enjoyed their role, and they felt social interaction was as important as the care task. They enjoyed getting to know people and building positive relationships.

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

- People were encouraged to express their views and make choices and decisions about their care.
- Staff ensured they had the information they needed People were supported to make choices for themselves and. People and relatives told us staff took the time to understand people's individual communication styles and made sure people were involved in decision making. One person told us, "They [staff] always talk to me, so they get to know what's important.
- People's wishes and preferences were detailed in their care plans and people and their relatives confirmed this accurately reflected the information they had shared.
- People and those important to them took part in planning and making decisions about their support. This was done through care reviews, surveys and quality assurance visits with the registered manager and continual dialogue with the registered manager and staff.

Respecting and promoting people's privacy, dignity and independence

- Staff supported people in ways that maintained their dignity and independence.
- One person told us, "The carers are very good and do everything I ask them to do for my comfort. I am very pleased with the service."
- Care plans had detailed guidance for staff about people's preferences for privacy and dignity when supporting with personal care. People's care records provided assurance that staff promoted dignity and privacy.

- People said staff showed respect and sensitivity when offering support with personal care. One person told us they had been very nervous about first receiving care from strangers. However, they had quickly became delighted with the service they received from the Lilies24 team. The person added they felt like they were receiving care from a very caring family member.
- •Staff told us the importance of listening to people and being sensitive to their wishes, encouraging them to do what they could for themselves. One person told us, "I have always been independent. It has not been easy for me to accept this kind of care. They [staff] are very good, always listen and always reassuring."
- A social care professional told us the care team approached complex issues with real sensitivity. They added, "They really look out for the service uses."



## 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; 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

- People received personalised care that took account of their needs, wishes and preferences. One person said, "Nothing is too much trouble. [Staff member] always asks if there is anything else I need before they leave. It doesn't matter what I ask,[staff member] always makes an effort to do it."
- People had support plans and risk assessments in place to guide staff. These were person centred and included what was important to the person.
- Records of daily care provided were very carefully written and detailed. They were regularly checked by the registered manager to help ensure people received their care as planned, to meet their needs.
- People were supported to maintain their interests and to keep in contact with their family and friends.

#### 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 that people should get the support they need in relation to communication.

• People's communication needs were assessed, and the service ensured steps were taken to communicate effectively with people.

People's information and communication needs were assessed and recorded in their care plans. Guidance was provided for staff about the support people needed to understand any information provided.

- Staff told us they were aware of people's individual needs and felt they had enough information to support each individual effectively.
- People told us they felt fully involved and supported by the staff. Comments included, "The staff communicate well and listen to me."

Improving care quality in response to complaints or concerns

- The service had a complaints policy in place.
- The registered manager told us the service had not received any complaints since it was registered with the CQC.
- There was an easy to read guide about how to make a complaint and what people could expect to happen if they raised a concern. This included contact details for other organisations that could be approached if someone wished to raise a concern outside of the service.

End of life care and support

- The service met the needs people using the service and had considered future needs and preferences. Plans had been completed with people and families for end of life support. Some people had plans which reflected that people wanted their families to take the lead with decision making.
- The service was not providing end of life care to people at the time of inspection. However, the registered manager was a qualified nurse and had experience in this area. Care staff had also received some relevant training, so the service would be able to provide such care and support if required.



### 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.

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

- The registered manager understood their role and responsibilities, as did the staff.
- The quality assurance systems in place helped to ensure areas for improvement were identified and action taken to continuously improve the quality of the service provided.
- Staff said they were well supported with ongoing training and one to one supervision. They understood their responsibilities to keep people safe while respecting and promoting personalised care.
- The registered manager undertook regular monitoring visits to review staff's practice. The visits covered the quality of the care were delivering to meet people's individual needs. This included staff's competence in supporting people with their medicines. Other areas included staff's personal presentation, use of PPE and time keeping. The registered manager had ensured improvements were made where necessary.

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

- The registered manager was passionate about providing a caring, person-centred and responsive service. The staff we spoke with also shared this commitment.
- People and their relatives spoke very positively about the service, the registered manager and staff. People praised the registered manager for her dedication and empathy. Everyone said they were supported in a very kind and sensitive manner.
- Staff also told us they felt supported and spoke positively about how the service was managed. Staff said the registered manager was very caring and looked after people and staff really well. One staff member told us they appreciated the supportive and flexible approach the registered manager had taken when events in their home life were a challenge.

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

- The registered manager carried out a regular service quality assurance audits, which reflected positive service provision overall.
- Service delivery feedback questionnaires had been completed by people and their relatives prior to the inspection. All responses were positive about the quality of support people received. One relative wrote, "We are extremely pleased and grateful for the care received; and the extra mile the carers go!"
- People told us they were involved in making key decisions about their care. They said any special requests or needs were taken seriously and where appropriate, integrated into their care plans.

- People said the team communicated very well with them. People felt listened to. They also said they were able to contribute suggestions as how the service could be improved. This was done through formal reviews of care, surveys and informal phone calls, as well as face to face conversations.
- Staff told us they regularly spoke with people to ensure they were happy with the service they received.
- Staff also told us they felt supported and valued when they made suggestions for improving practice. One staff member told us, "[Registered manager] really does listen. She really cares. She is supportive and approachable."

Continuous learning and improving care: 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

- There were systems and processes in place for learning from suggestions made by people and their relatives, and from incidents and events. This promoted the development of the service.
- The registered manager understood their responsibility in relation to the duty of candour. They were aware of the need to report incidents, such as alleged abuse or serious injuries, to CQC, and had systems in place to do so, should they arise.
- There was an open culture within the service. The registered manager and staff were open and honest with us throughout the inspection.

#### Working in partnership with others

- There was real evidence of the registered manager and staff working in partnership with external agencies. This included district nurses, GPs and local authority representatives to ensure the service people received was wholistic and person centred.
- One health care professional said the staff were good communicators. They were impressed by the way the service worked with other professionals, such as social workers and the occupational therapy team. This had resulted in real improvements in the quality of life of a person using the service.
- People told us of help and advice provided by the registered manager which had helped them understand and gain access to health and social care provision.