

Feelcare Domiciliary Services 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 responsive?	Good ●
Is the service well-led?	Good ●

Summary of findings

Overall summary

About the service

Feelcare Domiciliary Services Ltd is a domiciliary care service providing personal care support to people living within their own homes. There were 14 people using the service at the time of this inspection. Each of these people required assistance with their personal care to varying degrees. Some people required daily support and some less frequently.

Not everyone that used the service received personal care. The Care Quality Commission (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 supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests. The policies and systems in the service supported this practice.

People's safety was promoted because the service assessed, monitored and managed their safety well. Potential risks that people may face had been identified and were regularly reviewed. Assessments provided information about steps that care staff could take to support people to ensure that any potential risks were minimised.

The service had enough staff to cater for the needs of the people using the service. Pre-employment disclosure and barring service checks had been conducted for care staff. These checks helped to safeguard people using the service by ensuring that only suitable applicants were offered work with the service.

Some people using the service required help to take their medicines. The provider had ensured that staff had been trained and were assessed as competent to manage and administer medicines in a safe way.

People were protected from the risks associated with poor infection control because the service used effective infection, prevention, and control measures. Personal protective equipment, for example face masks, gloves, and hand sanitiser, were provided in suitable quantities to staff. Guidance and training for staff were provided and staff were assessed to ensure these skills were maintained.

The service completed an assessment of each person's needs and personal wishes about how they were cared for. Care plans included guidance about meeting these needs and people provided their signed consent to be cared for by staff from the service.

There was a process in place to monitor and learn from accidents and incidents. Significant events had not taken place although the nominated individual told us if any events did occur these would be documented and reviewed in line with the service's policy and guidance.

There was an effective training system in place. People were supported by staff who had received relevant induction training in evidence-based practice.

People's nutritional needs were met. Care staff did support some people to prepare light meals on occasions although no-one currently required help to eat or drink. The service had taken steps to make sure people's nutrition and hydration needs were assessed.

People's health needs were met. Care staff were able to assist people to attend healthcare appointments if requested. Usually people themselves, with the assistance of a family member, managed these appointments independently.

Staff respected people's choices, including those relevant to protected characteristics, for example, due to age, cultural and religious preferences.

Governance processes were effective and helped to assess, monitor and check the quality of the service provided to people.

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 was good, published on 17 May 2018.

This service was registered with us on 15 February 2017.

Why we inspected

The inspection was prompted due to concerns received about whether disclosure and barring service (DBS) checks were being conducted prior to staff being permitted to support people. A decision was made for us to inspect and examine those risks.

We found no evidence during this inspection that people were at risk of harm from this concern.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

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 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.

Feelcare Domiciliary Services 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.

This inspection was carried out by 1 inspector.

Service and service type

This service is a domiciliary care agency. It provides personal care to people living in their own houses or flats.

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 who was also the nominated individual. A nominated individual is responsible for supervising the management of the service on behalf of the provider.

Notice of inspection.

This inspection was announced. We gave the service 48 hours' notice of the inspection, although the original date was then postponed temporarily. We give short notice of inspections as this was a small service and we

needed to be sure that the provider would be in the office to support the inspection.

Inspection activity started on 17 April 2023 and ended on 17 May 2023. We visited the location's office on 26 April 2023.

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. We reviewed other information we had received about the service since it was registered with the CQC. We took this into account when we inspected the service and made the judgements in this report. We used all this information to plan our inspection.

During the inspection

We spoke with the registered manager. We also spoke with the office manager.

We looked at 4 people's assessment and care planning records as well as disclosure and barring verifications for all staff.

We received feedback from 1 person using the service and 7 relatives about how safe they, or their relatives, felt and how the service supported them in the care they or their relative needed. We also received feedback from 6 members of the care staff team about what it was like to work for the service and how well they thought the service trained and supported them.

Is the service safe?

Our findings

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

At our last inspection this key question was rated Good. The rating for this key question has remained Good.

This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were kept safe from avoidable harm because staff knew what the potential risks of harm were and acted to minimise any untoward event.
- A person using the service told us, "They [staff] care for me how adults should be. Carers always know how to support me. They know what I want, and I just feel safe when I am with them."
- A relative told us, "I am generally very happy with the care provided by Feelcare. The carers are very good and my [relative] particularly appreciates the care worker who lives in with her for most of the week."
- No safeguarding concerns had arisen since the service was last inspected. We looked at further information and the provider was able to show us evidence of records of complaints and incidents and nothing of concern about people's safety or wellbeing had been reported.
- Induction records showed that care staff had completed safeguarding training and had access to guidance about what to do if they had concerns about a person's safety and wellbeing.
- A member of care staff told us, "Before starting to work, the DBS was completed. In our line of business, the training and induction were undoubtedly very beneficial."

Assessing risk, safety monitoring and management

- The provider ensured potential risks that people using the service faced were assessed and action was taken to minimise risk of harm.
- People using the service had person centred risk assessments. The risk assessments covered a range of safety and wellbeing needs, such as eating and drinking, assistance with medicines, moving and handling and environmental risks.
- People's risk assessments included guidance for staff on how to manage and minimise any risks identified. For example, falls or other mobility areas to consider while supporting people with their care, potential hazards in people's homes and how to ensure people were left safe before staff ended their visit.

