

Homecare4U Limited

# Homecare 4U 8 Cavendish Court

## Inspection Report

South Parade  
Doncaster  
DN1 2DJ  
Tel: 01302 376593

Date of inspection visit: 08/05/2014  
Date of publication: 08/06/2014

### Contents

#### Summary of this inspection

Overall summary	Page 2
The five questions we ask about services and what we found	3
What people who use the service and those that matter to them say	7

#### Detailed findings from this inspection

Background to this inspection	9
Findings by main service	10

# Summary of findings

## Overall summary

Homecare4U 8 Cavendish Court is situated on the outskirts of Doncaster town centre. The service provides personal care to people in their own home.

The service had a registered manager in post at the time of inspection. A registered manager is a person who has registered with the Care Quality Commission to manage the service and shares the legal responsibility for meeting the requirements of the law with the provider.

Our inspection team was made up of an inspector and an Expert by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

As part of the inspection we spoke with eight people who used the service by telephone to ask them and their family members for their views about the service. The feedback they gave us was very positive.

The people we spoke with told us they felt happy and safe with the service. They said they trusted their care workers, who treated them with respect and dignity.

People were encouraged to make their views known about their care. They had contributed to their assessments and care plans about how they should be given care and support. This helped to make sure their packages of care were designed to include their preferences.

People's care plans had a good level of information about how they should be supported and this helped to make sure the care staff knew how to meet people's needs.

People told us staff were caring and kind. They said the care staff provided them with the support they needed, gave them the privacy they needed and encouraged them to be as independent as they could be.

People had a chance to say what they thought about the service. We found the service learned from its mistakes, using complaints and incidents as an opportunity for learning and improvement.

The people we spoke with had no complaints and said they were very happy with the service.

# Summary of findings

## The five questions we ask about services and what we found

We always ask the following five questions of services.

### **Are services safe?**

Homecare4U 8 Cavendish Court was safe because they made sure staff had training and understood how to safeguard the people they supported. Staff also knew how to 'blow the whistle' if they felt issues were not being dealt with properly.

The eight people we spoke with said they felt safe in the care of the staff from Homecare4U 8 Cavendish Court. They said they felt their rights were respected. One person said, "I trust the staff. They always bring me a receipt when they do my shopping."

Key staff, including the registered manager, had undertaken training in Mental Capacity Act (2005) (MCA) and Deprivation of Liberty Safeguards (DoLS). These safeguards make sure that people, who lack capacity, are protected and are not deprived of their liberty unlawfully. Staff were clear that they should uphold people's right to make their own decisions and had a good knowledge of the Mental Capacity Act.

The staff we spoke with said they said were aware of any risks associated with people's care because they read the risk assessments that were part of people's care plans. They told us they reported any changes they noticed in people's health or wellbeing to the branch manager. This included any increased risks, and any changes in people's ability to make their own choices and decisions.

We were told by the people who used the service and by the care staff that any concerns and issues were dealt with effectively. The staff we spoke with confirmed the management team were making improvements to people's risk assessments. This was so staff had more information about what to do if people displayed behaviour which was challenging to the service.

Care staff had received training in infection prevention and control and regular 'spot checks' were done to make sure care staff used disposable gloves and aprons as they should. The people we spoke with all said they did.

We saw that pre-employment checks were completed for staff before they started work for the service. This included references being taken up and Disclosure and Barring Service (DBS) checks for each staff member. When new staff started work they received induction training, and a period of 'on the job' shadowing with an experienced care worker before they were allowed to work unsupervised.

# Summary of findings

## Are services effective?

The service was effective as people were involved in the assessment about their care, support and health needs and involved in producing their care plans and reviews.

One person said, “I am a 93 year old and I do not need a lot of help, but the help I get from my girls is professional, and I am aware what is good as I was a manager.”

People told us they were happy with the care and support they received from Homecare4U 8 Cavendish Court and said their needs were met. They said the care staff had a good understanding of their care needs.

People were supported to use local advocacy services if they needed to, so they had people who could speak up for them and the staff we spoke with were aware of the need to be respectful of people’s wishes and feelings.

Staff had received training in the core subjects needed to provide care to people. This included health and safety and fire, moving and handling, basic first aid, food hygiene, infection control, safeguarding and medication management. Staff also had training to help them meet the specific needs of the people who used the service. The branch manager told us they matched care staff who had the specific skills and training to help them meet the needs of the person using the service.

