

Different Care Ltd

Springwood Business Centre

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

This comprehensive inspection took place on 30 May and 4 June 2018 and was announced. This was the first inspection for Different Care who registered with the CQC in October 2017.

This service is a domiciliary care agency. It provides personal care to people living in their own houses and flats in the community. It provides a service to older adults and specialises in dementia care.

The service had a registered manager who had been in post since October 2017.

A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

There were currently eight people provided with care and support from Different Care with one carer and the registered manager and director currently providing the care and support.

Care records and risk assessments were very informative, well-kept and up-to-date. Each person using the service had a personalised support plan and risk assessment. All records we saw were complete, up to date and regularly reviewed. We found that people and their relatives were involved in decisions about their care and support. There was an emergency continuity plan in all files looked at that would be used for example if the person was taken to hospital. The information was a summary of the care and support required and other relevant information. We also saw that medications were handled appropriately and safely.

We found that recruitment practices were in place which included the completion of pre-employment checks prior to a new member of staff working at the service. A comprehensive induction programme was in place with a programme to incorporate regular training and supervision to enable staff to work safely and effectively. The directors of the service were also business and performance coaching registered and provided training. There was also an up to date staff handbook that staff were given.

People's GPs and other healthcare professionals were contacted for advice about people's health needs whenever necessary.

The provider had systems in place to ensure that people were protected from the risk of harm or abuse. We saw there were policies and procedures in place and training to guide staff in relation to safeguarding adults.

The service had quality assurance processes in place including service user quality of care and support questionnaires. The service's policies and procedures had been reviewed by the provider in January 2018 and these included policies on health and safety, confidentiality, mental capacity, medication, whistle

blowing, safeguarding and recruitment.

People told us they were extremely happy with the staff and felt that the staff understood their support needs. The two people we spoke with had no complaints about the service. The provider had a complaints procedure in place and this was available in the 'Service User Guide' and in place at the home of the two people.

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

Safeguarding policies and procedures were in place and staff had received training about safeguarding people.

Staff had been recruited safely. Appropriate recruitment, disciplinary and other employment policies were in place.

Staff had received training about medication handling and managed people's medication safely when required.

Is the service effective?

Good 

The service was effective

Staff were appropriately inducted, received training and were provided with a programme for regular supervision and an annual appraisal.

People had given consent for care to be provided and the service had policies and procedures in place in relation to the Mental Capacity Act 2005.

The provider provided initial assessment visits where peoples' needs were looked at and included assessing and creating a personalised care and support plan.

Is the service caring?

Good 

The service was caring.

Confidentiality of people's care files and personal information was respected.

People told us that their dignity and privacy were respected at all times when staff supported them and staff showed a regard for peoples' individuality.

People told us that there was good communication between them and the service and staff understood them.

Is the service responsive?

The service was responsive.

Suitable processes were in place to deal with complaints appropriately and people's comments and complaints were taken seriously and investigated.

People who used the service told us they were involved in their plan of care and their support needs were assessed with them.

Care and support plans and risk assessments were reviewed regularly and there were good records of communication with medical professionals.

Good ●

Is the service well-led?

The service was well-led.

Clear quality assurance systems were in place to ensure the service provided safe and good care and people who used the service had opportunities to express their views.

The provider and manager were very well organised and had clear roles and responsibilities for staff.

The service had a manager who was registered with the Care Quality Commission.

Good ●

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Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection checked whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

This inspection took place on 30 May and 4 June 2018 and was announced. We gave the service 18 hours' notice of the inspection visit because it is small and the manager is often out of the office supporting people using the service. We needed to be sure that they would be in.

The inspection was carried out by one adult social care inspector. We were able to visit the two people living at their home.

We asked for information from the local authority before the inspection. We also looked at our own records, to see if the manager had submitted statutory notifications and to see if other people had sent us feedback on the service.

There were eight people currently receiving care and support from Different Care and one member of staff going through induction. During the inspection we spoke with two people at their home and received information from a relative. We also talked with three staff members including the registered manager and the provider. We reviewed a range of documentation including two care plans, risk assessments, medication records, records for one staff, staff training programme records, policies and procedures, auditing records, health and safety records and other records relating to how the service is managed.

Is the service safe?

Our findings

We spoke with two people using the service and we asked if they felt safe. Both replied that they did. One person commented "I do feel safe with the help they give to us, they provide what we want". Another person told us, "I am safe, yes of course". People told us they were safe and were happy being supported by staff from Different Care.

We looked at the safeguarding records at the office with the registered manager; there had been one safeguarding incident on the 14 December 2017. We spent time discussing the safeguarding notification and were shown actions that had been taken. The incident had been sent to the local authority and the CQC. This informed that the manager acted appropriately to safeguard people using the service. We discussed how they would initiate a safeguarding incident and were told they would report straight away to protect the person. There was a whistleblowing policy and procedure that was included in the staff handbook.

