

Care 4 You Direct Limited

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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?

Good ●

Is the service responsive?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

Care 4 You Direct Limited is a domiciliary care service providing personal care and support to 19 people living in their own homes at the time of the inspection.

Not everyone who used the service always 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 safe and protected from avoidable harm because management and care workers knew how to identify and report any concerns relating to the risk of abuse. Risks to people's health, safety and well-being were assessed and measures developed to remove or reduce the risks. People were supported by care workers who had been safely recruited.

People's medicines were managed safely. Care workers received appropriate training and had their competency assessed to help ensure they were sufficiently skilled and knowledgeable to safely administer medicines. Care workers had received training in infection control practices and personal protective equipment was provided for them. The management team took appropriate action following any incidents and learning was shared with the team.

Before care delivery started assessments were completed to help make sure people's needs could be met. Management and care workers knew people well. They were able to promptly identify when people's needs changed, and sought professional advice appropriately. People were supported to have maximum choice and control of their lives and care workers supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

People and their relatives praised the kind and caring nature of care workers. People and their relatives were confident to raise any concerns with the management team. Everyone we spoke with during this inspection was satisfied with the care and support they received.

The management team was committed to providing a high standard of care to the people they supported as well as the care workers and understood their responsibilities under the Duty of Candour. People, their relatives and care workers spoke highly of the management team and told us they were always available and supportive.

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

Rating at last inspection and update and update

We inspected this service on 11 October 2021 in response to concerns raised with us. We found the concerns were substantiated and we identified a breach of regulations. The service registered with us on 16 June

2021, there was not enough evidence of sustained practice at the time of the inspection in October 2021, so we were unable to provide a rating at that time. The provider completed an action plan after the 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.

Why we inspected

This inspection was carried out to follow up on action we told the provider to take at the last inspection and to provide a rating for the service under the Health and Social Care Act 2008.

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.

Details are in our safe 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

Care 4 You Direct 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 Health and Social Care Act 2008.

Inspection team

This inspection was undertaken 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.

Registered Manager

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.

There was not a registered manager in post. However, a registration application had been submitted for consideration and was being processed at the time of this inspection.

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 manager would be in the office to support the inspection.

Inspection activity started on 20 July 2022 and ended on 29 July 2022. We visited the service on 28 July 2022.

What we did before the 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 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.

During the inspection

We received feedback from three people and five relatives about their experience of the care provided. We received feedback from nine care workers and met with the provider, nominated individual and the manager. The nominated individual is responsible for supervising the management of the service on behalf of the provider. We reviewed a range of records. This included care records and medication records. We looked at records in relation to recruitment and care worker supervision.

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 comprehensive inspection of this newly registered service. This key question has been rated Good. This meant people were safe and protected from avoidable harm.

Staffing and recruitment

- Newly recruited care workers were not always introduced to people before they attended to provide care and support. A relative said, "We can clearly identify care workers by their uniforms and ID, but it would be nicer for [relative] if they were introduced before they arrived to do personal care tasks." The management team acknowledged this did sometimes happen but said it was very occasionally in the event of a last-minute sickness for example. The management team had plans to further develop team working to allocate each person a small team of care workers to help improve people's experience.
- The provider operated effective recruitment procedures; appropriate checks were undertaken to help ensure care workers were suitable to work at the service. Criminal record checks had been obtained for care workers before they worked with people independently.
- People and their relatives said care visits were sometimes later than expected but they usually had a phone call from the office or care worker to advise them.
- Care workers told us they were allocated enough time for each care call to help ensure they were able to meet people's needs safely and effectively. One care worker told us, "I have the time I need to provide the care I need to give to my clients. Everything has been perfectly calculated taking a lot of things into consideration."
- People and their relatives said care workers stayed for the agreed period of time and ensured all care needs were met. One relative said care workers' last words before they left a person's home were always, "Is there anything else you want before I leave?"

