

Ms Jill Toye

Time2Care

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?

Outstanding



Is the service responsive?

Good



Is the service well-led?

Good



Overall summary

We inspected Time2Care on 12 March 2015 and the visit was made at short notice to make sure the registered manager would be available.

Our last inspection took place on 12 June 2013 and, at that time, we found the regulations we looked at were being met.

Time2Care is a small domiciliary care agency. Time2Care offers a personal care service to people in their own homes. It was providing support to sixteen people who otherwise may not have been able to live independently at home. Only six people were receiving personal care.

The agency can provide a service to older people, people with physical disabilities and people with sensory loss. The service covers the following areas in Calderdale: Brighouse, Hipperholme and Lightcliffe.

The service has a registered manager who is also the owner. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered

Summary of findings

persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

People who used the service told us they felt safe with the care they were provided with. We found there were appropriate systems in place to protect people from risk of harm.

There were policies and procedures in place in relation to the Mental Capacity Act 2005 and Deprivations of Liberty Safeguards (DoLS). The registered manager had completed training and knew the procedures to follow.

We found that people were provided with care and support by staff who had the appropriate knowledge and training to effectively meet their needs. The skill mix and staffing arrangements were also sufficient. Robust recruitment processes were in place and followed, with

appropriate checks undertaken prior to staff working at the service. This included obtaining references from the person's previous employer as well as checks to show that staff were safe to work with vulnerable adults.

Staff had opportunities for on-going development and the registered manager ensured that they received induction, supervision, annual appraisals and training relevant to their role.

People and relatives we spoke with told us they liked the staff and had confidence in them. They also told us staff were kind and caring, treated them with dignity and respected their choices.

People who used the service, relatives and staff all told us the management of the service was very good. They said the registered manager was hands on, approachable, responsive and available. We found there were appropriate systems in place for the management of complaints and effective systems to monitor and improve the quality of the service provided.

Summary of findings

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.

There were procedures for staff to follow if an emergency arose and staff understood how to keep people safe.

There were enough skilled and experienced staff to support people and meet their needs. Safe recruitment procedures were in place, which ensured that only staff who were suitable to work in the service were employed.

Good



Is the service effective?

The service was effective.

Staff received training appropriate to their job role, which was continually updated. This meant they had the skills and knowledge to meet people's needs.

The registered manager and staff had completed training in respect of the Mental Capacity Act 2005 and understood their responsibilities under the Act.

Good



Is the service caring?

The service was caring.

People were happy with the care and support provided to them. They spoke positively about the way in which staff helped them. Staff were kind and friendly and had developed good relationships with people.

People's independence was promoted and their privacy and dignity was respected.

Outstanding



Is the service responsive?

The service was responsive.

People had their health, care and support needs assessed. Individual preferences were discussed with people who used the service. People's care records had been regularly updated and provided staff with the information they needed to meet individual's needs.

People were given the information about how to make a complaint.

Good



Is the service well-led?

The service was well-led.

People using the service, relatives, staff we spoke with were very positive about the registered manager. They all said the registered manager was committed to providing the best service they could offer; was approachable and provided good leadership.

There were effective systems in place to monitor and improve the quality of the service provided.

Good



Time2Care

Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

The inspection took place on 12 March 2015. The provider was given 48 hours' notice because the location provides a domiciliary care service and the registered manager is often out during the day; we needed to be sure they would be in.

The inspection was completed by one inspector.

Before the inspection we reviewed the information we held about the service. This included notifications from the provider and speaking with the local authority contracts and safeguarding teams.

We usually send the provider a Provider Information Return (PIR) before the inspection to complete. This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. We did not send a PIR to the provider before this inspection.

On the day of our visit we spoke with the registered manager and looked at records which included three care files, two care workers recruitment records and records relating to the management of the service. Following the visit we spoke with three people who were using the service, three relatives and three members of staff.

Is the service safe?

Our findings

People we spoke with and relatives told us they felt in 'safe hands' with Time2care. Care workers had received training in safeguarding adults and we saw safeguarding and whistleblowing policies were available. The care workers we spoke with told us they were aware of how to detect signs of abuse and were aware of external agencies they could contact. They told us they knew how to contact the local authority safeguarding team and the Care Quality Commission (CQC) if they had any concerns. They also told us they were aware of the whistle blowing policy and felt able to raise any concerns with the registered manager knowing that they would be taken seriously. These safety measures meant the likelihood of abuse occurring or going unnoticed were reduced.

We saw before a service was offered the registered manager completed an assessment which included looking at the person's home environment in order to identify any potential hazards to the individual or to care workers. For example, in one file we saw people's attention had been drawn to two areas of flooring which could present a potential hazard. This meant there were processes in place to make sure any hazards were reduced.