## Are services caring?

The people we spoke with told us the staff were caring. They said they were happy with the care and support they received from Homecare4U 8 Cavendish Court and said the care staff had a good understanding of their care needs. They told us they were treated with kindness and compassion and that their dignity was always respected. They felt staff listened to and valued what they said. They said the care staff helped them to be as independent as they wanted to be.

When asked if they thought the service was caring, one person said, “They treat me as if I am their mum, which is with loving care.”

People’s records showed they were asked about their satisfaction with the service by telephone, at ‘spot check’ visits and at reviews. They and their relatives were also asked to complete annual satisfaction surveys and people’s feedback was used to improve the service. One person’s family member said, “We have had spot checks from the manager to see how the staff are performing and this we thought was a good way of managing the staff” and “I thought the questionnaire they sent to ask how things were was an excellent idea.”

# Summary of findings

We saw that people had thorough, detailed care plans about all aspects of their needs. These set out how each person should be supported. Ways of making sure people's privacy was protected was included of people's care planning. People also told us the care staff were very respectful of their religious and spiritual beliefs.

We saw clear guidance for staff about how to respect people's privacy, dignity and human rights. This was part of staff's induction and on-going training.

Staff were aware of the importance of good communication, giving people choices, maintaining people's dignity and making sure people had privacy.

## **Are services responsive to people's needs?**

People told us staff asked their views and listened to and acted on them. People's needs had been assessed before they were provided with a service. Staff from the service told us they spoke with people about what was important to them and how they preferred their care to be provided. They encouraged people who used the service and those that matter to them to make their views known about their care.

People's capacity was considered under the Mental Capacity Act. When a person did not have capacity, referrals were made to the local authority to help make sure decisions were made in the person's best interests. People had access to independent advocates, who were able to speak up on their behalf.

Complaints were taken seriously and investigated fully. We could see Homecare4U 8 Cavendish Court took account of complaints and comments to improve the service.

All the people we spoke with said they were aware that if they had concerns, they could speak to the branch manager and felt able to do so should the occasion arise. One person said, "I have telephone numbers in my care plan and I can call the agency managers if I am not satisfied with the care." Another told us, "I have never had to make a complaint as I am happy with the staff and managers."

## **Are services well-led?**

The eight people we spoke with said they had no concerns about the management and staff of the service and they thought the service was well managed.

We saw that the service used lots of ways to ask people for their views about their care and that they acted on what people said.

# Summary of findings

Homecare4U 8 Cavendish Court had a clear set of values. These included involvement, compassion, dignity, respect, equality and independence for people. The staff had a good understanding of these values.

Staff told us they felt well supported and valued and there was an open and honest culture. They said the branch manager was supportive and approachable.

# Summary of findings

## What people who use the service and those that matter to them say

We sent survey questionnaires to people who used the service and 24 people returned them to us. Their feedback was positive. All but one person said they usually had the same staff and that the care staff were very good.

As part of the inspection we also spoke with eight people who used the service and members of their households by telephone. Everyone we spoke with said they felt safe in the care of the staff who came to their homes. Their comments included, "The young ladies that help me dress in the mornings are very kind."

"I trust the staff; they always bring me a receipt when they do my shopping."

"I am informed by telephone if the regular staff are going to be replaced and they will show me an ID."

"The managers send me a rota that I can be aware who is coming and this is comforting."

"I have telephone numbers to call in an emergency,"

"My husband's carers are very kind, the way they care for him is safe, and I am sure that they are well trained."

The eight people we spoke with said they had a care plan. One person said, "I have a care plan and I have been able to put my suggestions in the plan." Another person said, "I am a 93 year old and I do not need a lot of help, but the help I get from my girls is professional, and I am aware what is good as I was a manager. One person's relative said, "My mother's care plan was reviewed two weeks ago and we have asked for an extra day, as she is needing more help with washing and dressing." Another relative said, "It was agreed when mum was in hospital that she would need help at home. We discussed this with the social worker and the manager of the agency, and our choice was for the carers to come morning and evening, this was written in the care plan and we are pleased with the care she receives." Another relative said, "The equipment in our home that they use to help my husband - they do it well and I am sure if they were not trained they would not be so efficient.", "My experiences have been that they are good time keepers."

When asked if the staff were caring, comments people made included, "The carers are very helpful."

"They treat me as if I am their mum, which is with loving care."

"I am treated with dignity and respect and when they come they wipe their feet on the mat and hang their coats up at the back of the door, this means that they also respect my home."

"They do have limited time, but we can have a conversation, which matters very much to me as I live alone."