Using medicines safely

- The provider had introduced a digital system to support the safe delivery of care. However, this meant medicines administration was recorded digitally and a record was not routinely maintained in people's homes to show what medicine they had received and when. This meant emergency care practitioners and visiting healthcare professionals would not have sight of the medicines people had received and could potentially delay or negatively impact on any proposed treatment. The management team acknowledged this and undertook to immediately amend their systems to include maintaining a physical record of medicines administration in people's homes.
- Care workers received the training necessary to support them to safely administer people's medicines. The management team undertook competency assessments once care workers had completed their training to help ensure safe practice.
- Care workers supported some people with administering their medicines and just prompted others to take theirs as needed.
- A relative told us, "The medicines are managed very safely, and notes are always made every day, so everyone knows which medicines [person] has taken and when."

Systems and processes to safeguard people from the risk of abuse

- The provider had robust and effective systems to help protect people from the risk of harm or abuse and understood their responsibilities to safeguard people from abuse.
- Care workers received training and were clear about how they would report any concerns both internally to the provider and externally to the safeguarding authorities. The management team told us where they had liaised with the local authority safeguarding team for them to further investigate a concern.
- People told us care workers provided them with safe care. A person told us, "I do feel safe with the care workers supporting me. I do most of my care myself, the care worker is here to give me re-assurance and help me with areas I cannot reach."
- People's relatives said they were confident people received safe and effective care. One relative said, "They (care workers) couldn't do any more to keep [person] safe." Another relative told us, "As a family we are absolutely delighted with the care from Care 4 You Direct and cannot sing their praises enough. [Person] always receives safe care and the care workers always explain what they are doing and work with [person]."

Assessing risk, safety monitoring and management

- Risks to people's health, safety and well-being were assessed and a care package was developed to remove or reduce the risks. Risk assessments enabled people to stay as independent as possible within the confines of their health needs.
- The management team helped ensure people received support in the event of an emergency. For example, they provided a 24 hour on-call service and provided emergency cover if needed for sickness or other such events.
- Care workers said they were confident the provider's risk management processes were appropriate to help ensure people's safety. One care worker gave an example where an essential piece of equipment needed to support safe moving and handling for one person had failed. The care worker had contacted the office and received the support they needed to safely meet the person's needs.
- Relatives were confident care workers managed incidents or accidents well. A relative shared with us how a care worker had arrived to provide support to a person and found they had fallen. The relative told us, "I was not able to get to [person]. The care workers were marvellous, they stayed with [person] until midnight when the ambulance arrived."

Preventing and controlling infection

- Care workers were provided with training and personal protective equipment (PPE) including gloves and aprons to help promote effective infection control. Practice in this area was monitored by the management team during spot checks. A care worker said they felt the management team had dealt with the pandemic very professionally despite the difficult time it had presented for all. One care worker said, "During the pandemic Care 4 You Direct ensured people and care workers were safe. They set up a monitoring team to ensure adequate PPE was worn at all times, this ensured both the care workers and people were well protected."
- People and their relatives told us care workers promoted good hygiene practices. One relative told us, "Care workers were excellent during COVID-19, they wore PPE at every visit and still do." At this inspection visit we reminded the management team of the current guidance in relation to staff sharing offices where masks should still be worn.

Learning lessons when things go wrong

- The provider took appropriate action in response to any concerns and learning was shared with care workers by a variety of means including updates, face to face meetings, group supervisions and team meetings.
- The management team gave examples where lessons had been learned and shared with care workers to

help improve the service delivery. For example, after a medicines error and after poor discharge information from hospital had a negative impact for a person using the service and care workers supporting them.

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 comprehensive 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

- People's needs were assessed before they started to use the service. Assessments included people's support needs and their individual preferences. These assessments formed the basis of people's care plans and risk assessments.
- People's relatives praised care workers for the effective care and support they delivered.

