

Different Care Holdings Ltd

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Inspection report

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service effective?

Good ●

Is the service caring?

Good ●

Is the service responsive?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Different Care Holdings Liverpool Ltd is a domiciliary care provider who provide the regulated activity of personal care to people living in their own homes in the community. Some people using the service were not in receipt of the regulated activity. At the time of our inspection 31 people were in receipt of personal care.

People's experience of the service and what we found:

People we spoke to said they felt safe and happy being supported by Different Care Holdings Liverpool Ltd. Risk assessments were in place and had been regularly reviewed. Staff were recruited and selected safely and there was enough of them to fulfil people's contracted support hours without rushing. Medication was administered safely.

Staff were trained, supervised and appraised in line with the organisation's policy and procedure. The service supported people in line with the principles of The Mental Capacity Act 2005. People's food and drink requirements were being met.

People told us they felt the staff were kind and caring. Comments included "I cannot speak highly enough about the staff, and "they are just like angels." Another person stated "I would rate them 100 out of 10 if I could." People's cultural choices and needs were not only respected but were actively encouraged and supported.

Care plans were written in a way which focused on the needs of the person and not the task, putting more emphasis on how people chose to be supported. People's communication needs were supported.

The registered manager and the provider led by example. Staff spoken to liked working for the organisation and believed in their ethos. Quality assurance systems were robust and focused on improving the service people were receiving.

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

Rating at last inspection

The last rating for the service under the previous provider was Good, published on 16 June 2018.

Why we inspected

This inspection was prompted by a review of the information we held about this service.

You can read the report from our last comprehensive inspection by selecting the 'all reports' link for Different Care Holdings Liverpool Ltd on our website at www.cqc.org.uk.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Good ●

The service was safe.

Details are in our safe findings below.

Is the service effective?

Good ●

The service was effective.

Details are in our effective findings below.

Is the service caring?

Good ●

The service was caring.

Details are in our caring findings below.

Is the service responsive?

Good ●

The service was responsive.

Details are in our responsive findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

Different Care Holdings 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 Health and Social Care Act 2008.

Inspection team

The inspection team consisted of 1 inspector.

Service and service type

This service is a domiciliary care agency. It provides personal care to people living in [their own houses and flats] [and] [specialist housing].

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

Notice of inspection

The inspection was announced. The provider was given 48 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the provider or registered manager would be in the office to support the inspection and to enable them to gain consent from people so we could contact them.

What we did before the inspection

We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make.

During the inspection

We attended the office address on 31 October 2023 and spoke with staff, the registered manager and the nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider. We also viewed records including 4 peoples care plans and associated documentation, 3 staff recruitment files and all other documentation relating to the running of the service. On 1 November 2023 we spoke with 5 people by telephone. We reviewed further documentation on 2 November 2023.

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 the provider under their new legal entity. The rating for this domain is Good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse and avoidable harm

- People were safeguarded from abuse and avoidable harm.
- All staff had received safeguarding training and had attend regular refresher training. There was a safeguarding adult's policy and procedure in place for staff to follow.
- Staff told us they knew what action to take if they felt someone was at risk of harm or abuse. One staff member told us "I would report it straight to the registered manager, or ring careline or the police depending on the situation."

Assessing risk, safety monitoring and management

- The provider assessed risks to ensure people were safe. Staff took action to mitigate any identified risks.
- For example, one person who was at risk of skin and tissue breakdown had a risk assessment in place to ensure they were regularly repositioned throughout the course of the day. The care staff had tailored call times in place to enable them to do this.
- Staff told us they always had the opportunity during their induction process and when new packages of care were commenced to read people's care plans, and this was a requirement as part of their role. One staff member told us, "This is a really important part of the job to make sure we get the care just right."
- Everyone we spoke with told us they felt safe. One person said, "I 100 per cent feel safe. They are very well organised." A relative told us "I have absolutely no reason to doubt their (the staffs) capability or competence."

Staffing and recruitment

- The provider ensured there were sufficient numbers of suitable staff.
- The provider operated safe recruitment processes.
- Rotas were person centered, and there was enough time structured into people's calls to allow staff to travel from place to place.
- People told us they were supported by consistent staff. One person said, "I have the same staff visit me and it makes me feel safe and well looked after."

Using medicines safely

- People were supported to receive their medicines safely.
- Staff had completed medication training and regularly had their competencies assessed by a senior member of staff who had received additional training in medication.
- Everyone we spoke with told us they received their medicines on time.

Preventing and controlling infection

- People were protected from the risk of infection as staff were following safe infection prevention and control practices.
- Staff told us they had access to plenty of PPE. Records showed staff had received additional training around infection control processes.

Learning lessons when things go wrong

- The provider learned lessons when things had gone wrong.
- There was an incident and accident tracker in place which had been updated every month to highlight any learning which had taken place from accidents or incidents.

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 the provider under their new legal entity. The rating for this domain is 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 care and support was delivered in line with current standards to achieve effective outcomes.
- Each care plan reviewed contained pre- assessment information which had been completed in consultation with the person and their family member.

Staff support: induction, training, skills and experience

- The service ensured staff had the appropriate skills, knowledge and experience to deliver effective care and support.
- The provider sourced and delivered additional training when needed.
- All staff had access to regular supervision and appraisal in line with the organisations policy and procedure.

