

Inspire You Care Ltd

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Inspection report

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14 November 2023
16 November 2023

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service effective?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Inspire You Care Ltd, is a domiciliary care agency providing personal care to people in their own homes. The service supports older people, younger adults and people with physical disabilities. At the time of our inspection there were 21 people receiving support.

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 people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted.

'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

At the time of the inspection, the location did not care or support for anyone with a learning disability or an autistic person. However, we assessed the care provision under Right Support, Right Care, Right Culture, as it is registered as a specialist service for this population group.

Right Support:

Staff understood how to keep people safe and there were guidelines in place to inform staff how to care for people safely. People, relatives, and staff were asked their opinion about the service and were listened to. There were enough staff and people did not experience late or missed calls.

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.

Right Care:

Care was person-centred and promoted people's dignity and privacy. People were supported to stay safe. Safeguarding concerns were identified and reported as required. Medicines were managed safely and people were supported by staff who had been safely recruited.

Right Culture:

There was a positive culture. Staff felt well supported, enjoyed working for the service and told us they could raise concerns and make suggestions. Some improvements were needed to monitoring systems and plans

were in place to make these improvements.

Rating at last inspection

The last rating for the service at the previous premises was requires improvement (published 20 November 2019) and there was a breach 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. The rating has improved to good.

Why we inspected

This inspection was prompted by a review of the information we held about this service. We undertook a focused inspection to review the key questions of safe, effective and well-led only.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

You can read the report from our last comprehensive inspection by selecting the 'all reports' link for Inspire you care Ltd.

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.

Detail are in our safe findings below.

Is the service effective?

Good ●

The service was effective.

Detail are in our effective findings below.

Is the service well-led?

Good ●

The service was well-led.

Detail are in our well-led findings below.

Inspire You Care 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 1 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.

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 provider.

Notice of inspection

We gave the service short notice of the inspection. This was because it is a small service and we needed to be sure that the provider would be in the office to support the inspection. We visited the office location on 14 November 2023 and carried out telephone calls to people and staff on 16 November 2023.

What we did before the inspection

We reviewed information we had received about the service since it registered with CQC and we sought feedback from the local authority.

The provider was not asked to complete a provider information return prior to this 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 they plan to make. We took this into account when we inspected the service and made the judgements in this report.

During the inspection

We spoke with 2 people and 5 relatives about their experience of the care provided. We spoke with 4 care workers, the provider and registered manager.

We reviewed a range of records. This included 4 people's care records and medication records for 2 people. We looked at 4 staff recruitment files and a variety of records relating to the management of the service, including policies and procedures.

Is the service safe?

Our findings

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

At the last inspection we rated this key question as requires improvement. At this inspection the rating has improved to good. This meant people were safe and protected from avoidable harm.

Staffing and recruitment

At our last inspection we found robust recruitment procedures had not been followed consistently. This was a breach of regulation 19 of the Health and Social care Act 2008 (Regulated Activities) regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 19.

- Improved systems were in place to ensure staff were safely recruited.
- Staff received the relevant pre-employment checks, including references and Disclosure and Barring Service (DBS) checks before they could start working for the provider to ensure they were safe to do so. Disclosure and Barring Service (DBS) checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.
- People and their relatives told us they received their calls on time and they were supported by consistent staff. A relative told us, " The staff are really marvellous. I really cannot fault them. Very occasionally they might be a little delayed because of the weather or a delay at the call before. We have never had a missed call. We are really pleased with how everything is going."
- There were systems in place to ensure there were enough staff available to support people safely.

Assessing risk, safety monitoring and management

- People were supported to stay safe and manage identified risks.
- People told us they felt safe. One person told us, " The staff are very good and understand my needs, and I am able to direct my own care and they do what I ask them to do, and they do it well."
- Risks to people were assessed and risk management plans included actions needed to keep people safe. This included the management of risk of falls, and preventing sore skin developing.
- Staff were aware of risks when providing support to people and understood people's care and support needs.

