City Care Limited

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Inspection report

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24 January 2020

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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?	Good
Is the service responsive?	Good
Is the service well-led?	Good

Summary of findings

Overall summary

About the service
City Care Limited is a domiciliary care agency providing personal care to 3 adults at the time of the inspection.

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
People were safely cared for while being supported by the service. Staff were trained to identify and report any safeguarding concerns. Risks were assessed, and staff followed guidance to safely support people. Staff were recruited safety and attended calls to people in their own homes on time and stayed for the duration of the call. Medicines were safely managed.

Assessments were carried out to ensure needs could be met. Assessment captured choices and preferences and personal care needs. People were supported to eat and drink. Staff worked with families to ensure people received their food and drink of choice. Staff received an induction and training as part of their role. Regular supervision was given to staff.

Staff were caring towards people, this was confirmed by relatives. Staff were able to offer support with communication and cultural needs which enhanced people's wellbeing. Staff told us they felt humbled by supporting elderly people who lived in their community.

Care plans described people's needs and had been developed with people and their relatives. Staff could describe plans of care and how to best support people. Information for people could be adapted to personal needs such as alternative language or easy read formats. A robust complaints procedure was in place and the service had received no complaints since they began operating.

The registered manager was responsive to people and their relatives and staff felt well supported by them. Audits to monitor and improve the service were in place and recent feedback on the provision of the service had been positive.

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.

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

This service was registered with us on 12/02/2019 and this is the first 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?

Good

The service was effective.

Details are in our effective 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 are in our responsive findings below.

Is the service well-led?

Good

The service was well-led.

Details are in our well-Led findings below.

City Care 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 Care Act 2014.

Inspection team
The inspection team consisted of 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 that 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 48 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the provider or registered manager would be in the office to support the inspection.

Inspection activity started on 21 January 2020 and ended on 24 January 2020. We visited the office location on 21 January 2020.

What we did before the inspection
Before the inspection we reviewed information, we held about the service and we spoke with professionals 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. We used all of this information to plan our inspection.

During the inspection
During the inspection, the registered manager was away from the office, but we did speak with them via email and telephone. The administrator from City Care Ltd facilitated the inspection. We spoke with the administrator, two staff members and three relatives.

We looked at two care records and associated documents. Two staff recruitment records. Staff training, induction, and supervision records. Policies and procedures. Information relating to health and safety and risk assessment and documents kept for monitoring and improving the service.

After the inspection
We continued to seek clarification from the provider to validate evidence found. We looked at training data and quality assurance records.

Good

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.

Staffing and recruitment
- Staff were recruited safely and had the appropriate pre-employment checks in place before employment commenced.
- Staff arrived on time at people's properties and stayed the full length of time. Relatives spoken with confirmed this.

Using medicines safely
- Medicines were safely managed.
- Detailed assessments of medicines support were recorded, and staff were trained to safely administer medicines.
- Medicines including topical creams were clearly recorded on people's medication administration records.

Systems and processes to safeguard people from the risk of abuse
- People were safe while being supported by City Care Limited.
- Staff could describe what action to take should they suspect abuse was occurring.
- Relatives confirmed people were safe. One relative said, "[Name] is very happy with City Care, he is very safe."

Assessing risk, safety monitoring and management
- Risks were assessed, and management plans were put in place to support people to remain safe.
- Staff could describe how to manage any risks in relation to moving and handling of people and the safety of the premises and said, "I am aware of the risks [name] presents. [Name] isn't aware of the risk and harm so I need to be aware to keep them safe."
- Risk assessments were regularly reviewed.

Preventing and controlling infection
- Staff were aware of infection control procedures and relatives confirmed staff carried with them personal protective equipment such as gloves and aprons.

Learning lessons when things go wrong
- There had been no accident or incidents since the provider began operating. The provider had protocols for recording any accidents or incidents and staff could describe how they would report any concerns.

Good

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
- A full assessment was carried out to ensure the provider could meet each person's needs.
- Assessment captured needs, wishes and preferences and the information was used to generate care plans.
- A relative told us they had been fully involved in the assessment and the registered manager had been very supportive when explaining the process.

