

The Caring Choice Ltd

# The Caring Choice Limited

## Inspection report

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## Ratings

Overall rating for this service

Good ●

Is the service safe?

Requires Improvement ●

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

The Caring Choice Limited is a domiciliary care service which provides personal care to people in their own homes. The service mainly provides support to older people. At the time of our inspection there were 28 people using the service.

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 receive personal care, we also consider any wider social care provided.

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

People were happy with the care and support they received. People were supported by staff who knew them well and had developed positive relationships with them. Staff respected people's preferences and treated people with dignity and respect.

People felt safe when receiving care from the service. Some improvements were needed to ensure all risks to people were thoroughly assessed and mitigated. We have made a recommendation about risk assessment and management. Accidents and incidents were managed appropriately.

There were enough staff to meet people's needs at the right time. Staff turned up on time and delivered personalised care to each person. People received effective support with their medicines and there were suitable measures in place to prevent the spread of infections.

People's needs were assessed to check the service was suitable for them. People were involved in this process and they were supported to remain involved in decisions about their care. 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.

Without exception, everyone told us the staff were kind and caring. People and their relatives described how staff were very good at communicating with them. The service was responsive to people's needs and flexible if any changes were needed. People and their relatives knew how to complain or raise any issues about the service, if they needed to.

The service was managed by an experienced registered manager. Everyone told us the service was well-organised. Staff were supported to deliver high-quality care through training, spot checks and supervision. The registered manager and senior staff completed a range of checks on the quality and safety of the service to identify any areas where it needed to improve.

The service had an open, transparent culture. Staff enjoyed their jobs and were all keen to deliver a person-centred service. Staff worked alongside other professionals to help ensure people received effective care

and support.

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

#### Rating at last inspection

The last rating for this service was requires improvement (published 31 May 2019).

#### Why we inspected

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

#### Recommendations

We have made a recommendation about risk assessment and management.

#### 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?

The service was not always safe.

Details are in our safe findings below.

**Requires Improvement** 

### 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** 

# The Caring Choice 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 Act.

#### Inspection team

This inspection was completed by two inspectors and an Expert by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

#### Service and service type

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

#### Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with CQC to manage the service. 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.

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

#### Notice of inspection

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 16 August 2022 and ended on 17 August 2022. We visited the service's office on 16 August 2022.

#### 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, professionals who work with the service and Healthwatch. 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 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 used all this information to plan our inspection.

During the inspection

We spoke with four people who used the service and seven relatives about their experience of the care provided. We spoke with eight members of staff including the registered manager.

We reviewed a range of records. This included three people's care records and medication records. We looked at three staff files in relation to recruitment, supervision and training. A variety of records relating to the management of the service, including policies and procedures were reviewed.

# 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 we rated this key question requires improvement. At this inspection the rating has remained the same. This meant some aspects of the service were not always safe and there was an increased risk that people could be harmed.

### Assessing risk, safety monitoring and management

- Most risks to people had been assessed and their care plans contained guidance for staff to follow so they could reduce these risks. This included risks associated with people's health, medication, moving and handling needs, nutrition and hydration and any risks associated with their home environment.
- Risks associated with the use of bed rails had not been thoroughly assessed. The registered manager agreed to implement a more comprehensive assessment for any person using bed rails.
- Where staff needed to use moving and handling equipment to move people safely, each person's care plan described the equipment staff needed to use. However, these care plans needed to include more detail about each piece of equipment and how staff should use it to ensure they moved each person in the safest way. We were satisfied staff understood how to move people safely as they received practical training and clearly understood the needs of the people they supported.

We recommend the provider considers current good practice guidance about the assessment and management of risks and update their practice accordingly.

### Using medicines safely

- Medicines were managed safely, and staff supported people to take their medicines as prescribed. People and their relatives were happy with the support they received with their medicines.
- Some improvements were needed to the provider's records in respect of medicines management. For example, additional information was needed in people's care plans in respect of 'when required' medicines to ensure staff knew how to recognise when to offer those medicines. The registered manager updated people's care plans with this information immediately after the inspection.
- Staff were trained in how to manage medicines safely. Their competence to manage medicines was kept under regular review to ensure their skills and knowledge remained up to date.

