

Flexi Coventry Limited

# Flexi Coventry Limited

## 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

Flexi Coventry Ltd is a domiciliary care agency. It provides personal care to people with complex needs living in their own homes. At the time of our visit 13 people with complex medical needs, were being supported by the service.

### People's experience of using this service and what we found

Relatives were confident their family members were safe when receiving care and support. People received their care calls at the times they expected, for the length of time agreed and from staff they knew. Risk associated with people's needs and the environment were well managed. Medicines were managed in line with regulatory requirements and best practice guidelines.

People's needs were assessed, and personalised care was provided by staff who were well trained. People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible. The management team and staff had a good understanding of and worked within the principles of the Mental Capacity Act (2005). The provider's policies and procedures supported this.

Staff ensured people's rights were upheld and were caring and thoughtful in their approach. People made decisions about their care and support. Staff felt cared for, valued and supported by the management team. Relatives confirmed staff had an in-depth knowledge of their family members' needs.

The service was responsive to the needs of people and relatives. Detailed care plans provided staff with the information they required to provide care in line with people's needs, wishes and preferences. Staff were trained to support people at the end stage of life, when needed. Relatives knew how to raise any concerns or complaints. The provider was meeting the requirements of the Accessible information Standard.

The management team were open, approachable and focussed on providing person centred care. Systems were in place to monitor and improve the quality of care provided. The management team and staff shared a passion for the provision of good quality care and worked in partnership with other professionals to improve outcomes for people. Everyone at Flexi Coventry Ltd was committed to working towards an outstanding rating.

The last rating for this service was Good (published 11 October 2016).

Why we inspected: This was a planned inspection based on the previous rating of good.

Follow up: We will continue to monitor intelligence we receive about the service until we return to visit as per our methodology. If any concerning information is received, we may inspect sooner.

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

The service was safe.

Details are in our safe findings below.

Good ●

### Is the service effective?

The service was effective.

Details are in our effective findings below.

Good ●

### Is the service caring?

The service was caring.

Details are in our caring findings below

Good ●

### Is the service responsive?

The service was responsive.

Details are in our responsive findings below.

Good ●

### Is the service well-led?

The service was well-led.

Details are in our well-Led findings below.

Good ●

# Flexi Coventry Limited

## Detailed findings

### Background to this inspection

#### The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Care Act 2014.

#### Inspection team

The inspection was undertaken by one inspector

#### Service and service type

Flexi Coventry Ltd is a domiciliary care agency. It provides personal care to people living in their own homes, including younger adults, older people, people with learning disabilities, people with autism, people living with dementia and mental health needs, people with sensory impairments and people with physical disabilities. CQC regulates the personal care provided.

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 comprehensive inspection was announced. We gave the service 48 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the provider or registered manager would be in the office to support the inspection.

Inspection activity started on 6 June 2019 and ended on 24 June 2019. We visited the office location on 24 July 2019.

#### What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. We used the information the provider sent us in the provider information return. This is information providers are required to send us with key

information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all of this information to plan our inspection.

During the inspection

We spoke with 11 relatives to obtain their views of the service provided because people using the service had complex needs and were not able to tell us about their experiences. We spoke with five members of staff including the provider, registered manager, deputy manager and care workers.

We reviewed three people's care and medicine records, to ensure they were reflective of their needs. We looked at three staff files in relation to recruitment and staff supervision and a range of records relating to the management of the service, including audits and checks, people's and relatives' feedback about the service and policies and procedures.

# Is the service safe?

## Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At the last inspection this key question was rated as Good. At this inspection the rating for this key question remains Good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- Procedures were in place to protect people from harm.
- Staff received safeguarding training and knew how and when to report concerns. Whilst confident these would be addressed, staff understood how to escalate their concerns if they were not.
- The management team understood their responsibility to report concerns to the local authority and to us (CQC) to ensure any allegations or suspected abuse were investigated.

Assessing risk, safety monitoring and management

- Relatives were confident their family members were safe when care was being provided.
- Risks associated with people's care were assessed and well managed. Advice had been sought from health care professionals in relation to risks associated with specific medical conditions. Staff had received additional training to ensure they had the knowledge to provide safe care.
- Risk management plans informed staff how to manage risk safely. However, records were not available to show some known risks had been assessed. The registered manager immediately addressed this shortfall.
- Despite record omissions, staff demonstrated a very good understanding of how to manage and reduce individual risks. One told us, "We know each service user and understand how to keep them safe."

Staffing and recruitment

- Staff were recruited safely. This meant people were supported by staff who were of good character and suitable to work with vulnerable people.
- There were enough staff to ensure people received their care calls, at and for the length of time agreed. Relatives confirmed their family members were consistently supported by staff they knew.

Using medicines safely

- Medicines were administered safely by trained staff. The provider ensured staff had additional training in specific medicines, such as Buccal Midazolam (emergency epilepsy medicine).
- Relatives confirmed people received their medicines as prescribed. One told us, "Staff record every time they give medication. The records are very detailed and clear."
- The management team regularly observed staff practice and checked medicine records to ensure staff worked in line with the provider's procedure and best practice guidance.