We saw procedures were in place to cover emergencies, such as water leaks or problems with gas or electricity. There were also procedures for care workers to follow should an emergency arise in relation to the deterioration in the health or well-being of someone using the service. This meant there were procedures in place to help keep people safe.

We saw there were infection prevention policies and procedures in place. Care workers we spoke with told us they had received infection prevention training and food hygiene training and there were always supplies of gloves and aprons available at the office base for them to collect. This meant care workers knew how to reduce the risks of any infections

Safe recruitment procedures were in place to ensure only staff suitable to work in the caring profession were

employed. This included ensuring a Disclosure and Barring Service (DBS) check and at least two written references were obtained before care workers started work. We spoke with two recently employed members of staff who told us the recruitment process was thorough and they had not been allowed to start work before all the relevant checks had been completed.

There were sufficient numbers of care workers available to keep people safe. We spoke to the registered manager who told us staffing levels were determined by the number of people using the service and their needs. Care workers were recruited to match the long term work and new care packages were only accepted if suitable care workers were available. The registered manager recorded details of the times people required their visits and which care workers were allocated to go to the visit. This meant care workers had been allocated enough time to complete each call and people we spoke with confirmed they received a reliable service.

People using the service told us they had telephone numbers for the service so they could ring during office hours and in the evening and weekends should they have a query. People told us phones were always answered, inside and outside of office hours.

Everyone we spoke with told us they had regular, reliable care workers, they knew the times of their visits and were kept informed of any changes. No one reported ever having had any missed visits. People told us, "They (the care workers) are reliable." "I have regular staff who come to me and I know them all."

Some people required assistance from care workers to take their medicines. The service had a clear medicine policy which stated what tasks care workers could and could not undertake in relation to administering medicines. For some people the help required was to verbally remind them to take their medicines and for other people care workers needed to give the medicines to the person to take. Each person's care plans detailed the level of assistance required from care workers. All care workers had received training in the administration of medicines.

Is the service effective?

Our findings

We spoke with a newer member of staff who told us they had attended a four day training course and then worked with experienced care workers before they were expected to work on their own. They told us the training was very good and prepared them well for their role. One relative we spoke with told us the registered manager, “Employs good staff.”

Care workers told us there were good opportunities for on-going training and for obtaining additional qualifications. All care workers had either attained or were working towards a National Vocational Qualification (NVQ) in care or a Diploma in Health and Social Care. There was a programme to make sure care workers received relevant training and refresher training was kept up to date. One care worker told us, “I am very impressed with the training”.

The registered manager told us care workers received face to face supervision and observation of their practice together with an annual appraisal. Care workers we spoke with confirmed this happened and that they felt supported in their work. This meant care workers had an opportunity to discuss their performance and identify any further training they required.

When Time2Care were approached to offer a service, the registered manager arranged to go and meet the individual and their relative/representative, if appropriate, to discuss their care and support needs. If Time 2 Care were able to offer a service a care plan was developed with the individual and/or their representative.

We saw in the care files people using the service had given their consent for assistance with medication and for care workers to involve doctors, district nurses or other health care professionals if their services were required.

The registered manager told us if care workers had a concern about someone's health they would call a district nurse themselves or contact the registered manager for advice. Care workers we spoke with confirmed this happened. Two relatives we spoke with told us when a care worker had concerns about their relative's health they had contacted them and arranged for a GP to visit. This meant care workers were vigilant and were taking appropriate action to make sure people's health care needs were being met.

Time2Care can provide people with a homemade lunchtime meal, for an additional charge. We spoke with one person who told us they had a meal twice a week and that the meals were very good. In one care plan we looked at we saw care workers got the individual fish and chips from the fish shop every Friday. This meant people's individual dietary needs and preferences were being planned for and met.

The registered manager had completed training in relation to the Mental Capacity Act 2005 and understood how to make sure people who did not have the mental capacity to make decisions for themselves had their legal rights protected. The MCA provides a legal framework for acting, and making decisions, on behalf of individuals who lacked mental capacity to make particular decisions for themselves. The registered manager was able to give us an example of when they had involved an individual, their GP and family to make a 'best interest' decision. This showed they understood the legislation and worked in a way that supported people to be involved in the decision making process.



Is the service caring?

Our findings

People received care from the same team of care workers. People and their relatives told us they were very happy with all of the staff and got on well with them. Some of the comments people made included;

“Staff are fantastic.”

“The staff are extremely helpful and attentive and we have a good rapport with them.”

“The carers are very good and they know what I want and how I like things done.”

“All of the staff are very nice and I am very satisfied. They keep me up to date with the news and what is going on.”

“Excellent care and attention all of the time.”

“They get a gold star from me.”

“We are thrilled to bits with the service all of the staff are brilliant. Staff go above and beyond what is required.”

