

Cherish Social Care Ltd

# Cherish Social Care Ltd

## Inspection report

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### Ratings

Overall rating for this service	Good ●
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Is the service safe?	Good ●
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Is the service effective?	Good ●
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Is the service caring?	Good ●
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Is the service responsive?	Good ●
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Is the service well-led?	Good ●
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# Summary of findings

## Overall summary

### About the service

Cherish Social Care is a domiciliary care service providing personal care and support to nine people at the time of the inspection. Cherish Social Care also operates a shared lives scheme which provides people with long-term placements, short breaks and respite care, within shared lives carers (SLC) own homes.

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 safe and protected from avoidable harm because staff 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 staff who had been safely recruited.

People's medicines were managed safely. Staff received appropriate training and had their competency assessed to help ensure they were sufficiently skilled and knowledgeable to safely administer medicines. Staff 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 staff.

Before care delivery started assessments were completed to make sure people's needs could be met by Cherish Social Care. Staff received training and support to enable them to carry out their roles effectively.

Staff and the management team knew people well and were able to promptly identify when people's needs changed, and they sought professional advice appropriately. 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.

People and relatives praised the kind and caring nature of the staff team. People received consistent care from a small team of staff. People knew about their care plans and could decide what care and support they needed. People told us they would be 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 staff team and understood their responsibilities under the Duty of Candour. People, their relatives and staff members spoke highly of the management team and told us that 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](http://www.cqc.org.uk)

#### Rating at last inspection

This service was registered with us on 22/02/2019 and this is the first inspection.

#### Why we inspected

This inspection was carried out to check 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.

#### 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 safe.

Details are in our safe findings below.

### Is the service effective?

Good ●

The service was effective.

Details are in our safe findings below.

### Is the service caring?

Good ●

The service was caring.

Details are in our safe findings below.

### Is the service responsive?

Good ●

The service was responsive.

Details are in our safe findings below.

### Is the service well-led?

Good ●

The service was well-led.

Details are in our safe findings below.

# Cherish Social 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 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 homes. Cherish Social Care also operates a shared lives scheme, they recruit, train and support self-employed shared lives carers (SLC) who offer accommodation and support arrangements for vulnerable adults within their own family homes in the community.

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

This inspection was unannounced. 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/registered manager would be in the office to support the inspection.

Inspection activity started on 29 April 2021 and ended on 07 May 2021. We visited the office location on 04 May 2021.

#### What we did before inspection

We reviewed information we had received about the service since registration. We sought feedback from the local authority and professionals who work with the service. 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 one person who used the service and three relatives about their experience of the care provided. We spoke with the registered manager and received feedback from three staff members. We reviewed a range of records. This included two people's care records and multiple medication records. We looked at two staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

#### After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at training data and quality assurance records. We received feedback from social care professionals who worked with the service.

# 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.

Systems and processes to safeguard people from the risk of abuse

- The provider had effective systems to help protect people from the risk of harm or abuse. Staff received training and were clear about how they would report any concerns both internally to the provider and externally to the safeguarding authorities.
- The registered manager understood their responsibilities to safeguard people from abuse and gave us an example where they had liaised with the local authority safeguarding team in a person's best interests.
- People and their relatives told us that staff provided safe care for people. One relative said, "I think [relative] is safe receiving support from Cherish Social Care. It is a combination of things. [Relative] needs support to be safe and the staff providing the support are reliable and trustworthy." Another relative told us their parent was safe because, "I have met the staff, I have been there when they have called. [Registered manager] keeps me up to date with [relative's] care needs."

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 registered manager helped ensure people received support in the event of an emergency. The management team provided a 24 hour on-call service and provided emergency cover if needed for staff sickness or other such events.
- Relatives told us they were confident Cherish Social Care staff managed accidents well. One relative told us, "They (staff) have been spot on with any incidents that happened. For example, [relative] had a fall. They contacted emergency services, contacted me and stayed with [relative] until the emergency services arrived."

Staffing and recruitment

- People's relatives told us they thought there were enough staff available to meet people's care needs. There had not been any missed care calls and all feedback indicated staff provided people's care within agreed timeframes. One relative said, "They certainly strive to maintain continuity of care workers, they are aware [relative] has an affinity with one particular care worker and try to arrange the care around that."
- The registered manager operated robust recruitment procedures; appropriate checks were undertaken to help ensure staff were suitable to work at the service. Criminal record checks and satisfactory references had been obtained for all staff before they worked with people independently.
- Newly recruited staff were personally introduced to people who used the service by the management team.

Using medicines safely

- Staff received training to support them to administer people's medicines safely. The registered manager undertook competency assessments once staff had completed their training to ensure safe practice.
- Staff supported some people with administering their medicines and just prompted others to take theirs as needed.

#### Preventing and controlling infection

- People were protected from the risk of infection because staff had been trained in infection control and followed the current national infection prevention and control guidance. Every person we spoke with told us that care workers wore face masks, aprons and gloves during each care visit. One relative told us, "The staff are very thorough with PPE. I am in a support bubble with my [relative] so I have been able to visit. Staff ensured I used PPE at each visit."
- Staff told us they were supplied with personal protective equipment (PPE) to help prevent the spread of infections and were clear on their responsibilities with regards to infection prevention and control. The provider held plentiful stocks of all PPE.

#### Learning lessons when things go wrong

- The registered manager took appropriate actions in response to any concerns and learning was shared with staff. No accidents or incidents had occurred since the service began but we were re-assured that the registered manager would take quick and effective action.



# 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

- 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 the staff team for the effective care and support they delivered. One relative told us how much it meant for a person to be able to remain in their own home but still receive such professional and empathetic care.