Preventing and controlling infection

- Relatives confirmed staff followed good infection control practice in their homes.
- Staff completed infection control training and understood their responsibilities in relation to this.
- Infection control audits were completed in people's home where staff provided, for example tracheostomy

care (artificial opening into the windpipe to assist breathing). The registered manager explained, "We do this as good practice to ensure we reduce the risk of infection."

#### Learning lessons when things go wrong

- Accidents and incidents were managed well which ensured, where needed, planned care was adjusted to keep people safe.
- The management team reviewed any accidents and incidents to prevent reoccurrence and to identify any learning. A staff member told us, "We do reflection as part of our meetings. We discuss what happened, think about why it happened and what we change moving forward."

# 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.

At the last inspection this key question was rated as Good. At this inspection the rating for this key question has remained Good. This meant people's outcomes were consistently good, and people's feedback confirmed this. The management team and staff demonstrated they were working towards achieving an outstanding rating in this key question

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- People's needs were fully assessed before they started using the service to ensure these could be met. Assessments included staff spending time with people prior to their hospital discharge to build relationships and learn about people's needs, expectations and aspirations.
- Information from assessments was used to devise tailored staff training programmes and care plans to ensure staff had the knowledge, skills and understanding to meet each identified need.
- The provider respected and promoted inclusion and diversity. This ensured protected characteristics under the Equality Act 2010 were considered.

Staff support: induction, training, skills and experience

- Relatives had confidence in staff's ability to deliver care effectively. One said, "Staff know what to do in an emergency, so we feel relaxed to leave [name] in their care which is a first." A healthcare professional described staff as 'very knowledgeable'.
- The provider invited people and their family members to join staff training sessions. They explained this 'helped to build relationships, trust and understanding'.
- Staff said the support and training they received made them feel confident in their roles. This included an induction and comprehensive on-going training programme focused on people's specific needs. The provider told us, "Our staff are trained to see the person not the diagnosis."
- Staff training was up to date. Regular observations ensured staff practice reflected the learning and best practice guidance training provided.
- The provider further supported staff development through weekly e-mails which enabled staff to refresh their knowledge of policies and procedures and any legislative updates.

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

- People received the support they needed to meet their nutritional needs. Information was recorded in care plans which included instructions on any specific dietary requirements relating to people's health, medical conditions and culture.
- When staff were concerned people might be at risk due to poor diet or not drinking enough, they shared information and sought advice from other healthcare professionals.

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



- People were supported to access health care as required. One relative said, "They [staff] really understand [person's] medical conditions and know when to get advice."
- The management team and staff worked closely with health and social care professionals to improve outcomes for people, including social workers, GPs, district nurses and hospital consultants.
- Records showed information was shared with other agencies involved in supporting people to ensure continuity of care. A staff member told us, "We work together and share information to get the best for the service users."

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

The Mental Capacity Act 2005 (MCA) provides a legal framework for making 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.

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 MCA.

- The management team understood their responsibilities under the Act and knew to contact the local authority if they had concerns about a person's capacity.
- Staff completed MCA training and worked within the principles of the Act. One told us, "Our service users [people] have capacity to make decisions. We do what they want us to do."
- Records showed people's consent to care was sought. Where relatives, or others involved in people's care had the authority to make decisions on people's behalf, this was recorded in their care plan. This included what decisions the person had authorised them to make.

# 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.

At the last inspection this key question was rated as Good. At this inspection this key question remained 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; equality and diversity

- Relatives spoke highly of staffs' caring and sensitive nature. Comments included, "Staff are very thoughtful when providing care" And, "Our staff team are wonderful, patient and kind."
- Feedback from a health care professional informed us the service always put people's needs first and described staff as caring, considerate and helpful.
- Staff knew people extremely well. They cared for the same people and had been given the time needed to build positive relationships with people and their families. When a new staff member was assigned to a person, the registered manager worked with them until they fully understood the person's needs and had begun to get to know the person.
- Staff felt cared for by the provider and registered manager. One commented, "It's not us and them, it's an equal team. They are always there to jump in and help which shows they care."
- Staff had completed equality and diversity training and understood the importance of learning about, and respecting people's differences to ensure person centred care was provided.

Respecting and promoting people's privacy, dignity and independence

- People's rights were upheld. One relative told us, "One of the many positives about this service is the dignified way in which staff work, never intrusive and always respectful."
- Staff understood the positive impact supporting people to maintain their independence had on people's wellbeing. One staff member described how people's complex medical needs could result in their independence being compromised. They said, "It's up to us to work with them to give it back [independence]." This approach was positively acknowledged in a report from a consultant neuropsychiatrist viewed on one person's file.
- People's personal information was managed in line with data protection law.