Staff support: induction, training, skills and experience

- Care workers received training in areas including safeguarding, moving and handling, advanced dementia, fire safety and the Mental Capacity Act and demonstrated a good understanding of these topics.
- Care workers received supervision and competency observations to help ensure they had the knowledge to perform their job roles. Care workers told us they enjoyed good support from the management team. One care worker said, "I have the training and the support I need to do my job. The management team really support me a lot. When I don't feel confident in doing anything a member of management will come in the call with me to see how I'm doing it and to see my problem areas then guide me on how to do it."
- Inductions for new care workers were thorough and their knowledge was tested during shadow shifts prior to the care worker working with people unsupervised.
- People and their relatives praised care workers for their skills, knowledge and compassion. One relative told us, "I am extremely happy with them. I feel the care workers are skilled and experienced, I have no criticism of them."

Supporting people to eat and drink enough to maintain a balanced diet; Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- People's dietary needs and requirements were identified in their care plans and care workers had a good understanding of how to support people with these.
- Information was shared with other agencies if people needed to access other services such as hospitals.
- The management team told us they changed the times people received their support so they could support them to health appointments if this was the person's choice.

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.

- People and relatives told us care workers always asked for consent when supporting them. People had been asked for their consent to be supported in line with their individual care plans and risk assessments.
- Care workers received training in the Mental Capacity Act and had a good understanding of how to put this in to practice.

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 comprehensive 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

- Care workers had a good understanding of the people they supported and took time to get to know people's individual likes and dislikes, their pasts and interests and incorporated these into their care. A care worker said, "The care and the support we give has a great impact on people, on how they see life, because we're not only there to do personal care. We also listen and encourage them, re-assure them and made sure they are comfortable. We have received numerous commendations from families appreciating our hard work, and people's lives have actually improved due to the level of care we give to them."
- People and their relatives praised care workers for the care and support they provided. A relative told us, "The service is very good indeed, the care workers are lovely, they go over and above for [person]. For example, [person] needed a prescription collecting from the pharmacy but I was not able to go. One of the office staff collected it for us." This meant the person had been able to have their medicine as prescribed without waiting.
- Relatives praised care workers for the kindness and care they showed people. One relative told us, "Care workers are extremely kind, caring and courteous to [person] and always chat to them, cheer them up and make them laugh."

Supporting people to express their views and be involved in making decisions about their care

- People and their relatives told us they were always involved in any decisions about their care. One relative told us, "There are regular reviews of [person's] care and we are satisfied the agency is always ahead of the game and advising us if they see any changes in [person's] health and have always advised us immediately when they think we need to call a doctor."

Respecting and promoting people's privacy, dignity and independence

- People and their relatives said care workers promoted people's privacy, dignity and independence.
- A relative told us, "I can never thank or praise Care 4 You Direct enough for their care of [person]. The care workers are always so kind and helpful and we feel they are part of our family and I always see them being friendly but still maintaining their professionalism. I always recommend them to everyone and tell anyone I encounter how fantastic they are."
- A relative shared with us how the care workers supported their young relative in a dignified and caring manner. For example, care workers did not wear uniform when supporting the person to attend community-based events. The relative told us, "[Person] absolutely loves this and sees this like their friends are coming out with them."

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs.

This is the first comprehensive 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

- People received care to meet their individual needs and preferences. The manager explained the agency supported people from various cultural backgrounds and described how care workers understood differences and met people's individual preferences. The manager also described how they worked with the multicultural care worker team to support good communication and a positive and competent approach.
- People's care was adapted to meet their changing needs. For example, where people began to regain some of their mobility the support was amended to help maximise independence.
- Care plans were detailed with regards to people's preferences, likes and dislikes. This meant care workers had the information available to help ensure people received consistent care to meet their individual needs.

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says people should get the support they need in relation to communication.

- The provider had not yet had the need to make information available in different formats but said they would do so should the need arise. We were given an example where a person who was unable to communicate verbally was supported by care workers to choose shower gels and clothing whilst maintaining a caring manner.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- Care workers supported people to maintain contact with their friends and families during periods where COVID-19 restrictions meant they could not freely see people.

Improving care quality in response to complaints or concerns

- The provider had a complaints and compliments policy, people and their relatives told us they had a copy of the policy in their homes to access if needed. One relative told us, "I did raise some complaints in the early days when things were not up to the standards I expected. However, my complaints were addressed appropriately."
- Another relative told us, "We have never had to raise a complaint and are full of praise for the skill, hard work, courtesy and politeness of the care workers."

