

Your Care Team Ltd

Your Care Team Ltd

Inspection report

23 Northstead
Dewsbury
West Yorkshire
WF13 3DX

Tel: 07490180250

Date of inspection visit:
21 October 2019
22 October 2019

Date of publication:
12 November 2019

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

Your Care Team is a domiciliary care agency. It provides personal care to people living in their own homes and flats in the community. At the time of the inspection the service was providing personal care to two people. Your Care Team is a new service and also provides support to people with other non regulated services.

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

People and relatives who used the service were happy with the care and support provided by Your Care Team. They told us they felt safe and staff were kind and caring.

People, relatives and staff said the registered manager was approachable and responsive. People's views were sought through frequent meetings and surveys. Systems to monitor and check the service were in place. The registered manager provided staff with leadership and they were passionate about continuing to develop the quality of the service.

People's care needs were assessed, and they received person centred care from staff who knew them well. Care plans were clear and up to date. People received appropriate support with their nutrition and health needs.

Staff were knowledgeable about people and the topics we asked them about. They received good quality training, supervision and appraisal. They were enthusiastic and demonstrated they were committed to providing person centred care.

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 encouraged people to make decisions about their own care, and promoted peoples' rights to dignity, independence and privacy.

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 20 October 2018 and this is the first inspection.

Why we inspected

This was a planned inspection.

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 ●

Your Care Team Ltd

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 one inspector.

Service and service type

This service 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 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

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

What we did before inspection

We reviewed information we had received about the service since the last inspection. The provider was not asked to complete a provider information return prior to the inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements the plan to make. We took this into account when we inspected the service and made the judgements in this report. We sought feedback from the local authority and professionals who work with the service. The local authority does not currently work with this provider. This information helps support our inspections. We used all of this information to plan our inspection.

During the inspection

We spoke with one person who used the service and two relatives about their experience of the care provided. We spoke with the registered manager, business manager and one care worker. We reviewed a

range of records. This included two people's care records. We looked at one staff file in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection

We asked the business manager to send us further information after the inspection. This was received promptly and considered as part of the inspection.

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 as good. This meant people were safe and protected from avoidable harm.

Staffing and recruitment

- People and relatives said call times were of the appropriate length and staff arrived on time. People were supported consistently by the same care worker. One relative said, "They are always bang on time."
- Safe recruitment processes were followed. The provider included people who used the service as part of the interview process. This was a new service and staff numbers are low.

Systems and processes to safeguard people from the risk of abuse

- People and relatives said they felt safe. One person said, "They [staff] are very supportive. I always feel safe."
- Staff had received safeguarding training. They had a good understanding about how to raise concerns. We saw safeguarding was discussed in staff meetings and individual supervisions.

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

- Risks to people's health and safety were assessed and a range of risk assessments completed and regularly reviewed. Some assessments would benefit from more detail. We discussed this with the registered manager and we were assured this would be addressed. Staff understood people's needs well and how to manage any risks.
- At the time of this inspection there had been no accidents or incidents involving people who used the service. Systems were in place to record and investigate these if they occurred and to share learning to help improve quality and safety.

Using medicines safely; Preventing and controlling infection

- People who used the service were protected from the risk and spread of infection.
- Staff completed training in infection control. They confirmed they had access to aprons and gloves when supporting people with personal care or preparing food
- At the time of the inspection the provider was not supporting anybody with medicines.

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 was rated as 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 were assessed before being offered a service. Relatives told us the registered manager spent time with people when formulating care plans to ensure their needs and wishes were fully reflected.
- People's care plans described the support required for each call and detailed their personal choices and preferred routines. Staff said care plans were clear and updated if people's needs changed.

Staff support: induction, training, skills and experience

- Staff said the training was valuable and gave them the skills to undertake their role. New staff completed the Care Certificate. They received a comprehensive induction which included regular meetings and the opportunity to shadow experienced staff.
- Spot checks were undertaken on a regular basis. This is where a senior member of staff calls at a person's home during a visit by a care worker, so they can observe them going about their duties and check they are working to the required standard.

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

- People's nutritional needs were assessed and met by the service.
- Where people needed support with meals we saw their preferences were recorded. Plans contained details about people's likes and dislikes and the level of support they required. People and relatives confirmed they were happy with the support they received.