Staff support: induction, training, skills and experience

- Staff received training in areas including safeguarding, moving and handling, advanced dementia, fire safety and the Mental Capacity Act. Staff had a good understanding of these topics. Staff received supervision and competency observations to help ensure that they had the knowledge to perform their job roles. Staff told us they enjoyed good support from the registered manager.
- Inductions for new staff were thorough and their knowledge was tested by the management team during shadow shifts prior to the staff member working with people unsupervised. The registered manager said the amount of shadow shifts depended on the skills and confidence of the staff member.
- People and their relatives praised the staff team for their skills, knowledge and compassion.

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

- People and their relatives said that where people needed assistance to eat, staff supported them in a safe and effective manner.
- People's dietary needs and requirements were identified in their care plans and staff had a good understanding how to support people with these.

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

- Cherish Social Care worked well with external professionals for the benefit of people who used the service. These included social workers, GPs, occupational therapists, district nurses and speech and language therapists. An external professional said, "Cherish Social Care provide a high quality and responsive level of care" and, "The care delivered is truly person centred, highly professional and has a high level of client satisfaction."
- Information was shared with other agencies if people needed to access other services such as hospitals.
- The registered manager told us that they changed the times that people received their support so that 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 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.

- People and relatives told us that staff 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.
- Staff 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 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

- Staff had a good understanding of the people they supported. Staff took time to get to know people's individual likes and dislikes, their pasts and interests and incorporated these into their care.
- People and their relatives praised the staff team for the care and support they provided. A relative told us, "It is such a weight off my mind knowing that [relative] has such good care, can't praise [registered manager] and her team enough."
- Staff undertook many tasks above and beyond the basic care commissioned. For example, watered houseplants for people if they noted it had been forgotten or the person was not able to do so themselves. Staff picked up shopping items for people if they ran out prior to their expected delivery dates and collected prescriptions when there were delays with chemist deliveries.

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

- People's care plans showed that they were consulted about changes to their care and that these were documented. Regular reviews of people's support involving people, their relatives and other professionals took place.
- People and their relatives told us they were always involved in any decisions about their care.

Respecting and promoting people's privacy, dignity and independence

- People and their relatives said that staff promoted people's privacy, dignity and independence. People described how they were supported to have their personal hygiene delivered whilst still feeling 'in control' and respected as a human being. One person said, "They really do support my dignity. For example, when they are washing me, they only uncover a bit at a time, so I am not sat here naked."

# 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

- People received care to meet their individual needs and preferences.
- 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 staff had the information available to help ensure people received consistent care that met their individual needs.

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.

- The registered manager told us they had not had the need to make information available in different formats yet but said they would do so should the need arise.

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

- Staff supported people to maintain contact with their friends and families. For example, offering to dial phone numbers for people with limited dexterity in their hands or holding the phone closer to them whilst they spoke. People's relatives said they had found this a big comfort when they had not been able to visit in person due to national restrictions.

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. People and their relatives told us they had not had the need to raise any complaints, but all said they would be confident to do so if the need arose. One relative said, "I have not had to raise any concerns, occasionally the odd question which is always answered very promptly."

End of life care and support

- The staff team 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. Staff knew how to support 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 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 good understanding of their responsibilities towards the people they supported and had a passion for delivering person-centred care. They told us, "When people call us we spend time actively listening, and re-assuring them often beyond the immediate problem situation they have brought to us, recognising the emotional toll on family members who care for their parents."
- People and relatives told us they found the registered manager to be warm and professional. A relative said, "I would recommend Cherish Social Care to others, most certainly. I find [registered manager] to be very personable, very likeable, very organised and responsive. A person who used the service told us, "I would definitely recommend Cherish Social Care, in fact I have already done that!"
- The service delivered good outcomes for people. An external professional told us, "Cherish Social Care are reliable in responding to urgent needs as per availability and their professionalism reflects in their responses and services."

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

- The registered manager had a clear understanding about the duty of candour and told us they encouraged staff to be open and honest in their feedback.
- The management team and staff understood their roles and respected the impact that their roles had for people. The registered manager worked alongside the staff team routinely and assessed the service provision as part of their daily work.

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. One relative said, "I talk with [registered manager] quite a lot. We exchange information, I am always kept in the loop about [relative's] care. I have found [registered manager] to be very supportive, a great support to me as well as to [relative]."
- Staff feedback was sought via satisfaction surveys and face to face meetings with the management team. Staff were positive about Cherish Social Care. One staff member said, "I am very proud to work for Cherish Social Care, though we are a relatively new player, I believe we provide excellent service and our clients feedback that they appreciate the extra lengths we go to for them."

- Regular feedback about the quality of the service provided was gathered from people and their relatives. The satisfaction scores were high and written feedback included, "Care workers are very good and quick to identify issues. Care workers are flexible in accommodating [person's] needs. Managers are very helpful and responsive."

#### Continuous learning and improving care

- Learning was taken from incidents to improve people's experience of care.
- The registered manager was a member of a local care provider's association. They had arranged training for themselves and the staff team and attended some local business network meetings to help keep themselves up to date with changes in the care sector and legislation.

#### Working in partnership with others

- The registered manager often worked with other professionals to achieve good outcomes for people. For example, social working teams, community nurses, occupational therapists, wheelchair services, GPs and dentists. The registered manager told us, "We support families of those we care for to access additional services by signposting them onward e.g. to Continence Team." People benefitted from this when they had been buying their own continence products.
- Social care professionals gave positive feedback about the high level of professionalism demonstrated by the registered manager and staff team. One professional said, "In my professional capacity in my dealings with [registered manager] and Cherish Social Care, I have always found them to be extremely responsive, caring and committed to providing a first class, person centred service, whether that be in response to an emergency, temporary situation or regarding ongoing, long term support. I would not hesitate to pass on Cherish Social Care contact details to those in need of support."