End of life care and support

- Care workers supported people at the end of their life according to their wishes and preferences. People were supported to stay in their own home if they chose to do so and extra support was provided as needed from specialist services such as Hospice nurses. Care workers had support from the management team to care for people at the end of their life.

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 comprehensive 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.

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

At our inspection in October 2021 there were no quality assurance systems in place to monitor the overall quality and safety of the service to demonstrate the service was effectively managed. This was a breach of regulation 17 (Good Governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

At this inspection we found significant improvements. The provider had developed a management team with backgrounds in health and social care. This meant the service was being managed by people who understood quality performance and the standards expected of them. The provider was no longer in breach of regulation 17.

- The provider had recruited a manager since the previous inspection. The manager had submitted their application to register with CQC, this was in progress at the time of this inspection.
- The management team comprising of the manager, the provider, the nominated individual, care co-ordinator and finance oversaw governance of the service. The team met each Monday to review any accidents, incidents or safeguarding concerns and explore anything arising from the previous week.
- The manager reported regular monitoring of medicines, care plans, recruitment, training. health and safety were now in place. There had not been any audit system in place when the manager had started in the role and they had prioritised medicines first. To achieve this the manager worked alongside care workers to assess their skills and knowledge. Medication audits had been introduced to check overstocking and completion of medicine administration records.
- The manager had identified areas for improvement and was gradually working through these. For example, the provider had introduced a care planner App. The manager reported they audited the care records and updated care plans using this App. They had identified the need for care plans to be more person centred and were working through the care plans to achieve this.
- The management team had struggled to receive feedback from people or their relatives about the quality of care delivered. In order to address this members of the management arrived unannounced at care visits and worked alongside care workers providing people's care and support. They said they had found this an effective method of assessing care worker practice and also assessing people's satisfaction with the care provided. Care workers were provided with any relevant feedback after the care visits. People and their relatives were often unaware of these checks taking place because the management team had not intended

for them to be intrusive for people.

- A care worker told us, "I always receive random spot checks to see how I am when working and given constructive feedback if required."
- The management team and care workers understood their roles and respected the impact their roles had for people.

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 provider had a good understanding of their responsibilities towards the people they supported and demonstrated a strong passion for delivering person-centred care.
- The provider had a clear understanding about the duty of candour and told us they encouraged care workers to be open and honest in their feedback. Throughout this inspection process we found the provider and manager to be honest and open in their approach.
- People and relatives told us they found the provider, manager and care workers to be warm and professional. A relative said, "In the unfortunate circumstances of [person] becoming bed bound, the agency are the best thing that happened to us and it's obvious to see that the care workers are looked after and follow the example of their management and owners."
- Care workers said they felt proud to work for Care 4 You Direct Limited. For example, one care worker told us, "I do recommend this agency to other vulnerable people looking for care because the care is provided in a professional manner and make clients happy."

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

- People and their relatives gave positive feedback about the service and how it operated. A relative told us, "It's led from the top down in a professional, caring way and the care workers always seem extremely happy."
- Feedback from care workers was originally sought via satisfaction surveys however, that proved to be ineffective so now face to face meetings took place with the management team.
- Care workers were positive about working for the company. One care worker said, "Care 4 You Direct is a great agency that I would love to keep working with and would recommend them to families looking for an agency and for my friends looking a great company to work for."
- Regular feedback about the quality of the service provided was gathered informally from people and their relatives. People's feedback confirmed they were satisfied with the care and support they received from Care 4 You Direct limited.

Continuous learning and improving care; Working in partnership with others

- Learning was taken from incidents to improve people's experience of care. The manager gave examples of learning including to improve assessments undertaken prior to people joining the service and increasing the effectiveness of medicine oversight.
- The management team worked with external professionals to achieve good outcomes for people. For example, social working teams, community nurses, occupational therapists, hearing services, equipment services and GPs.