We found the registered manager to be motivated and clearly passionate about making a difference to people's

lives. This enthusiasm was also shared with care workers we spoke with. They told us, “I enjoy the work,” and “They provide an excellent service” and “I would be happy for a member of my family to use the service.”

Rotas were organised so that people who received a service had a regular care worker. People confirmed they knew the care workers booked to visit and new care workers were always introduced to them by the registered manager before they started to work with them.

People told us they were involved in developing their care plan and identifying what support they required from the service and how this was to be carried out. The relative of one person told us they could telephone or email the registered manager at any time if any changes to the care plan needed to be made and these would be acted upon.

Care workers respected people's wishes and provided care and support in line with those wishes. People told us care workers always treated them respectfully and asked them how they wanted their care and support to be provided. People told us care workers ensured their privacy was protected when they provided personal care.

Is the service responsive?

Our findings

Before people started using the service, for a long-term care package, the registered manager visited them to assess their needs and discussed how the service could meet their wishes and expectations. Care files had assessments in place detailing people's needs. From these assessments care plans were developed, with the person and/or their relative, to agree how they would like their care and support to be provided. Care plans contained details of people's routines which gave clear guidance for care workers to follow in order to meet people's needs. Care workers told us and we saw that care plans were kept up to date and contained all the information they needed to provide the right care and support for people.

The registered manager told us they involved people and/or their relatives in developing their care plans so care and support could be provided in line with their wishes. Care workers were knowledgeable about the people they supported. They were aware of their preferences and interests, as well as their health and support needs, which enabled them to provide a personalised service.

The service was flexible and responded to people's changing needs. People told us about how well the service

responded if they needed additional help. For example, providing extra visits if people's relatives were on holiday and they needed additional visits during the period they were away.

The registered manager told us they worked on the rota and delivered care and support themselves. This gave them the opportunity to speak directly with people who used the service and to assess if the care plan was up to date or if it needed updating. Formal care plan reviews were also held with the person using the service and their relatives if appropriate. We saw the following comment on a survey that had been sent back in February 2015, "Very flexible and accommodating around our needs, they look after the whole family not just the client. Regular reviews mean the service is responsive and reacts to change. Useful and constructive suggestions and forward planning."

People were given details about how to complain in the service user guide. People we spoke with all confirmed they had this information in their homes. People also told us they would feel comfortable raising any issues with the registered manager and were confident any issues would be resolved. The registered manager had not received any complaints or concerns. There was a system in place to make sure any concerns or complaints would be recorded together with the action taken to resolve them and the outcome.

Is the service well-led?

Our findings

Without exception people using the service, relatives and care workers all spoke very highly of the registered manager. They all also told us they would recommend Time2Care to anyone who wanted care and support in their own home.

The service had effective systems to manage staff rotas, match staff skills with people's needs and identify what capacity they had to take on new care packages. This meant that the registered manager only took on new work if they knew there were the right care workers available to meet people's needs. Care workers were positive about how the service was run. Care workers told us, "The manager is fantastic." "[Name of the registered manager] is the best manager I have ever had." "We have time to do our job properly and everyone gets good care."

There was a positive culture in the service, the registered manager provided strong leadership and led by example. The registered manager had clear visions, values and enthusiasm about how they wished the service to be provided and these values were shared with the whole staff team. Care workers had clearly adopted the same ethos and enthusiasm and this was evidenced by what people told us about the way staff cared for them. Care workers demonstrated they understood the principles of providing care that was tailored to the individual person by talking to us about how they met people's care and support needs. One care worker told us, "It's a privilege to work for the service." We saw a letter that had been sent to the service in 2015 that stated; "Thank you so much for all your care and kindness, you have a right to call yourself Time2Care."

Care workers received regular support and advice from the registered manager via phone calls, face to face individual and group meetings. Care workers told us the registered manager was very supportive and readily available if they had any concerns. Care workers told us, "You can go into the office at any time to talk." Care workers confirmed they were completely comfortable about expressing their views on any aspects of the service.

The registered manager sent out questionnaires to people who used the service to complete annually. We saw eight completed questionnaires that had been returned in February 2015, six of these were from the people receiving personal care. We noted the following comments; "Would happily recommend to anyone." "Excellent care and attention all of the time."

The registered manager also monitored the quality of the service by regularly speaking with people to ensure they were happy with the service they received. People and their families told us the registered manager was very approachable and visited them regularly to ask about their views of the service and to review the care and support provided. The registered manager worked alongside care workers to monitor their practice as well as undertaking unannounced spot checks of care workers working to review the quality of the service provided.

The registered manager also audited the daily records when they were returned to the office to check care workers were staying for the allocated times. The quality of the written entries, the terminology and if they reflected the care plan. This meant checks were in place to make sure care and support was being delivered in line with the care plan.