Staffing and recruitment

- The recruitment procedures ensured that staff members were suitable for the work they were undertaking. DBS checks had been undertaken for all staff. DBS checks provide information including details about convictions and cautions held on the Police National Computer. This information helps employers make safer recruitment decisions. References had been obtained from previous employers or educational facilities before staff started work.
- We looked at the recruitment records for 4 care staff employed by the service. The records showed that the provider took all necessary steps to verify information provided by new recruits, for example, checking

the applicant's identity and that applicants had the right to work in the UK.

Using medicines safely

- Staff were trained to ensure that anyone requiring help to take their medicines was provided with support from staff who received training and guidance to do this safely.
- At the time of our inspection, there were 3 people using the service who needed assistance to take their medicines. We checked the medicines administration records [MAR] for these people over the last three months and noted the forms were being completed as required.
- The medicines policy was detailed and described what action the service would take if medicines support was required.
- Consent to support people with medicines, or that no support was required, was included on care records.

Preventing and controlling infection

- People were protected from the risk of infections. Staff received infection control training. Disposable personal protective clothing, including gloves and face masks, were available.
- The nominated individual told us that since the service had been operating, they had not so far encountered any difficulties caused by the COVID-19 pandemic.

Learning lessons when things go wrong

- There was a process in place to monitor any accidents and incidents. The provider told us these were analysed to identify potential emerging themes for any improvements that may be needed. However, to date, nothing seriously untoward had happened.

Is the service responsive?

Our findings

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

At our last inspection this key question was rated Good. The rating for this key question has remained Good.

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

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

- People received person centred care. Care records contained meaningful information that identified people's abilities and support needs. This ensured staff were knowledgeable about people's individual needs and preferences.
- A person using the service told us, "The carers are 100% active and responsible. I never had this kind of care in my entire life."
- A relative told us, "The manager is very quick to deal with any problems and has visited my [relative] on more than one occasion to sort out any issues. That shows such commitment to making sure that not only we but also my [relative's] carers feel listened to."
- A member of staff told us, "I can contact Feelcare at any time especially the manager who provides me with helpful training about my job. This helps me to know how to look after my clients as well as giving me appropriate, practical and suitable advice."
- There were arrangements to make sure staff were informed about any changes in people's needs. Care plans were maintained, and care staff could access these and record care notes from each visit. Care plans were reviewed to monitor whether they were up to date so that any necessary changes could be identified and acted on at an early stage.

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 was aware of the importance of making information accessible to people. People's communication needs were described in their care plans so that staff knew how to best communicate with them. No one using the service at the time required specific alternative methods of communication.

Improving care quality in response to complaints or concerns

- The complaints policy and information provided to people gave a clear description of how complaints, concerns or other feedback would be responded to. This explained that the service took complaints seriously and were committed to responding and resolving any concerns raised.
- The nominated individual had not received any formal complaints although people had provided positive feedback and thanks to the service and care staff team.

End of life care and support

- None of the people receiving care at the time of the inspection were on an end of life care pathway. The nominated individual explained that end of life care training is undertaken by care staff in readiness for any end of life care requests for support that might be received.

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 our last inspection this key question was rated Good. The rating for 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.

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

- There were systems to ensure people had choice and control over their care. The care team leader and nominated individual visited people to check on the quality of care provided and to ask people about their needs, if there were any changes to support that people wanted to discuss and for their views about the staff supporting them.
- A person using the service told us, "The carers are definitely well led. I get the care I need now, and I don't want to lose it. They are definitely competent. The company is brilliant, amazing and fabulous!"
- A relative told us, "The carers are very good and my [relative] particularly appreciates the care worker who lives in with her for most of the week."
- A care worker told us, "The manager tells us to read the care plan and they inform us if they think care needs to change. They ask us about this our opinion about the service."
- The nominated individual demonstrated through our conversations with them, and written information we obtained, that an open and inclusive approach to the running of the service was promoted. This was confirmed in feedback we received from people and relatives using the service and staff.

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

- The leadership of the service complied with the duty of candour by ensuring that information was shared with relevant person's about people's wellbeing and any notable events that gave rise to any concern..
- The provider knew of the requirement to supply CQC with notifications of any untoward events and they reported that none had occurred. They were also able to assure us that they knew the events that they were legally required to notify the CQC about.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements, Continuous learning and improving care

- The service had a clear management structure consisting of the nominated individual and a team leader. The nominated individual was knowledgeable about regulatory requirements and matters relating to the quality of the service.
- There was a process for ongoing oversight and governance and audit of care plans, medicines and other information about how the service was operating day to day.

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

- The service sought verbal feedback from people and those important to them and used the feedback to inform service quality and development. People and relatives thought that overall, the service was well run.
- The nominated individual was knowledgeable about the characteristics that are protected by the Equality Act 2010.

Working in partnership with others

- There was evidence the service maintained a good working relationship with people using the service and families. Everyone using the service paid for their own care and the service was not commissioned by other health or social care partners. However, the nominated individual demonstrated during their discussions with us that they knew when to seek professional health and social care input and how to obtain it if the need arose.