

Desired Care 4 U Limited

Desired Care 4 U Limited

Inspection report

75 Waterloo Road
Smethwick
West Midlands
B66 4JN

Tel: 01215654664
Website: www.desiredcare4u.co.uk

Date of inspection visit:
09 October 2018

Date of publication:
09 November 2018

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

Desired Care 4 U is a domiciliary care service providing a service to people living in their own home. This announced inspection took place on 09 October 2018. We gave the provider 48 hours' notice that we would be visiting the service because we wanted to make sure staff and people would be available for us to speak with. At the time of the inspection there were eighteen people using the service.

At our last inspection, on 14 June 2016, we rated the service Good. At this inspection we found the evidence continued to support the rating of Good and there was no evidence or information from our inspection and ongoing monitoring that demonstrated serious risks or concerns. This inspection report is written in a shorter format because our overall rating of the service has not changed since our last inspection.

Staff had been trained in safeguarding vulnerable adults and health and safety policies and procedures. Staff knew what action to take if they identified any safety concerns during their work. General risks and risks to individuals were identified and action continued to be taken to reduce them, as far as possible.

Medicine was administered as safely as possible. Care staff followed the medication procedure, completed medicine care plans and recorded medicine administration. We found that care plans had details about medication and how to support people.

People benefitted from continuity of staff, to ensure that relationships were built and people did not have to endure different staff for their care. Staff had received ongoing training to ensure that their skills were updated with current knowledge. The service did not accept a package of care unless they were able to provide staffing to meet the individual's needs safely. The service followed a recruitment process which ensured staff were recruited safely.

The service worked closely with health and other professionals to ensure people's needs were met in the best way possible.

People were supported to have maximum choice and control of their lives and care staff supported them in the least restrictive way possible. The policies and systems in the service supported this practice.

People continued to be supported by a committed and enthusiastic staff team who delivered care with kindness, respect and understanding. Staff told us they had built caring relationships with people and were able to meet their needs sensitively.

The service and care staff were aware of people's equality and diversity needs and endeavoured to meet them.

The service was being flexible and responsive to people's individual's needs. It adapted and changed care packages in response to people's choices and specific needs. People's needs were regularly reviewed to

ensure the care provided was up-to-date. Care plans included information to ensure people's communication needs were understood.

The registered manager and the staff team were committed to ensuring there was no discrimination relating to staff or people in the service. The quality of care the service provided was continually assessed, reviewed and improved.

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 remains Good.

Is the service effective?

Good ●

The service remains Good

Is the service caring?

Good ●

The service remains Good.

Is the service responsive?

Good ●

The service remain Good.

Is the service well-led?

Good ●

The service remains Good.

Desired Care 4 U Limited

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 office visit took place on 09 October 2018 and was announced. We told the provider we were coming so they could arrange to be there and arrange for care staff to be available to talk with us about the service. We gave the service 48 hours' notice of the inspection visit because the location provides a domiciliary care service. We needed to be sure that they would be in. The agency is a small agency.

The inspection was completed by one inspector. The provider had not been asked to complete a Provider Information Return (PIR) before this inspection. The PIR asks the provider to give some key information about the service, what the service does well and improvements they plan to make. We gave the registered manager the opportunity to discuss these areas with us during our office visit. We reviewed the information we held about the service. We looked at information received from the local authority commissioners and the statutory notifications the provider had sent us. A statutory notification is information about important events which the provider is required to send to us. Commissioners are people who contract care and support services paid for by the local authority.

During our visit we spoke with the registered manager, team leader, nine people who used the service which included three relatives and five staff. We reviewed four people's care records to see how their care and support was planned and delivered. We looked at three staff recruitment files, staff training records, records of complaints, and records associated with the provider's quality monitoring systems.

Is the service safe?

Our findings

At our last inspection in June 2016, we rated the service under the key question, is the service 'Safe' as good. At this inspection the service continues to be good. We found the same level of protection from abuse, harm and risks were in place as at the previous inspection.

The provider had systems in place to protect people using the service. This included a monitoring system for example, assessing and reviewing risk assessments, completing spot checks where a senior staff member would assess a staff member's performance to ensure good practice, and complete reviews of people's care on a regular basis. People spoken with told us that there was good communication between them and the office. Staff had received training in infection control and procedures were in place to prevent cross infection, for example the use of protective equipment.