Using medicines safely

- Improvements had been made to the recording on medicine administration records. These now contained information in relation to medicine dosage.
- Some people managed their own medicines and some were supported by relatives. A few people were supported by staff. A staff member told us, " I have done the training and I feel confident supporting people with their medicines."

- Staff received medicine training and their competency to give medicines safely was assessed.

Systems and processes to safeguard people from the risk of abuse

- Safeguarding procedures were in place and followed when needed.
- Staff told us they had received safeguarding training, and were able to tell us how they would recognise abuse. A staff member told us, " I would report any concerns to the management team, and I am confident they would take the right action to keep people safe."
- People told us they felt safe with the staff supporting them. One person told us, " They are really very good staff, and yes I do feel safe."

Preventing and controlling infection

- People were supported in line with infection control policies.
- Staff told us they had received training and had access to gloves and aprons which they used when they were providing support to people in their own homes.
- People and their families confirmed staff followed good infection control practice when providing people with personal care.

Learning lessons when things go wrong

- There were systems in place to ensure lessons were learnt. This included when incidents occurred.
- The provider was able to demonstrate how they had used the findings from the last inspection to make improvements to the service.

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.

At the last inspection this key question was rated as requires improvement. At this inspection this key question has improved to good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Staff support: induction, training, skills and experience

- At our last inspection we found there was no evidence of staff induction and limited spot checks had taken place.
- Improvements had been made, and systems were in place to ensure staff received an induction, shadowing and ongoing monitoring and training.
- Staff told us they were well supported. A staff member told us, "The manager and owner are very supportive, it's the best place I have worked. You can go to them with anything and they will help you."
- Training reflected the current needs of the people supported. The provider told us additional training would be provided as the service grows and develops, and would reflect the needs of the people supported.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- Improved systems were in place for assessing people's needs.
- People's gender, culture and religion were considered as part of the assessment process.
- Care plans described how people wanted to be supported, which helped staff to provide effective care. People we spoke with told us they were happy with their care.
- Records showed people and those important to them were involved throughout the process and a system for reviews of people's care took place.

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

- Records reflected when people had been supported and the choices they were offered.
- Food and drink plans were in place for people who needed support with eating and drinking, and this included their preferences.

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

- People had plans in place that identified their health needs. There was guidance in place for staff to be aware of. This included when people had specific health conditions.

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.

- The principles of MCA were followed and people's capacity had been considered where needed.
- Staff had received training in this area, and were able to tell us how they gained consent from people.

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 requires improvement. The rating for this key question 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

- Systems did not provide an accurate record of the times care calls took place. This impacted on the provider's governance and monitoring because the system in place did not record the actual time a care call started and finished. People we spoke with raised no concerns about the times or duration of calls.
- The provider told us plans were in place to implement an electronic system for the monitoring of all care calls.
- The provider had identified some daily records relating to people's care were not consistently detailed and plans were in place to ensure improvements were made.
- Improvements had been made to staff recruitment processes and care records since our last inspection. Spot checks and induction processes were now embedded.
- People, relatives, and staff told us they were happy with the quality of the service provided. A relative told us, "The staff and management are really very good, they are very responsive if there are any changes in care needs. I think they really do go over and above." Another relative told us, "We have the same staff, and they are very good, we feel very comfortable with the staff and they do extra little things."

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- There was a positive open culture in the service. People, relatives, and staff told us there was effective and open communication. A relative told us, "We have regular contact from the managers and they are very easy to get hold of if you need to speak about anything."
- Staff told us there was a good morale in the service and they felt happy and valued. One staff member told us, "I feel well supported in my role, the staff team get on well and help each other and I think it all comes from having good management at the top."
- Systems were in place to ensure people and staff were asked their opinions on the service. This included meetings, surveys and reviews.

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

- Throughout the inspection we found the provider and registered manager to be honest, open and transparent about any issues we brought to their attention. They were receptive to our feedback and demonstrated their

commitment to making any required improvements.

- Systems were in place to assess and monitor the quality and safety of the service provided.
- The registered manager understood the importance of being open and honest, and had notified us of incidents as per regulatory requirements.

Working in partnership with others

- Staff worked in partnership with others, this included people's relatives or health professionals when required.