### Staffing and recruitment

- The provider used safe recruitment practices when employing new members of staff, to check they were suitable to work with vulnerable people. We found one staff file where a staff member's full work history had not been documented at the point of employment, however this was addressed immediately by the registered manager. All other necessary checks had been completed.
- There were enough staff employed and staff were allocated enough time during each care visit to meet people's needs effectively. People and their families told us, "Their time keeping is excellent and they never let us down" and "They arrive on time and always complete all their tasks."
- People received care from a consistent staff team which supported good continuity of care. The provider

encouraged staff to work a regular pattern of hours every week so people were supported by the same staff who got to know them well.

Systems and processes to safeguard people from the risk of abuse

- The provider had suitable systems in place to protect people from the risk of abuse. All staff were aware of the need to raise any concerns immediately with the registered manager so action could be taken. Staff were confident the registered manager would act on any concerns they raised to ensure people were made safe.
- People told us they felt safe when being cared for by staff. People's relatives had no concerns about their family member's safety. Comments from people and their relatives included, "I feel very safe in their care. They are like friends. I am very happy" and "I can tell [my family member] is very happy with the carers and experiences safety and security with them."

Preventing and controlling infection

- There were systems in place to support staff to control the spread of infection. Staff completed training in respect of infection prevention and control, and they had access to adequate supplies of personal protective equipment (PPE).
- People felt their safety was promoted as staff always wore PPE appropriately. A person commented, "I have a regular carer who always wears a mask, apron and gloves."

Learning lessons when things go wrong

- Accidents and incidents were managed appropriately. Staff knew when and how to report relevant events so action could be taken to address any concerns. Senior staff reviewed information about any accidents and incidents to ensure enough action had been taken to reduce the risk of a similar event occurring.



# 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 our last inspection we rated this key question requires improvement. At this inspection the rating has changed to 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 before the service started to provide care to them. A personalised care plan was created following the assessment process, so staff knew what care each person needed and when.
- People and their relatives were involved in the assessment and care planning process. This enabled staff to identify people's preferences and ensure their care was tailored to their individual needs and choices.
- People and their relatives were very happy with the standard of care delivered by the service.

Staff support: induction, training, skills and experience

- New staff completed an induction to ensure they were well prepared, competent and equipped to deliver high quality care. The induction process included shadowing more experienced staff.
- Staff received a range of training to help ensure their knowledge was up to date. A person told us, "The staff are well trained, and I am very well looked after" and a relative commented, "The carers are very well trained... they are excellent at their work."
- Staff received regular support and guidance to review their competence, discuss areas of good practice and to consider ways they could continue to improve. This was achieved through a mixture of spot checks, supervisions and staff meetings. Staff felt very well supported by the management team.
- Staff were overdue their annual appraisals to review their performance over the past year, however the registered manager had planned to prioritise them.

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

- People's nutrition and hydration needs were met. When people were supported with food and fluids, their care plans contained clear guidance about what staff needed to do for each person, whilst promoting their independence.
- People's dietary preferences were described in their care plans, so staff could support them in a personalised way. People and their relatives told us they were happy with the support they received with their nutrition and hydration.

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

- Staff worked closely with other organisations to deliver effective care and support. A social care professional who worked alongside the service commented, "The management team are very good at communicating and working alongside other professionals. They are very flexible as a company and have helped families out in a crisis."

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 particular 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. When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty.

We checked whether the service was working within the principles of the MCA.

- Staff understood the importance of supporting people to make their own decisions and obtaining consent from people before care was delivered. A staff member commented, "I talk through what I need to do and involve them, step by step, along the way."
- People's care plans recorded whether they had capacity to make their own decisions about their care and also whether they had given any other person legal authority to make these decisions. People signed their care plans to indicate they consented to them, where they were able to make this decision.

# 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 our last inspection we rated this key question good. At this inspection the rating for this key question has 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; respecting equality and diversity

- Staff were kind and caring and treated people with respect. People and their relatives commented, "All the staff are kind and caring, showing great respect and care for [my family member's] needs" and "They are very kind and caring, treating [my relative] with dignity and respect. They show compassion and are trustworthy."
- The provider had an effective system in place to ensure people felt comfortable with staff. This included providing a consistent, stable staff team to each person.
- We were satisfied care and support was delivered in a non-discriminatory way and the rights of people with a protected characteristic were respected. Protected characteristics are a set of nine characteristics that are protected by law to prevent discrimination. For example, discrimination based on age, disability, race, religion or belief and sexuality.