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

- People and relatives said people's health needs were supported.
- People's care plans contained information about their health needs. Referrals had been made to other agencies when required and information included in care plans. This included physiotherapists, dieticians and GP's.

Ensuring consent to care and treatment in line with law and guidance

The Mental Capacity Act 2005 (MCA) provides a legal framework for making 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.

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.

- Staff had received training in the MCA. The registered manager understood their responsibilities under this Act. There were appropriate systems in place to assist staff to assess capacity and identify best interest decisions when required.
- People we spoke with said they had been involved in their care. Consent to care arrangements was recorded in people's care plans by those with legal authority.

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 as 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 and relatives told us staff were caring and treated people kindly. Comments included, "They are brilliant. I cannot fault them" and "They are absolutely lovely, every one of them."
- People received support from the same staff, so their care was consistent.
- Staff we spoke with demonstrated good caring values and a desire to provide people with high quality personalised care. They knew people well and their choices and preferences.
- Care records were written in a respectful way.

Supporting people to express their views and be involved in making decisions about their care: Respecting and promoting people's privacy, dignity and independence

- Staff had formed good relationships with people. One person said, "I get on great with [staff]. We have a laugh and they are very caring and supportive."
- Care plans promoted people's independence. Staff were encouraged to prompt people to be independent to help them maintain control.
- People were involved in providing their feedback through regular reviews. This helped to ensure people's preferences and views were known and respected.
- People told us they were supported in a respectful and dignified manner. One relative commented on how support extended to the whole family. They said, "They have been very respectful. They have really been here for our whole family."
- Through talking to people, staff and reviewing care records, we were satisfied care and support was delivered in a non-discriminatory way and the rights of people with a protected characteristic were respected. Protected characteristics are a set of nine characteristics that are protected by law to prevent discrimination. For example, discrimination based on age, disability, race, religion or belief and sexuality.

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 as 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: end of life care and support

- People and relatives said person centred care was provided.
- Care plans were reviewed regularly and there was evidence of people's involvement and updates made to reflect changes to required care and support. One person had a positive behaviour support plan which provided detailed information about how to recognise signs they may become upset. Proactive strategies were followed to help reduce their anxiety. The person's relative told us this had a very positive impact on the person's mood and well-being.
- The service was responsive to people's needs and wishes. People and relatives told us the registered manager reviewed call times when requests were made. One relative said, " We can always rely on them and if we have to change things they are flexible. They listen."
- The registered manager told us they were not currently supporting anybody at the end of their life. People and relatives were given the opportunity to discuss their future wishes.

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 identified people's needs by assessing them. The registered manager used a range of symbols to support people with communication difficulties to be involved in reviewing their care plan. This helped them to express their views and wishes. Care plans provided people with guidance about the most effective way to communicate with people.
- The provider had an introductory leaflet written in Urdu. The registered manager told us they were able to write care plans in Urdu if people requested this.

Improving care quality in response to complaints or concerns

- The provider had a system to monitor complaints, concerns and compliments. People and relatives were provided with information about how to complain.
- The provider had not received any complaints since they started operating.

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 as good. This meant the service was consistently managed and well-led.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; 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 registered manager and staff were clear about their roles.
- There were a range of detailed checks in place and actions and the business manager had oversight of audits. They provided regular support and supervision for the registered manager.
- The registered manager was passionate about providing person centred care. They said, "We believe it is all about the person. They are so important. We will build our skills with them."

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

- The registered manager understood their responsibilities to advise CQC and other agencies of important events that may occur. They were aware they needed to support people in an honest and open way in the event of any mistakes occurring.
- Staff praised the support they received from the management team and said they were confident in their leadership.

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

- People and relatives spoke very positively about the registered manager. They said they were supportive and responded quickly.
- Staff meetings were held regularly. They included staff who worked in different areas of the service. A range of topics and themed discussions were included to support ongoing learning and development.
- The registered manager regularly sought feedback about the quality of the service. One relative said, "[Registered manager] is always checking if we are happy with the service. They have been a blessing for our whole family."

Continuous learning and improving care; Working in partnership with others

- The registered manager understood their legal responsibilities and were committed to learning and improving care. They were receptive to feedback throughout the inspection and responded quickly to issues we raised. It was clear speaking to the manager and staff, there was a desire to continually develop and improve the service.
- The registered manager was proactive about working with other local providers and community groups.
- The service worked in partnership with people, relatives and health and social care professionals to

provide good outcomes for people.