

Empowering U Care Limited

# Empowering U (Telford & Shropshire)

## Inspection report

Empowering U Care Unit 10  
Queensway Link Industrial Estate, Stafford Park  
Telford  
TF3 3DN

Tel: 01952980800  
Website: [www.empoweringu.co.uk](http://www.empoweringu.co.uk)

Date of inspection visit:  
04 February 2020

Date of publication:  
11 March 2020

## Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service effective?

Good ●

Is the service caring?

Good ●

Is the service responsive?

Good ●

Is the service well-led?

Good ●

# Summary of findings

## Overall summary

### About the service

EmpoweringU provided personal care and support to 16 people living in their own homes at the time of the inspection. Some people received 24-hour support for 7 days a week. These packages were supported by dedicated teams of support staff.

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 very satisfied with the service provided by the agency and received safe and effective care and support to meet their individual needs.

People were protected from harm by staff who were confident to recognise, and report abuse, and processes were in place to support staff to share concerns. Senior staff worked effectively and professionally with external professionals to ensure people were safeguarded.

People received their medicines safely and risks to people's health and wellbeing were continually identified and reviewed. Risks were proactively managed.

People received consistent support from a staff team who were well trained to meet their individual needs and who provided a responsive service as people's needs changed.

Staff were safely recruited to ensure they were appropriate, and a good match, to support people who used the service. Staff were well supported by managers and colleagues to deliver good care.

People's needs were assessed and documented, and care plans were detailed so staff could deliver effective support based upon individual needs. People's individual cultural, social and dietary needs were assessed and supported effectively and in line with their own preferences.

Staff worked with health and social care professionals proactively to ensure consistency and ensure people received appropriate and safe support.

Staff were caring and respectful, promoting people's privacy, dignity and encouraging their independence.

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.

Staff sought people's consent before supporting them and decisions about people's care and treatment were made in line with law and guidance.

People knew how to raise a concern and always felt listened to. Information could be made available in different formats to make it accessible.

People, relatives and social care professionals felt the service was very well managed. People who used the service had regular contact with the manager and staff had regular opportunities to share their views about the service.

Systems and processes were in place to enable the provider, and the manager, to monitor the quality and effectiveness of the service.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

Why we inspected

This was a planned inspection.

Rating at last inspection

This was the first inspection for this agency since registering with CQC in March 2019.

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?

The service was safe.

Details are in our safe findings below.

Good ●

### Is the service effective?

The service was effective.

Details are in our safe findings below.

Good ●

### Is the service caring?

The service was caring.

Details are in our safe findings below.

Good ●

### Is the service responsive?

The service was responsive.

Details are in our safe findings below.

Good ●

### Is the service well-led?

The service was well-led.

Details are in our safe findings below.

Good ●

# Empowering U (Telford & Shropshire)

## 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 carried out by one inspector.

#### Service and service type

This service is a domiciliary care agency that provides personal care to people living in their own homes.

The service had a manager and they were in the process of applying for registration with the Care Quality Commission. This means that they and the provider will be legally responsible for how the service is run and for the quality and safety of the care provided.

#### Notice of inspection

We gave the service 24 hours' notice of the inspection. This was because we needed to be sure that the provider or registered manager would be in the office to support the inspection. We also wanted time to obtain contact details of people who used the service and relatives, where appropriate.

Inspection activity started on 4 February 2020 and ended on 11 February 2020. We visited the office location on 4 February 2020.

#### What we did before the inspection

We used the information we held about the service to plan the inspection. This included checking for any

statutory notifications that the provider had sent to us. A statutory notification is information about important events which the provider is required to send us by law. We asked the local Healthwatch for any information they had which would aid our inspection. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England. We used all this information to plan our 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.

As part of the inspection we spoke with two people who used the service and three people's relatives. This was to establish their views and feedback about the care and support they received.

During the inspection

During the inspection we spoke with the manager the area manager and two support coordinators. We viewed a range of records. This included extracts from three people's care records. We also looked at quality assurance records and three staff information files.

Following the inspection

Following the inspection, we spoke with two people who used the service and received written feedback from six people. We spoke with two staff and received testimonials from eight. We also spoke with two social care professionals and received written feedback from one other.

# 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 as good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People felt safe with the staff who supported them. They were confident that staff could meet their needs safely. One person told us, "I always feel safe when they [the staff] are around."
- People were protected from the risk of harm and abuse because staff were confident they could recognise and report abuse, in line with the providers policies and procedures.
- Staff had received training to protect people from harm.
- Social care professionals told us how well the provider managed allegations of harm or abuse. One professional told us, "Allegations were handled well." Another professional told us, "They have good responses." Safeguarding managers and the police had both fed back to the service directly after a recent investigation praising the manager and provider for their response to keep people safe.