"I think the care they give me with assisting me to get in and out of bed they do it with a great deal of compassion and I have no reason to feel otherwise."

"I have been with this agency for many years and the ladies are the same ladies most of the time, only if they are on holiday or sick that I have different ones and this means so much to me as we have a good relationship and they know my likes and dislikes."

"My family and I are very pleased with the carers, they always ensure that the pads are disposed of and the bedroom is left clean and tidy and we view this as a mark of respect for my aunt."

When discussing if the service was responsive to people's needs one family member said, "We were visited by the manager and asked if we are satisfied with the mum's care and we said it was good." Another said, "We have had spot checks from the manager to see how the staff are performing. We thought this was a good way of managing the staff."

Other comments included, "I thought the questionnaire they sent to ask how things were was an excellent idea."

"I have telephone numbers in my care plan that I can call the managers if I am not satisfied with the care."

"I have never had to make a complaint as I am happy with the staff and managers."

All the people we spoke with said they were aware that if they had concerns, they could speak to the registered manager and felt able to do so, should the occasion arise. Comments included, "The staff member who comes to my home is kind and polite. They have to collect my

## Summary of findings

repeat prescription from my Doctor and take it to the pharmacy and they do this very well” and, “The staff help mum to take her medication and there has never been a problem.”



# Homecare 4U 8 Cavendish Court

## 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 of the Health and Social Care Act 2008. It was also part of the first testing phase of the new inspection process CQC is introducing for adult social care services. We undertook the inspection visit on 8 May 2014.

We inspected the service twice in 2013. At that time we found the system to recruit staff was not safe. We told the provider to address this. When we inspected in February 2014 we found the provider had addressed the shortfalls. We saw background checks had been carried out on staff before they started to work for the service. This included obtaining references and a Disclosure and Barring Service (DBS) check to ensure they were suitable to work with vulnerable people.

Before this inspection 24 people responded to the survey questionnaires we sent them. We also asked the local Healthwatch if they had any information to share with us about the service and spoke with representatives of the local authority who commissioned people's packages of

care. They told us they had asked the service to make improvements in the way they recorded information. The service had responded well and the improvements had been made.

We looked at the information we hold about the service, including the notifications sent to us by the registered manager and information we had received from the local authorities about safeguarding alerts, referrals and investigations.

Our inspection team was made up of an inspector and an expert by experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

On the day of the inspection visit we spoke with the registered manager and the branch manager. We looked at five people's written records including their initial assessments, care plans and risk assessments and six staff personnel files that included records of recruitment and training. We also looked at the staff training records, a number of policies and procedures, the service's business continuity plan and the staff handbook.

As part of the inspection we spoke with eight people who used the service by telephone to gain their views. We also spoke with five care staff by telephone.

# Are services safe?

## Our findings

When asked if they felt safe with the care workers the eight people we spoke with said they did. One person added, “I trust the staff. They always bring me a receipt when they do my shopping.”

One person’s relative told us, “My husband’s carers are very kind, the way they care for him is safe, and I am sure that they are well trained.”

The five care staff we spoke with knew what to do when safeguarding concerns were identified. They told us they had training and there were policies and procedures for them to follow about safeguarding people and about how to ‘blow the whistle’ if they felt issues were not being dealt with properly. We also saw there was guidance for staff about dealing with allegations of abuse in the staff handbook.

The records we saw confirmed care staff had training in safeguarding people from abuse. This was part of the induction training for all staff and regular updates had been provided. We saw the staff induction work book and this included exercises to help make sure they were aware of the law and the policies of Homecare4U on safeguarding people from abuse. The work book included how to recognise the signs and to understand the nature of abuse and neglect, and to make sure staff knew how to respond to and report suspected abuse or neglect.

People said they felt their rights were respected. The registered manager, branch manager and two senior members of the care team had undertaken training in Mental Capacity Act 2005 (MCA) and Deprivation of Liberty Safeguards (DoLS). These safeguards make sure that people, who lack capacity, are protected and are not deprived of their liberty unlawfully. We also saw guidance for staff about the MCA, including DoLS, in the policies and procedures; these were designed to help staff understand the legal framework and their role in protecting people’s rights. There was also an emphasis on respecting and promoting people’s rights and interests in each person’s individual care plan and in the code of conduct, which was part of the staff handbook.

All of the staff we spoke with had knowledge of the MCA and said they were clear they should uphold people’s right

to make their own decisions. Although they told us they had not undertaken specific, external training about MCA and DoLS, they told us this was included as part of the safeguarding training they had completed.