Staff had received training in how to keep people safe. Staff understood how to recognise signs of abuse and told us they would report concerns to the management team straight away. The managers understood their responsibility for reporting any safeguarding concerns to the local authority safeguarding team and to us. There was a procedure to identify and manage risks associated with people's care. People had an assessment of their care needs completed at the start of the service that identified any potential risks to providing their care, and the risks staff needed to be aware of which was updated when required with the person's needs changed. A staff member told us, "Risks are included in the care plan that tells you everything you need to know."

People continued to be supported by staff who were safe and suitable to work with them. The recruitment processes were followed. They included safety checks such as Disclosure and Barring Service (DBS) checks to confirm that employees did not have a criminal conviction that prevented them from working with vulnerable adults and application forms were fully completed. The service remained appropriately staffed to meet people's needs safely. The registered manager told us there was an out of hours on-call system to support staff when the office was closed. Staff said there was always someone available if they had any concerns or worries.

Medicines were managed by the service. Most people we spoke with told us staff supported them with their medication, or their relatives helped them with this. Where people were supported by staff, they told us their medicines were administered as prescribed. One person told us, "It all works very well and I've never had any problems."

Is the service effective?

Our findings

At the last inspection in June 2016, we rated the service under the key question is the service 'Effective' as good. At this inspection, the service continues to be good.

All the people using the service we spoke with told us, they felt staff were well trained and that they provided continuity by allocating the same member of staff to support them. One person told us, "I have had the same staff for a number of years and I am very happy with the care I have." Relatives also gave us examples of how staff effectively managed risks associated with people care needs. For example, risks related to people's skin integrity, health and nutritional needs were assessed. People told us care staff usually arrived when they expected them and they let them know if they were running late. For example, one person said, "Yes it's very good. If they [staff] are going to be late due to an emergency, for example, they would let me know." All the people spoken with told us they felt safe with staff who supported them. Records looked at told us, that there were sufficient numbers of staff to ensure people had their calls on time. All people who use the service spoken with confirmed that no missed calls had taken place and staff always arrived on time. People spoken with told us they were fully involved in all aspects of their care. Relatives spoken with also confirmed that their relatives care needs were regularly reviewed.

People continued to be provided with effective care by staff who were well trained and had acquired the skills to meet people's diverse and changing needs. For example, the allocation of staff was matched to peoples' care needs, cultural needs and spoken language. People's diverse needs were taken into consideration as part of their care needs. Care plans and risk assessments provided the necessary information to enable staff to offer people the right amount of help to eat and drink and meet their daily care needs

People and their relatives thought staff were experienced and skilled. People who use the service or their relatives told us, staff were well trained. One person told us, "They [staff] do everything for me they do my meals and everything." One relative told us, "They [staff] all seem very well trained and I know they get called back quite regularly for training."

Staff told us they had very good training opportunities and were supported with their professional development. Staff were provided with induction training and completed the nationally recognised care certificate. One relative told us, "Beautiful staff, know their job." All the people we spoke with told us there was good communication from the management. People knew who to contact if they had any concerns and said they had the appropriate contact details for the office in their home folder.

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 people lack mental capacity to take decisions, any made on their behalf must be in their best interests and as least restrictive as possible. At the time of this inspection, the people currently using the service had the mental capacity to make their own decisions and consent to their care. Staff spoken with told us if they had any concerns about a person's

capacity to make decisions they would inform the registered manager. Staff we spoke with gave us examples how they would support people who may not be able to verbalise their choices. One staff member said, "We know people very well and you can tell by their facial expressions, how they move or the sounds they make what they like or do not like."

People we spoke with told us they were supported to make decisions about the care they received. People continued to tell us that staff explained what they were doing and would seek their consent before carrying out any support with their care needs.

Is the service caring?

Our findings

At the last inspection in June 2016, we rated the service under the key question is the service 'Caring' as good. At this inspection, the service continues to be good.

People continue to be supported by staff who were respectful and met their care needs as people wanted. Relatives we spoke with were pleased with the staff that supported their family members. People who use the service told us staff were always on time, very helpful and they had continuity of care because they had the same staff. One person told, "My carer is very nice we have a chat and she always ask what I want to do, she never assumes." Another person told us, "I am very happy with the care I get, I have had the same carer for a while so they know me really well and I can speak with them if I need anything." A relative told us, "[person name] is very happy with the agency, and the management is approachable if we have any issues."

People's diverse physical, emotional and spiritual needs were met by staff who were provided with appropriate, detailed information to enable them to meet their identified needs. Care plans included people's life history, religion, culture and lifestyle choices, as appropriate to the care package they were receiving. The service matched people, as far as possible, with care staff who had the skills, training, to meet their individual needs. Staff took time to ensure that people were provided with care that supported and encouraged them to regain and maintain their independence as much as possible. One person who used the service told us, "I still do things for myself and staff support me, they don't take over they let me continue to be as independent as I can, which keeps me active."