Assessing risk, safety monitoring and management

- People had risks to their personal safety identified and managed effectively. One person told us, "I'm a falls risk. They [the staff] are always there to help me. They check my home to make sure it is safe." A relative said, "They assess and review situations dynamically. They've got health and safety right and risk assessments are good."
- Staff were knowledgeable about risks associated with the people they supported and assessments and plans clearly identified risks.
- The registered manager reviewed risk assessments to ensure they reflected people's changing needs and they liaised with the person and, if necessary, their family, staff and other professionals to do this. Social care professionals told us how the manager actively managed risks to enable people to have opportunities to lead their 'best lives'.

Using medicines safely

- People received varying levels of support to manage their medicines. When people received support, they told us staff administered it safely and within the prescribed guidelines.
- Staff confirmed they had received training and competency checks before they could administer medicines. They felt that the training gave them the confidence to support people as they required with their medicines.
- The manager showed us how they reviewed medicines administration records and demonstrated what actions they had taken when improvements were identified.

Staffing and recruitment

- People received support from staff in sufficient numbers to meet their care and support needs safely.

- People told us staff arrived when scheduled and never rushed their visits. One person told us, "Our care package is going well and everyone turns up when they are meant to."
- Staff had been recruited safely and records reflected evidence obtained to demonstrate their suitability prior to them working with vulnerable people.

#### Preventing and controlling infection

- Staff had received training in safe practices to control the risk of infection.
- Staff used personal protective equipment, such as gloves and aprons to enable them to protect people, and themselves, from risks of cross infection.

#### Learning lessons when things go wrong

- The manager told us they always reflected on situations to see what they could have done differently or better. Social care professionals shared examples of how reviewing support from previous providers had meant the EmpoweringU team could deliver more effective care and support.
- Staff reflected on practice and told us how they accessed on line information to document 'useful information'. One staff member told us this enabled them to review best practice guidelines and tips as to how to deliver more effective care and support.

# 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 as 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 and identified prior to, or at the start of the service. This meant the staff had appropriate information about how to meet a person's needs safely and effectively. People told us that staff were well trained.
- Staff told us how the manager passed information on to them about people's assessed needs and people reflected positively on staff's ability to meet their needs meaning the assessment process was effective.
- People told us they had care plans and relatives said they had been asked to input into these to ensure they reflected the person's exact care requirements. Given some people had complex support needs, health and social care professionals also told us they had involvement in developing support in line with people's needs.

Staff support: induction, training, skills and experience

- People told us that staff were well trained and knowledgeable about their individual needs. Relatives also confirmed this to be their experience.
- Staff spoke very positively about training opportunities that equipped them for their roles. They also said that they received ongoing and refresher training to ensure their knowledge was current. One staff member said, "The training is brilliant." Another said, "I feel part of a well-trained and well supported team."
- Staff received a thorough induction when they started working for the agency.
- Staff felt well supported because they attended one to one meetings, team meetings and observations while they were working. This meant they had access to support and reassurance they were providing effective care.

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

- Where people received support from staff to prepare meals they received appropriate help to ensure they maintained their health.
- Staff knew people's dietary needs and preferences, and this enabled them to promote a healthy and varied diet in line with individual tastes as required.

Staff working with other agencies to provide consistent, effective, timely care

- Staff worked with outside agencies to ensure people's needs and changing circumstances were shared when appropriate. For example, they consulted with community nurses when they had concerns about people's skin condition or their changing mobility.
- Records of liaisons with external agencies were recorded in care plans and in records maintained at the office. One social care professional told us, "As a provider I find them modern and in line with our ethos as a

local authority in identifying and using a person's strengths to ensure they have a meaningful life."

Supporting people to live healthier lives, access healthcare services and support

- People receiving complex care and support were supported by staff to access medical support for them to remain in good health.
- Relatives confirmed support was effective and an advocate shared positive outcomes for one person as staff worked effectively with external agencies.

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 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. Where people may need to be deprived of their liberty in order to receive care and treatment in their own homes, the DoLS cannot be used. Instead, an application can be made to the Court of Protection who can authorise deprivations of liberty.

We checked whether the service was working within the principles of the MCA and found that they were.

- People were supported to be involved in decision making as far as they were able. When people were unable to do so, appropriate support was sought. This usually meant identified family members or an independent advocate.
- People were supported to make day to day decisions using their preferred communication methods and staff respected decisions made to ensure positive outcomes for people.

# 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 as 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

- People were very happy with the way that they were supported. One person told us, "Staff are very kind. They are regular carers and I know them well," Another told us "I have compassionate carers."
- Staff respected and promoted people's equality and diversity by treating people as individuals and enabling people to express their individuality and cultural identity. For example, people were supported to choose their own clothes and wear their hair how they preferred and in line with their cultural beliefs.
- Staff were aware of people's individual needs, including their, sexual, cultural and religious needs. The manager told us that protected characteristics would be considered as part of delivering a personalised service. A relative told "Care plans and assessments had a cultural element. They [staff] were not phased and they catered for this. They recognised this was important."
- The manager and the provider were very passionate about supporting people to 'live their best life' and in conversations they demonstrated how they did this. For example, they supported one person to get out and about to have experiences of every day living that they had always wanted to.

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

- People were involved in making decisions about how their care and support was delivered.
- Staff told us how they always offered people choices and delivered care with consideration for people's personal preferences and routines.