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

- People were supported to eat and drink enough to maintain a balanced diet.
- People told us staff helped them choose their meals and always had enough time to prepare something nutritious.
- One relative told us "They always spend time making sure [family member] has a good choice, it is not just a case of throwing a microwave meal in."

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

- The provider ensured the service worked effectively within and across the organisation to deliver effective care, support and treatment.
- People and their relatives told us staff would regularly contact the doctors or the district nurses if they became unwell.
- One relative told us "The communication is just fab. We work together, just like a family."

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

- People were supported to live healthier lives, access healthcare services and support.
- People's rotas were adapted and changed to accommodate any medical appointments they might have

Ensuring consent to care and treatment in line with law and guidance

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of

people who may lack the mental capacity to do so for themselves. The MCA requires that, as far as possible, people make their own decisions and are helped to do so when needed. When they lack mental capacity to take decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

- The provider was working in line with the Mental Capacity Act.
- There was capacity assessments in place where needed. People's ability to consent to care had been assessed as part of the act.

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 providers first inspection under their new legal entity. This domain has been rated Good. This meant people were supported and treated with dignity and respect. They were involved as partners in their care.

Ensuring people are well treated and supported; respecting equality and diversity

- People were well supported.
- People spoken to, without exception, told us staff treated them kindly and were caring. Comments included "I cannot speak highly enough about the staff." Someone else said "I would rate them 100 out of 10 if I could." Also "They are just like angels, they make my day."
- A relative shared how the staff have helped them settle into new routines at home with the family member. They said "I would just be lost without them, what an amazing bunch."
- Records evidenced how one person's cultural background was supported with regards to their meals. A staff member who shared the same cultural values worked with a person each week to support them to make their own foods and meals ready for the week, communicating in a language which was meaningful to them.
- Records evidenced how another person was treated with a surprise party due to having no family or friends to do this on their behalf. Staff spent their time arranging the party and surprised them with members of their local community.

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

- People were supported to express their views and make decisions about their care.
- Care plans evidenced people had been supported to make changes and feedback about their care and support.
- Records evidenced on some occasions when needed, changes had been implemented to people's rotas and care plans based on their feedback. For example, one person had been given a later call time to enable them to spend some quality time with their family.

Respecting and promoting people's privacy, dignity and independence

- People's privacy, dignity and independence were respected and promoted.
- People told us staff would always knock on their doors and announce themselves before coming into their homes. One person said, "Its nice that I have the same staff because I always know who to expect."
- People's personal information was stored securely and only accessible through company mobile phones held by the staff, which were encrypted with passwords.

Is the service responsive?

Our findings

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

This is the providers first inspection under their new legal entity. This domain has been rated Good. This meant people's needs were met.

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

- People were supported as individuals, in line with their needs and preferences.
- Cares plans were written in a way which was person centered and focused on the need of the individual, rather than the care task. For example, there was information about how people liked the personal care to be undertaken, what soap and shower gels they used, and what time they liked to change into their nightwear.
- People spoken with told us the staff knew them well. One relative said, "The staff can anticipate [family members] needs well because they have taken the time to get to know them."

Meeting people's communication needs

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

- The provider was meeting the Accessible Information.
- People's communication needs were understood and supported.
- The provider had arranged for a translator to be present for reviews and quality phone calls for one person to ensure they had equal opportunity to voice any issues or concerns.

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

- People were supported to maintain relationships, follow their interests and take part in activities that were relevant to them.
- Some people were supported to access the community by the staff and enjoyed shopping trips and dancing sessions.
- A staff member told us "I love finding out what is important to them [people they supported] and suggesting some activities they will like."

Improving care quality in response to complaints or concerns

- People's concerns and complaints were listened to, responded to, and used to improve the quality of care.
- There was a complaints process in place which was shared with people as part of the service user guide. This was available in different formats.

- Everyone spoken with said they understood how to complain, however had never felt the need to raise a formal complaint.

End of life care and support

- People were supported at the end of their life to have a comfortable, dignified and pain free death.

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 providers first inspection under their new legal entity. This domain 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

- There was a positive and open culture at the service. The provider had systems to provide person-centred care that achieved good outcomes for people.
- People told us they felt well supported. Staff were able to quote the ethos of the company. One staff member said, "Its isn't like any other care company, the manager really cares about everyone."

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 provider understood their responsibilities under the duty of candour.
- The registered manager had reported all notifiable incidents to CQC as required.
- The provider had a clear management structure in place that monitored the quality of care to drive improvements in service delivery.
- Quality assurance audits routinely took place, and a clear plan of action to address any shortfalls or address any missing or incomplete records was evident.

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

- People and staff were involved in the running of the service and fully understood and took into account people's protected characteristics.
- The registered manager and provider were clearly passionate about the running of the service and had a good knowledge of everyone's likes and dislikes. People we spoke with knew the registered manager and said they had made time to go and see them. One person said, "I feel the manager has a good handle on things, it is well organised."
- Staff we spoke with said they felt valued and enjoyed engaging with the registered manager because they were treated fairly and respectfully. One staff member said "You can't fault [registered managers name]. They are always on hand for support."

Continuous learning and improving care; Working in partnership with others

- The provider had created a learning culture at the service which improved the care people received. The provider worked in partnership with others.
- There was evidence of a holistic approach to care and support. Records evidenced the registered manager

had reached out to other professionals for support and guidance.

- Our conversations with the registered manager and the provider clearly showed they led by example, and had a good approach to learning from any shortfalls and acting upon any feedback to make the service better.