One staff member told us they had just completed a National Vocational Qualification (NVQ) in care at level 2. Another said they had started their NVQ level 2.

Staff were clear that if they noticed changes in people’s ability to make decisions they would report this to the branch manager, so that other professionals could be made aware. The branch manager said there had been instances when people had ‘best interests meetings’ and staff from the service had been involved.

We looked at how risks were managed. The branch manager told us each person had risk assessments in their care plans and records that were kept in their homes. We saw the written records kept at the office for five people. Each person had risk assessments that were specific to their needs and lifestyles. These told the staff about the risks for each person and how to manage and minimise these risks.

Staff we spoke with confirmed that people who used the service had risk assessments included in their care plans and that they had a copy in their homes. These helped the staff to be aware of the risks and how to manage them. They said they would report any risks or potential risks to their managers.

The branch manager told us they were working on improving people’s risk assessments to make sure people who could display behaviour that challenged had a clear management plan. They showed us good examples of improved risk assessments and behaviour management plans for two people who used the service.

Staff had training and access to clear guidance in the prevention and control of infection. Senior staff did regular spot checks to observe staff knowledge and practice and gain feedback from people who used the service. These included infection control and the use of personal protective equipment (PPE). People we spoke with told us the care staff used disposable gloves and aprons.

We looked at six staff personnel records, three of which were for new staff members. The records showed that pre-employment checks were carried out on staff before they had started work with Homecare4U 8 Cavendish

## Are services safe?

Court. The recruitment system included applicants completing a written application form with a full employment history and a face to face interview to make sure people were suitable to work with vulnerable people. We saw that interview notes were kept on each staff member's records to show that the recruitment process tested candidate's suitability for the role they had applied for.

The staff members we spoke with told us they had been interviewed during their recruitment. They said it was quite a stringent process. One said, "They asked me some very tricky questions actually."

At the time of our visit the registered manager was contacting referees for applicants by telephone. They explained they were recruiting new care staff and told us they requested written references as well as contacting applicants' referees by telephone for their feedback.

The branch manager explained that they were not always able to get responses to requests for information from referees. They told us they e-mailed referees and

attempted to contact them by telephone, but some did not respond. We looked at two staff personnel files where this had been the case. There was evidence that the branch manager had initially requested two references for each of the two applicants, There were no recorded responses to one of the two reference requests for each applicant. The branch manager had subsequently requested information about the character of each applicant from other, alternative referees. These references had been accepted and both applicants had been employed by the service.

Disclosure and Barring Service (DBS) checks were in place for each staff member. The records we saw showed that before new staff started work they received induction training. One staff member told us they had undergone their induction training in the office, while they waited for their DBS check and references to come through. The induction included core training, such as health and safety, caring for people with respect and dignity and safeguarding people from abuse. Staff also received a period of 'on the job' shadowing with an experienced care worker before they were allowed to work unsupervised.

# Are services effective?

(for example, treatment is effective)

## Our findings

In people's written records we saw there was a summary of the person's needs from those making the initial request for the service. This had been included in the Homecare4U 8 Cavendish Court assessment of people's needs and included in people's care plans. There was information in the assessments and care plans that people and those who mattered to them had contributed about the person's preferences.

The people we spoke with said they had a care plan. They told us they had been involved in the assessment and in putting their care plans together. One person said, "I have a care plan and I have been able to put my suggestions in the plan."

One person told us a member of the team from Homecare4U 8 Cavendish Court had visited them before the service started. They had talked about their needs and their views were included in their assessment to help plan for their service.

Staff members said it was usually the branch manager who initially visited and assessed people's needs. They also said it had been the branch manager who accompanied staff and introduced them to people when they first visited.

The care plans we saw had been reviewed and updated on a monthly basis, and as necessary, in response to any changes in people's needs. There was evidence people and those who mattered to them had been asked if they were satisfied with the service, if it met their needs and if there was anything that needed to be improved. One person's relative said, "My mother's care plan was reviewed two weeks ago and we have asked for an extra day, as she is needing more help with washing and dressing." Another relative said, "It was agreed when mum was in hospital that she would need help at home. We discussed this with the social worker and the manager of the agency, and our choice was for the carers to come morning and evening. This was written in the care plan and we are pleased with the care she receives."

The registered manager told us the format of the care plans had been improved to include more information about people's preferences, backgrounds and interests and more detail about what was important to people. They told us they were going through the process of introducing the new care plan for people and that most people's plans had been changed to the new format.