The service continued to recognise the value of diversity and employed staff from different cultural and ethnic backgrounds. They understood different cultures and the needs of people within cultures and with different life choices. For example, they matched a person who used the service and staff member because of a common language and culture.

Care packages were only activated if the service had enough appropriately skilled staff in enough numbers to meet the individual's agreed needs. The registered manager told us there was enough staff to allocate all the calls using a match process. For example, people where English was not their first language only staff who could speak the individual's language was allocated to ensure communication was effective. The registered manager told us this also means that the persons cultural needs were met and religious beliefs. This was confirmed by one person's relative.

Is the service responsive?

Our findings

At the last inspection in June 2016, we rated the service under the key question is the service 'Responsive' as good. At this inspection, the service continues to be good.

People benefitted from being supported by staff who knew them well and spent time seeking their views about the service provided. All the people we spoke with told us that care staff always asked what they wanted to do, were respectful in their home and encouraged them to be as independent as possible. One person told us, "Each day I want different things done and staff are very accommodating, I am always happy to see them they are really nice staff, who see me as me and not another person they have to go to."

The service ensured they could meet people's individual requirements. Senior staff completed an initial assessment of needs with people, their families and/or friends and other professionals, if relevant and appropriate. The care package was accepted if the service could meet those needs and had staff with the necessary, training, skills available. Staff told us if people appeared unwell or they [staff] had any concerns about people's health this would be reported to the office and relative informed. This was confirmed by one relative we spoke with, who said, "Any concerns staff always inform me."

The registered manager told us I am not looking to grow the service, I want to maintain the quality care we provide now. People spoken with told us that they felt the care provided was good, had continuity of staff and the calls were made on time with no missed calls. All the people and staff we spoke with said management was approachable and listened to their views.

The registered manager told us they listened to people's views because this is the way they make improvements. We saw records to confirm what the registered manager had told us. Records showed the agency had listened to people's concerns and complaints and dealt with them to people's satisfaction. All complaints had been regularly reviewed, analysed and actions had been taken on any improvements that had been identified as a result.

Discrimination was understood by the registered manager and the staff team. The registered manager and staff knew how to protect people from any form of discrimination and were knowledgeable about equality and diversity. Staff training covered these principles. For example, they matched a person who used the service and staff member because of a common language and culture

Is the service well-led?

Our findings

At the last inspection in June 2016, we rated the service under the key question is the service 'Well-led' as good. At this inspection, the service continues to be good.

There was a registered manager in place. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered 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.'

The registered manager monitored the service in relation to peoples' care and where issues were identified action was taken and lessons learnt. The registered manager completed regularly surveys and telephone calls to ensure people received care that was personal to them.

Surveys seen were positive, where issues were identified the registered manager had contacted the person to assess how they could improve the service where suggestion were made the registered manager implemented the suggestion were possible. This showed the registered was open and transparent with the people who used the service. Staff surveys were also completed, the last survey was completed in May 2018 which showed a positive result.

People and their relatives gave us positive feedback about the service. Everyone we spoke with thought the agency was well managed. People felt actively involved in the planning and reviewing of their care and they felt in charge of the support provided to them. Some of their comments included, "I definitely would say it is a well led service" and "I am very happy with it, it was recommended to me in the first place and I would happily recommend it to anyone else."

Quality assurance systems were used to review the quality and safety of the service provided . These included call times, staff training, accidents, incidents and complaints. The system then 'flagged up' any problems that may need further investigation such as developing trends or repetition of the same concerns to ensure the necessary improvements were made. The service continued to make improvements, as necessary to offer the best service they could. Actions were taken as a result of the auditing systems and listening to the views of people. Examples included. improving care plans to ensure they were person-centred.

The registered manager was open and transparent and had a clear vision for the organisation. The registered manager told us, "I believe in quality not quantity". The registered manager engaged with community health professionals to ensure people's care needs were met.

The registered manager understood the responsibilities of their registration with us and we had received appropriate notifications about incidents and accidents they are required to tell us by law. It is a legal requirement that a provider's latest CQC inspection report is displayed at the service and, if appropriate, on their web site where a rating has been given. This is so that people, visitors and those seeking information

about the service can be informed of our judgments.

At the time of the inspection the providers web site was being updated the registered manager will ensure that the rating is displayed once the work needed is completed. Prior to this work the rating was displayed. This meant anyone visiting the website would be aware of this information and able to consider this when making any decision about using the service.