Respecting and promoting people's privacy, dignity and independence

- People told us staff respected their privacy and dignity. One person told us, "They always treat me with dignity and respect. They don't make me feel embarrassed." Another said, "They are discreet and this makes me feel comfortable."
- People were encouraged to do what they could for themselves and staff offered support when needed. An advocate told us, "They are definitely providing the right care. They are completely committed to promoting independence."

# 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 as good. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- Care and support was responsive to people's individual needs and wishes and people said that support was adapted to accommodate their changing needs.
- People, and their relatives, were involved in the development of care plans and plans were flexible and personalised. Plans were reviewed as needs changes so staff could respond to these changes. Relatives, advocates and social care professionals were also involved in developing person centred plans.
- Social care professionals considered the service to be responsive to meet people's needs. One professional told us, "My experience of them as a service has been positive, they have been a responsive service which supports individuals in a person centred and outcome focused way."

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 provider met the accessible information standard. The manager told us that information could be made available in different formats, including large print, should this be required. They told us how they used an interpreter service when supporting one person and a senior staff member told us they had carried out one person's assessment as they spoke the person's first language. They said this reassured the person that their needs had been reflected.

Improving care quality in response to complaints or concerns

- People told us that any concerns they had would be responded to promptly and to their satisfaction. One person told us, "I did have concerns. I told [manager] who sorted it in a very friendly way. I felt ok doing it." Another said, "If I have a problem, I know they would sort it there and then."
- People said they would speak the manager, or any of the staff team, if they had any concerns. They told us staff were very approachable and responsive to issues.
- The complaints procedure had been shared with people in the service user guide.

End of life care and support

- At the time of this inspection no-one was receiving end of life care. The manager told us they would incorporate end of life needs and wishes into care plans if this was required.

# 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 as good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care

Planning and promoting person-centred, high-quality care and support with openness; and how the provider understands and acts on their duty of candour responsibility

- People received high quality care that met their needs and wishes. One person told us the agency was, "The best I have had." A social care professional reflected that EmpoweringU was an agency they had confidence in to deliver 'good quality personalised care'.
- The manager and the provider were aware of their duty of candour. Duty of candour means the organisation has a duty to be open and transparent in relation to care. People who used the service reflected that the manager was always open and honest with them.

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

- The manager understood the responsibilities of their role and acted in accordance with them. They were aware of the need to send notifications of incidents, events or changes that happen at the service to us within a reasonable timescale and as required by law.
- The manager had systems in place to gather information as to the quality of the service provided. They, and their senior team, carried out spot checks and requested feedback informally and formally. Staff were clear about their roles and knew when they should share information to ensure people's safety and protection.
- We saw surveys that had been sent to people and these reflected positive outcomes. Audits also identified areas where improvements could be made, and we saw how the manager had acted to implement these.

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

- People's views and opinions were valued, and we saw when suggestions for improvements had been made they had been actioned. People told us they felt listened to by the manager and this reassured them that changes would be made to their care and support. One person told us, "I am extremely pleased with the company. Always on time, efficient and they listen to me."
- Assessments and care plans considered people's equality characteristics meaning these needs could be accommodated and supported during care delivery.
- Staff had opportunities, both informally and formally to discuss issues and make suggestions for improvements and changes. Staff felt valued and that their views were listened to. Staff told us they attended staff meetings where they were consulted, and information was shared with them about developments and changes. One staff member told us, "Your comments are valued, both as an individual

and as part of the team."

#### Continuous learning and improving care

- The manager told us how any incidents or accidents would be reviewed and discussed in staff teams to see if anything could have been done differently to make the person safer and the care more effective.
- Care reviews identified how care could be done differently to better support people and changes implemented had had positive outcomes for people who used the service.

#### Working in partnership with others

- The manager worked in partnership with health and social care professionals to achieve good outcomes for the people who received a service.
- Staff told us they had good relationships with health and social care professionals. and shared examples of how joint working and effective information sharing had a positive impact on people.
- A social care professional said "[Registered manager] and their team have always looked for new and innovative ideas about how individuals can be supported, and considered the issue of inclusion for the individual in their local community."

#### Leadership and management

- The service was well managed and well led. People told us the manager was approachable and professional. One person told us the company was, "Really good at the moment, good carers, good management."
- Staff spoke positively about their manager. One staff member reflected the views of themselves and others when they said, "[Manager's name] is great. I have respect for the manager, they are understanding. They listen to what we have to say." Another said, "We couldn't ask for a better manager."
- People said they received information they needed to ensure effective communication could be maintained. Relatives also felt communication was effective and staff described the importance of effective communication to ensure a good quality service for people. One staff member said, "Communication has been of the highest level."
- Social care professionals also spoke very positively about the management and leadership of the service which they considered enabled positive outcomes for people who used the service. One social care professional told us, "As a management team I found them creative and thinking beyond the obvious in order to support individuals. When there have been issues they have been proactive in addressing them to ensure minimum disruption to individuals and their families."