Staff support: induction, training, skills and experience
- Staff received a robust induction and training, which was appropriate to their job role.
- Regular supervision was completed with staff and unannounced spots checksto ensure staff were providing the correct care and support to people.
- Staff told us the training was good and they were able to complete practical, on the job training which ensured they were aware of people's individual needs.

Supporting people to eat and drink enough to maintain a balanced diet
- Staff supported people to eat and drink. Any support required was captured in the care plan.
- Staff were fully aware of people's like, dislikes and cultural requirements and relatives worked with the staff team to provide and make meals.

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support
- Feedback from health professionals was captured in care plans.
- The service did not support people to appointments, but this was something that could be arranged. Any health concerns were reported as appropriate to a health professional and the family for further investigation.

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 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.

- Capacity was assessed, and consent was gained from people to deliver personal care and support.
- Staff demonstrated an awareness of supporting people to make decisions and understood the principles of the MCA.

Good

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
- Relatives confirmed all staff were kind, caring and respectful.
- People supported by the service had primarily chosen the provider as staff were able to speak their native language and support their culture. This had reduced isolation for people.
- Staff explained they needed to gain people's trust as people would more likely accept personal care and support from them. Relatives confirmed building relationships was important to their relation and they were happy with the care and supported received.

Supporting people to express their views and be involved in making decisions about their care
- People and relatives were involved in making decisions about how they wanted their care to be.
- Views were reflected in care plans and staff could describe any decisions that were important to people's care and support.

Respecting and promoting people's privacy, dignity and independence
- Staff supported people to remain independent and ensured privacy and dignity was maintained.
- Relatives confirmed, staff ensured privacy and dignity was always maintained and described how staff made their relation feel comfortable. One relative said, "[Name] enjoys the male company and its so helpful they (staff) can speak the same language. This put [Name] at ease."
- Staff described how supporting people impacted on them and they felt humbled to provide care for the elders in their community.

Good

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

- Care plans were detailed and accurate and described the support people needed. Staff could describe people's needs and they regularly reviewed care plans to ensure information about people's care was accurate and up to date.
- Relatives confirmed they had been involved in care planning and told us, "[Registered manager] regularly checks with us for any changes."
- Care plans captured people's personal preferences, for example, one care plan recorded how the person wanted to be supported to prepare for prayer.

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.

- Information about the service could be provided in different languages, easy read formats, braille and in audio on request.

Improving care quality in response to complaints or concerns

- There was a complaints policy in place and each relative told us, they felt fully confident to make a complaint if needed, however, they hadn't needed to.
- The service had not received any complaints since they registered with the Care Quality Commission.

End of life care and support

- The service was prepared to provide high-quality end of life care; however, at the time of inspection they had not supported anyone who was at the end of their life.
- The registered manager had provided training to the staff to support end of life care.

Good

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.

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

- The registered manager had a clear idea of how they wanted to progress and improve the service and were providing a service to a population of the community to meet cultural and communication needs.
- Relatives told us, the service was very valuable to them with one relative told us, it had helped their relative to engage with care services as the staff could speak the same language.
- Relatives said the registered manager was very responsive and was willing to listen to them and more importantly, their relation which put their mind as ease when accepting care.
- Staff were well supported by the registered manager, they told us, "[Registered manger] is very supportive. I was able to follow them and see how they worked with people and picked up some hints."

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 understood their responsibility for providing information to the Care Quality Commission and other bodies when something goes wrong.
- Relatives had confidence the registered manager would do the right thing and told us, "I can raise anything, and it will be acted upon"

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

- Audits to monitor and improve the service were completed.
- Care plans and recruitment records were regularly reviewed to ensure they were at the required standard.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Continuous learning and improving care

- Feedback was sought from people and relatives and responses had been positive.
- The provider was keen to improve the outcomes for people within their community and ensured people were supported by staff who could meet people's communication, spiritual and cultural needs.

Working in partnership with others

- The service had worked with the local authority, providing interim care for people when needed.
- The registered manager worked closely with families to ensure care needs were appropriately met.