We looked at incident and accident records file on the computer system used at Different Care. There had been no accidents to report the incident that occurred on 14 December 2018 was reported as a safeguarding incident. Records looked at showed how the provider had initiated actions required by contacting social services and ensuring other relevant professionals were informed. Records looked at showed actions had taken place immediately to ensure the safety of people and staff at the home where the incident occurred.

We looked at the medication policy and procedure that was updated in January 2018. Staff administered medication and completed medication administration records (MAR's) for all of the people as part of their care and support. All MAR's we looked at had been completed appropriately and signed by staff. The training programme for staff included medication awareness training and completing records appropriately. We were told that medication records were monitored on a monthly basis to make sure all medication had been prompted or administered appropriately.

We looked at the recruitment records for a new member of staff currently going through the induction programme and was spending time shadowing the manager in the community. The records showed that robust procedures had been followed to ensure that staff were safe and suitable to work with vulnerable people. The registered manager explained an applicant would complete an application process to assess their suitability for the job, attend an interview and provide contact details of people to provide a reference. A Disclosure and Barring Service (DBS) check was also completed before staff began working at the service. DBS checks include criminal record and barring checks for person's whose role is to provide care or supervision.

We looked at the care and support plans for two people and both had risk assessment records to inform what care and support staff were required to provide. Financial transaction records were discussed and records looked at that showed how the manager was monitoring people's finances. Monies and balances were checked after any purchases and the manager told us this was the safe practice to follow.

Both people's files we looked at had an up to date Personal Emergency Evacuation Plan (PEEP's), this

ensured that staff would be knowledgeable in the procedure of any evacuation at the location. The risk assessments were specific to the individuals and very informative. Examples included personal care support, health needs and medication, dietary requirements and weight charts. There was a gender specific risk assessment if a person chose to have the same gender care for them. We saw that risk assessments had been reviewed regularly.

Is the service effective?

Our findings

The service had only just begun to recruit staff and there was only one member of care staff currently employed who had started their induction by shadowing the manager. The registered manager and provider were fulfilling the care and support for the eight people receiving a care package. There was a comprehensive induction programme for staff to complete when first employed by Different Care. The service had implemented the Care Certificate, which was accredited by 'Skills for Care' this is a national qualification as well as carrying out their own induction.

Different Care had a range of training that included topics such as equality and diversity, fire safety, food safety, mental capacity, recording and reporting and person centred planning. The provider and registered manager also discussed how they would access the local authority training and qualification training and development to ensure staff were competent. The service provider also worked at their training and coaching service were all staff recruited to work at Different Care would have access to additional training including specialised dementia care and awareness training. We spoke to the new inductee who told us that they had already been nominated and registered by the provider to do a level three diploma in care and were looking forward to it.

A record of a programme for supervision meetings for all staff was discussed with the manager and provider this would include one to one meetings four times a year and an annual appraisal. Supervision provides staff and their manager with a formal opportunity to discuss their performance, any concerns they have and to plan future training needs. We were told that there would also be a team meeting programme when all staff were in situ. One staff member told us "The manager and provider are very supportive and I am very excited to be part of this service".

The manager and provider conducted initial assessment visits where peoples' needs were assessed and family were included if required and agreed in assessing and creating a personalised care and support plan. The care plans we looked at showed that each person's needs had been assessed and that they had a comprehensive plan to inform how and when they wanted their care and support to be provided and by whom.

We saw that the two people's records included snacks and an evening meal being provided. We were told that the staff always ensured that the people's dietary requirements were catered for with the person's full knowledge and involvement. Peoples dietary information was available in their support plan, documentation included information on diabetic needs or intolerances to certain foods. One person told us "The food is very nice that the [staff] cook". Another person told us "The staff always involve us in the food preparation and always ask if we would like to join them in the kitchen. Its team work". A relative told us "Given that we live several hours away, it is conforming to know that we are dealing with highly professional and reliable careers who put the health and well-being of my parents as their number one priority".

The registered manager worked within the legal framework of the Mental Capacity Act (MCA) 2005. The people being supported in their home had the capacity to make decisions around their care and support

and this was respected and promoted by staff. Consent documents in respect of medication and the care support were contained within care files and signed by the people themselves. One person had been supported by a relative in making decisions for their money management and the service planned how they worked within these parameters. The manager told us, "We do ensure that people are independent and we do support their choices at all times".

Is the service caring?

Our findings

We asked people if staff were kind and respectful and all said yes. One person told us "Staff care and support me they are very good and I am very happy with all of them", another person said "Staff are really good, they understand our circumstances. The care and other support is very good they go above and beyond what we expected". A relative told us "Although my relative has physical needs, he also has social needs, and they [staff] are always prepared to spend time listening and talking with him".

Staff were observed to be caring, attentive, calm and supportive to people. The manager and provider told us that they would liaise with advocacy services if and when required to support a person. We observed that people made choices and decisions about their lives and we saw that staff respected these decisions. One person said "I am very happy with everything they do for me".