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

- People and relatives were involved in planning and reviewing their care.
- Staff understood the importance of respecting people's choices and checked with people before providing support. One told us, "We always give choice. Like asking a service user who normally has a shower, if that's what they want. On the day they may fancy a bath."
- People's communication needs were known, recorded and understood by staff. For example, one person used a pen and paper on the days they found verbal communication difficult.
- Care plans informed staff what decisions people could make for themselves and when they needed prompting or support.

# Is the service responsive?

## Our findings

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

At the last inspection this key question was rated as Good and at this inspection this key question has remained Good. This meant people's needs were met through good organisation and delivery. The management team and staff demonstrated they were working towards achieving an outstanding rating in this key question.

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

- Nine relatives said they would recommend the service because it was reliable, responsive and flexible. One added, "I felt like we had won the lottery when Flexi started providing care." Relatives written feedback confirmed the service regularly responded to requests for additional calls and changes to the times of care calls at short notice.
- People's protected characteristics such as their age, race and religion were recorded in their care records. The provider explained they tried to match people with staff who shared similar characteristics or interests, to enhance the development of relationships. They told us broadening the diversity of the staff team was an area of focus for future staff recruitment.
- Care plans were detailed, individualised and had been regularly reviewed in partnership with people and relatives.
- Staff were confident the information in care plans enabled them to understand and provide care in line with people's wishes.

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 service was meeting the AIS standards. The provider told us information about the service, including the complaints procedure, service user guide and care plans could be provided in a different format if required.

Improving care quality in response to complaints or concerns

- Relatives knew how to make a complaint and would not hesitate to speak with the provider or registered manager if they needed to. One said, "Flexi management are very approachable, they listen and respond quickly to the slightest niggle."
- Staff understood their responsibility to support people and relatives to share any concerns or complaints. One said, "If we don't know it's wrong we can't put it right. It's so important to make sure they [people] feel comfortable to tell us and know our managers will sort it."
- Records showed no formal complaints had been received since our last inspection. Concerns raised were documented and addressed.

- The provider also kept records of compliments. One read, "As a family we are overwhelmed by the incredible support and excellent service you have provided..." Another stated, "Just to say your staff are doing an amazing job."

#### End of life care and support

- There was no end of life care being delivered at the time of the inspection. However, staff had previously cared for people at the end stage of life and were trained and supported to do so.
- The provider and staff team attended funerals of people who had been supported by the service. The provider told us, "It's a sign of respect. The people we support are like family."

# 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.

At the last inspection this key question was rated as Good. At this inspection this key question has remained Good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care. The provider and registered manager demonstrated they were working towards achieving an outstanding rating in this key question.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people;

- People received the care they required, and their needs were met by the service. One relative said, "We've had lots of poor experiences of care from lots of agencies. Flexi is different. They do a first-class job and I can't imagine our lives without them. They are like part of the family."
- The management team and staff were passionate about the delivery of good person-centred care. One staff member said, "Our managers really are all about the service users and what we can do to make a positive difference to their lives."

How the provider understands and acts on duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong

- Staff told us the management team promoted an open culture and led by example. One said, "We can speak openly. We talk together and learn together."
- The registered manager understood their responsibility to be open and honest when things had gone wrong. Learning had been shared with staff, to prevent reoccurrence.

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

- The service was led by an experienced management team who staff described as supportive and very approachable. Staff were clear about their responsibilities and the leadership structure. One told us, "In supervision and team meetings we discuss our responsibilities, development needs and standards."
- The management team demonstrated a good understanding of their regulatory responsibilities and kept their knowledge of legislation and best practice up to date. For example, the latest CQC inspection rating was available on the provider's website. This is a legal, requirement, to inform the public about our inspection findings and ratings awarded.
- The management team completed a range of quality checks to continually monitor, evaluate and improve the service provided. The provider told us, "We always ask the question, 'did we do our best today'? We don't want to look back with guilt but with pride."

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

- The provider invited people and relatives to share their views about the service through, questionnaires,

telephone discussions and monthly meetings. Recent feedback was positive about the way the service was managed and quality of service provided. Suggested improvements were used to inform future planning.

- Staff were encouraged to share ideas and concerns which were acted upon to help improve the quality of care. For example, staff had been provided with a trolley after highlighting concerns about the amount of equipment they needed to carry when supporting one person.

Continuous learning and improving care; Working in partnership with others

- The provider was in the process of introducing an electronic call monitoring system to further improve the service being delivered. The registered manager said, "We are 100% proud of what we do but there is always room for improvement."

- The provider had been invited to share best practice as part of a parliamentary review. They told us they had been nominated by a service commissioner who recognised the service was consistently successful in supporting people with complex needs, often where care packages with other providers had broken down.

- Feedback from one agency who worked with Flexi Coventry Ltd described how the management team went over and above to ensure a person received the support they needed. This was because they worked in partnership with the person, their family and other professionals involved in the person's care.

- Throughout our inspection the provider and registered manager were open and honest. They welcomed our inspection and feedback which they said would be used to continue their journey to achieving an outstanding rating.