Staff we spoke with said they had regular training updates in health and safety and fire, moving and handling, basic first aid, food hygiene and nutrition, infection control, safeguarding and medication management.

Of the five people whose files we looked at two had had some support from advocates. One was an Independent Mental Capacity Advocate (IMCA). The person's local authority had arranged for the IMCA to advocate for them.

One of the members of care staff we spoke with said most people had help from their relatives with managing their medication and money. They said one person they supported also had an independent advocate,

There was a programme of staff supervision and appraisal. The staff personnel records we saw showed that staff had one to one supervision sessions with their line managers and annual appraisals. They had received training in the core subjects they needed to provide care to meet people's needs. One relative said, "The equipment in our home that they use to help my husband - they do it well and I am sure if they were not trained they would not be so efficient." One person said, "I am a 93 year old and I do not need a lot of help, but the help I get from my girls is professional, and I am aware what is good as I was a manager.

One person's relative told us when new staff came they 'shadowed' the experienced staff for a number of weeks before they provided care. The staff we spoke with were confident in their ability to carry out their role and had a good understanding of people's care and support needs. They showed a good awareness of the need to be respectful of people's wishes and feelings.

# Are services caring?

## Our findings

All the people we spoke with said they felt the staff were caring. They said they were treated with kindness and compassion and their dignity was always respected. Comments people made included, “The carers are very helpful.”

“They treat me as if I am their mum, which is with loving care.”

“They do have limited time, but we can have a conversation, which matters very much to me as I live alone.”

“I think the care they give me with assisting me to get in and out of bed they do it with a great deal of compassion and I have no reason to feel otherwise.”

One person’s relative said “My family and I are very pleased with the carers; they always ensure that the bedroom is left clean and tidy and we view this as a mark of respect for my aunt.”

One person told us they had a good relationship the care staff. They said, “I have been with this agency for many years and the ladies are the same ladies most of the time, only if they are on holiday or sick that I have different ones and this means so much to me as we have a good relationship and they know my likes and dislikes.”

Another person said, “I am treated with dignity and respect and when they come they wipe their feet on the mat and hang their coats up at the back of the door, this means that they also respect my home.”

People also said the staff were respectful of their religious and spiritual beliefs. Information about people’s religious and spiritual beliefs was recorded. We looked at the care plan for one person with specific religious beliefs, and saw that these were clearly recorded in their assessments and care plan. The staff we spoke with were aware of the person’s beliefs. There was also information about each person’s history in their care plans; to give staff further knowledge about what was important to the people they were caring for.

We saw clear guidance for staff about respecting people’s privacy, dignity and human rights and about making sure information about people was treated in confidence. We asked care staff how they made sure people’s privacy and dignity was respected and promoted. They were aware of the preferences of the people they provided care to. They explained about giving people choices and talking to people to make sure they knew what was happening. They told us about the importance of maintaining people’s dignity and making sure people had privacy. Staff said they made sure curtains and doors were closed and made sure people were covered over, as much as possible, while their personal care was being carried out.

One staff member explained they worked in a particular area alongside a small number of other, regular care staff. They said this helped with providing a consistent service to people. They said, “I have been able to get to know the people I visit very well and build good relationships with them. I make sure they are cared for properly.”

# Are services responsive to people's needs?

(for example, to feedback?)

## Our findings

When asked if they thought the service was responsive to people's needs people confirmed it was. All the people we spoke with told us staff asked their views and acted on them and that their needs were assessed before they received the service. The written records we saw showed staff from the service spoke with people about what was important to them and clearly showed information about how people preferred their care to be provided.

People said they were often asked about what they thought of the care they received, and if it met their needs. One family member said, "We were visited by the manager and asked if we are satisfied with the mum's care and we said it was good." Another said, "We have had spot checks from the manager to see how the staff are performing. We thought this was a good way of managing the staff."

People's capacity was considered under the Mental Capacity Act 2005. The registered manager and the staff we spoke with explained if they thought there were issues with a person's capacity; a referral would be made to the local authority to help make sure decisions were made in the person's best interests. The registered manager showed us the written records for two people who had support from independent mental capacity advocates (IMCAs) who were able to speak up on their behalf.

One member of care staff told us they read people's care plans and risk assessments and liked to sit down and talk with people, as this helped to really get to know them.

Another member of care staff said, "I talk to people. I ask them what they want and like, and I always make sure I tell them what I'm doing, so they are reassured and know what to expect."