We discussed the different communication techniques used by staff at the service. The manager commented "Communication between us is very important and we have a very good relationship with [people] we would know when to use other forms of communication as this is included in our initial assessment".

We were able to observe staff supporting people with respect and we saw that interactions between staff and the people they provided support to were positive. Staff had a good knowledge of the people they were supporting and people told us that in their opinion the staff helped them in any way possible.

We saw a brief description and medical state record that was a summary of a person's health and care requirements. This record we were told could be used if a person went to hospital.

We were able to see feedback that had been received by the service and this included "Thank you [person] is so happy. We do appreciate all you do and we are very happy with [Staff] you do a brilliant job".

We observed that confidential information was kept secure in the office and was told by the manager that the computer system was accessed via a protected password.

Different Care had a service user guide in place that gave people a good range of generic information regarding the service that was provided including equal opportunities recreational activities and health and well-being. The service had added information regarding their own philosophy of care and their own principles and values. All information for people would also be available in pictorial form, this included person centred care and support plans if requested.

Is the service responsive?

Our findings

People we spoke with said that the support provided was personalised and was what was requested at the initial assessment meeting. One person we spoke with told us "Staff are very good and they have a care plan we agreed. I have to say they go above and beyond". A relative told us "They [staff] are very much aware and responsive to the wider needs, rather than just those that are obvious".

We looked at the care and support files for two people, comprehensive records were in place for both of the people. The files contained assessments of people's care and support needs and any risks to their health, safety and well-being. Records included life histories with an interest's record to inform of their likes and dislikes and were based on their evaluations which resulted in the records being specific to the individual and the identified risks having actions for staff. All of the information was person-centred. A relative told us "I sense that my parents are treated as individuals and not just part of a daily rota, and they report that they are very comfortable and trust the [staff] they have dealings with, notably [names of staff]".

People were supported if required to go out into the community and also being supported to take part in the activities they chose to participate in if agreed in the care plan. The care and support however was predominantly provided in the people's homes.

Care and support plans and risk assessments had been reviewed regularly and there were good records of communication with daily records informing of what care and support had been provided by staff and if there was any communication to or by medical professionals. One person was attending a local dentist appointment and the manager had initiated a care plan to escort and support the person for that visit to ensure the person's safety. Staff we spoke with had good knowledge of people's support and care needs and were able to describe in detail the support they provided to individuals.

The provider had a comprehensive complaints policy and procedure in place that had been reviewed in January 2018. We looked at the complaints records file that had a complaint that had been dealt with by the provider as an incident. The record was clear of the actions taken by the manager and provider.

People were aware of the complaints procedure and all told us they would talk to the manager or provider if they were unhappy about anything. Staff spoken with told us they would initiate a complaint if a person informed them they were unhappy with something and would ensure that it was dealt with in accordance with the services policy.

There were end of life records in place in the care plan files of the two people we looked at; there was no information in place except for their religious practices. The manager and provider told us that they would complete the record with all of the necessary information if they were supporting a person at the end of their life.

Is the service well-led?

Our findings

The service had a manager in post who had been registered with the Care Quality Commission since October 2017 when the service was registered. The registered manager was supported by the provider as the service was at the present time working towards growing at a pace that was manageable. Staff recruitment had begun and a senior care and support worker had been employed in May 2018.

The registered manager understood their responsibilities in relation to the service and to registration with CQC and had updated us with notifications and other information. The provider had made timely notifications to the Commission when required in relation to significant events that had occurred at the service.

From April 2015, providers must clearly display their CQC ratings. This is to make sure the public see the ratings, and they are accessible to all of the people who use their services. This was the first inspection at Different Care and the manager and provider told us that they were going to display their rating on their web site and at the office.

In discussion with the provider and the manager it was clear that the vision and values of the service being provided was bespoke to each person. The service was a not for profit and we were told that any profits were going to ploughed back into the service to ensure staff were trained to provide specialist care including specialist dementia care.

Different Care had comprehensive quality assurance processes in place. We were able to see that the registered manager carried out audits of the service. People told us that the communication with the manager and provider was very good and that they were approachable at all times. The registered manager was able to demonstrate their oversight of the service and its quality systems. We were able to see records of any actions had been identified and acted on appropriately during meetings with the people using the service.

We looked at the quality assurance review records in the home of the two people we visited. Records were completed by the manager and provider at the current time. These records included medication, environment, health and safety checks and financial transaction checks.

Other quality assurance included asking people who used the service to express their views through a satisfaction survey as well as by a continuous improvement system. This meant that there was an ongoing process of the service acting on issues and comments made.

Staff we spoke with told us that they felt very supported in their new role. We were told "The manager and provider are really good and I'm looking forward to being part of this service".

The policies in place were current and included health and safety, incident reporting, confidentiality, safeguarding, medication, disciplinary procedures and recruitment. The staff handbook had been reviewed

and updated in 2018. This ensured the staff had up to date guidance surrounding their practice.