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

- There were effective systems in place to support people to make decisions about their care and express their views. The assessment, care planning and review process ensured people remained actively involved in decisions about how and when they were supported by staff.
- People's relatives told us staff were very good at communicating with them to ensure they could support their family member with any decisions, as and when needed. Relatives commented, "I have a lot of dealings with the carers. The rapport is very good. We speak on a regular basis" and "They are very effective communicators and always create good notes and also give verbal feedback when needed."

Respecting and promoting people's privacy, dignity and independence

- People were treated with dignity and respect and their right to privacy was promoted. People's comments included, "They are very kind, respectful and always observe my privacy" and "They are always kind and respectful. They are ever so good making sure my privacy and dignity is acknowledged."
- People's care records clearly recorded which tasks people could do for themselves and what they needed support with. This helped to promote people's ongoing independence. A staff member confirmed, "I always encourage people to do as much as possible" and a relative commented, "The carers do encourage independence within safe and supervised tasks."

# Is the service responsive?

## Our findings

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

At our last inspection we rated this key question requires improvement. At this inspection the rating has changed to 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; 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 received person-centred care which met their needs. People told us, "The carers and service are always very responsive" and "I feel they know me and my care needs well." A social care professional who worked with the service confirmed, "The Caring Choice have excellent care staff that offer person-centred care for individuals."
- People's care plans were person-centred and easy to follow. The content of people's care records demonstrated staff had a good knowledge of people's needs, preferences, likes and dislikes. This supported staff to deliver individualised care to each person.
- Staff respected people's routines and interests. They supported people to access the community and take part in activities that were of interest to 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.

- People's communication needs were assessed and met. People's care records contained information to support staff to communicate effectively with people.

### Improving care quality in response to complaints or concerns

- The provider had a suitable policy and procedure in place about how and when people could complain about the service.
- People knew how to complain and felt able to raise any issues or concerns with the registered manager and staff, however they were all clear they had never needed to complain. A person commented, "I have no complaints or concerns and would recommend the service."

### End of life care and support

- The provider was not supporting anyone with end of life care at the time of this inspection. However, the provider had systems in place to support people at the end of their life to have a comfortable, dignified and pain-free death.
- The service had received compliments from relatives of people who had received support from the service at the end of their lives. A recent compliment thanked the staff for caring for the person's loved one with

kindness.

# 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 we rated this key question requires improvement. At this inspection the rating has changed to 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

- The service had an open, transparent culture and a desire to continuously improve. Staff were confident any concerns or issues they raised would be dealt with appropriately by the registered manager. A staff member commented, "There is an open culture and I definitely feel able to report issues and concerns to management."
- Staff morale was positive, and they all told us they enjoyed their jobs. A social care professional who worked alongside the service commented, "The care staff seem happy in their caring role. The management team look after their staff, giving praise and offering support when needed."
- The provider incentivised staff to deliver good quality care and good practice was rewarded. For example, a care worker of the month scheme recognised staff practice and offered rewards to staff when they had made a positive contribution to the service and people's experience of it.

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 provider had a suitable policy in place in respect of the duty of candour. At the time of this inspection there had not been any incidents which required the provider to take action under their duty of candour policy.

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 registered manager who provided effective support and guidance to the staff team. A staff member commented, "Management are always on hand and have empathy and compassion. I know I can walk into the office and come out feeling better."
- Staff were clear about their roles and responsibilities. They confirmed they received enough support to deliver a good quality service.
- The registered manager and senior staff regularly completed a range of checks on the quality and safety of the service provided. This supported them to identify any areas which could be improved.
- Everyone we spoke with told us the service was well-organised and managed effectively. Comments included, "The company is very well managed and the office well organised. I have the office and a mobile number and always get a quick response. I would recommend them" and "The company is very well organised. I have great rapport with both the manager and office staff. I specifically picked this company because they are small and that is reflected in the honest, personal care they provide."

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- People, their relatives and the staff had opportunities to give feedback about the service. They were actively encouraged to do this via surveys, the complaints and compliments process, during regular reviews of people's care and through informal discussions in person or over the telephone.
- The registered manager made themselves easily available to people using the service, their relatives and the staff. A staff member commented, "I can go into the office at any time and there's always someone available to talk to."
- Staff worked closely with relevant health and social care professionals which helped to ensure people received effective care and support.