People were given an information pack when they began receiving the service. This explained the aims and objectives of the service, what services Homecare4U 8 Cavendish Court could provide. It also provided telephone contact numbers and told people how to complain. The registered manager told us the information could be provided in other formats, such as large print or other languages, to suit people's individual communication needs.

We saw the record of complaints kept by the service and reviewed how one complaint was dealt with. This showed when a complaint was made it was taken seriously and investigated fully. We could see that learning from any complaints, incidents and investigations was fed back to staff at meetings and at individual staff supervision, if appropriate.

The people who used the service and family members who responded to our questionnaires said that they were aware that if they had concerns, they could speak to the branch manager. They said they felt able to do so should the occasion arise. Nobody had any concerns to tell us about during the inspection. One person told us, "I have telephone numbers in my care plan that I can call the managers if I am not satisfied with the care. Another said, "I have never had to make a complaint as I am happy with the staff and managers."



# Are services well-led?

## Our findings

At the time of our inspection the service had a registered manager. They worked with a branch manager, who ran the service on a day to day basis. The staff we spoke with said the branch manager was the person they had most contact with.

Staff told us the branch manager was supportive and confirmed they would be confident to approach them with any issues or concerns. They said there was an open and honest culture. For instance, one staff member said they had raised some issues with the branch manager recently. These included concerns about a colleague's performance and they said these were looked into. They told us they had also raised issues about the way recent rotas were organised. They said, "Overall they are a good, caring service to work for. There are areas that could be improved, but they are 'little tweaks' really."

We met and spoke with the registered manager and the branch manager. They told us Homecare4U 8 Cavendish Court was a relatively new service and they wanted it to be the best it possibly could be. They said they were learning and improving the service all the time. They told us the values of the service included involvement, equality and independence, dignity and respect for people. They explained these values ran through all of the policies and procedures of the service and through the in house induction training staff were provided with.

The registered manager told us they looked for a caring attitude and an ability to communicate well with people in job applicants. They said once employed, new staff were monitored particularly closely during their induction training and in their first weeks and months of employment. The records we saw conformed this.

The registered manager said they tried to make sure the service was focussed on the needs and preferences of each person, was inclusive and was caring. We also spoke with several staff who said the values of the service were clear. They said caring and respect for people's rights, dignity and privacy were part of their induction and on going training, and part of the discussion in staff meetings.

All the people who used the service and family members we spoke with said they had no concerns about the management and staff of the service. One person commented, "The staff member who comes to my home is kind and polite."

The branch manager told us they completed audits about all aspects of the running of the service. This included information about complaints, safeguarding issues, incidents and care documentation. We saw an audit of the written daily logs and medication logs. We found that areas for improvement that had been identified about record keeping; these had been raised with staff at staff meetings and with individual staff as necessary. We saw evidence that risk assessments and care plans had been updated in response to any incidents which had involved people who used the service.

None of the people who used the service raised concerns about the levels of staff available or the consistency of staffing. The registered manager told us that as the service expanded, they recruited care staff. They said the amount of care people received was assessed by and agreed with the local authorities, depending on people's needs. When there was a shortfall, for example when staff were off sick or on leave, existing staff stepped in to work additional hours.

We saw there were plans in place to help managers and staff deal with emergencies. There was a management on-call system in case staff needed management support outside of office hours. People who used the service told us they were given telephone numbers for the service, including a number to call outside of office hours. One person who used the service told us, "I have telephone numbers to call in an emergency."

We saw the service had effective ways to seek the opinions of the people who used the service and this had helped to support recent improvements. People confirmed they were often asked for feedback by the managers of the service. They told us that they were asked to fill in questionnaires about their view of the quality of the service. Additionally, members of the management team phoned and visited periodically to ask if people were satisfied with their care. The records we saw confirmed this and that managers had undertaken 'spot checks' to observe staff working with people, and that people's feedback had been sought at these visits.

## Are services well-led?

The results of the questionnaires Homecare4U 8 Cavendish Court sent to people showed that overall; people were satisfied with the standard of care and support they received. They were very complimentary about the care staff. The feedback we saw showed staff were deployed well across the local area to make sure people received the care they needed.

There was evidence that the registered manager took account of complaints and comments to improve the service. The team learned from incidents and

investigations and appropriate changes were implemented. We saw the minutes of the staff meetings, including evidence of learning from incidents and accidents and complaints. Actions were reviewed at each meeting.

Staff we spoke with told us Homecare4U 8 Cavendish Court also kept them up to date using team meetings, training updates, and one-to-one supervision. The branch manager also told us most staff visited the office weekly and they used these times to provide quick updates for staff.