

Chizhande Care Services Ltd

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Inspection report

14 Netherwood Avenue
Castleford
WF10 2QW

Date of inspection visit:
26 August 2022
02 September 2022

Date of publication:
26 September 2022

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

Chizhande Care Service Limited is a domiciliary care agency and provides personal care and support to people who require assistance in their own home. At the time of our inspection 14 people were being supported by the service. 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

There were systems in place to monitor the quality of the service and recognise when improvements were needed. We made a recommendation about strengthening audits. Medicine administration support was being provided. People received medicines as prescribed.

The provider carried out checks on the suitability of staff before they started work.

There were systems in place to minimise the risk of infection and to learn lessons from accidents and incidents.

Before people started to use the service, their individual needs and preferences were discussed and recorded for staff to follow. Staff had appropriate skills to meet people's needs. People told us staff were suitably trained and records showed staff had received training appropriate to the role.

People had support to prepare their meals and drinks where they needed this. Staff and the registered manager worked effectively with community health and social care professionals to ensure people's needs were met.

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 were complimentary about the care and support they received from staff. People knew how to raise issues or complaints and found the service responsive.

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

Rating at last inspection

This service was registered with us on 29 June 2021 and this was the first inspection.

Why we inspected

This was the first inspection of a newly registered service.

Follow up

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

This was an 'inspection using remote technology'. This means we did not visit the office location and instead used technology such as electronic file sharing to gather information, and video and phone calls to engage with people using the service as part of this performance review and assessment.

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 effective.

Details are in our effective findings below.

Good ●

Is the service well-led?

The service was well-led.

Details are in our well-led findings below.

Good ●

Chizhande Care Services Ltd

Detailed findings

Background to this inspection

The inspection

We carried out this performance review and assessment under Section 46 of the Health and Social Care Act 2008 (the Act). We checked whether the provider was meeting the legal requirements of the regulations associated with the Act and looked at the quality of the service to provide a rating.

Unlike our standard approach to assessing performance, we did not physically visit the office of the location. This is a new approach we have introduced to reviewing and assessing performance of some care at home providers. Instead of visiting the office location we use technology such as electronic file sharing and video or phone calls to engage with people using the service and staff.

Inspection team

The inspection was carried out by one inspector.

Service and service type

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

Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission 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 available to support the inspection.

What we did before the inspection

We reviewed information we had received about the service. 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

This performance review and assessment was carried out without a visit to the location's office. We used technology such as telephone calls to enable us to engage with people using the service, emails to staff, and electronic file sharing to enable us to review documentation. Inspection activity started on 26 August 2022 and ended 02 September 2022. We spoke to the registered manager and asked five staff questions relating to the quality and safety of the service. We spoke with four people who used the service.

Is the service safe?

Our findings

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

This is the first inspection of this newly registered service. This key question has been rated 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 them well and understood how to protect them from abuse. People we spoke with told us they felt safe using the service.
- Staff had received training in safeguarding and knew how to raise any concerns. One staff member told us, "Safeguarding means protecting adults' rights to live in safety, free from abuse and neglect."
- The manager understood their legal responsibilities to protect people and share important information with the local authority and CQC. There were no open safeguarding incidents at the time of our inspection.

Assessing risk, safety monitoring and management

- People were protected from the risk of harm because the provider ensured risks were assessed and plans put in place to reduce risk.
- People's relatives told us they felt safe as a result of the care they received from staff. Staff told, "A care plan is always in place which guides how we provide the service" and "The care plans are updated by the manager who works hand in hand with the social worker and families."

Staffing and recruitment

- There were enough suitably skilled and qualified staff available to safely meet people's needs.
- Staff were recruited safely, and appropriate checks were carried out to protect people from the risk of unsuitable staff working with them.
- Staff supported people based on their assessed needs. People told us they received the support they needed from staff. One relative told us, "I am getting extra calls now which is a lifeline for us. It just means I can get some respite for a little while."

Using medicines safely

- People received their medicines safely and as prescribed.
- There was a policy and procedure for the safe administration of medicines and staff were aware of these. Staff received medicines training and had their competency assessed.
- The registered manager carried out regular audits of medicines and the medicines administration record (MAR) charts. We saw no errors had been identified.

Preventing and controlling infection

- There provider had an up to date infection control policy and procedures in place.
- Staff were provided with suitable personal protective equipment such as aprons, masks and gloves, and were able to obtain these when they required.
- People told us staff maintained good hygiene practices.

Learning lessons when things go wrong

- The provider had a procedure for the management of accidents and incidents. However, no accident or incidents had occurred since the provider had been operating.

Is the service effective?

Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

This is the first inspection for this newly registered service. This key question has been rated good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

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

- People's needs were assessed and planned for in line with their standards, guidance and law.
- The registered manager met with people to discuss their needs before they started to use the service. They carried out assessments that covered people's physical health conditions, personal care, nutrition and mobility. People and their relatives took part in the assessment process.
- The registered manager told us that regular reviews of people's needs were important to ensure changing needs were met.

Staff support: induction, training, skills and experience

- People were supported by staff who were sufficiently trained, supported and supervised. Staff confirmed they received regular training in areas of care that were central to their role. Staff were all up to date with their training.
- People felt staff were trained and experienced in their roles. A person told us, " All the staff are confident and well trained."
- Staff received an induction and training when they first started and continued to receive training to develop their knowledge and skills. One staff member commented, " At the moment I don't feel the need for additional training as I feel confident. If I asked for additional training it would be made available as soon as possible."
- Staff told us, and records showed they received support from the registered manager to improve in their work experience. They had regular supervisions and spot checks to assess their competence in care delivery.

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

- Where people received support to eat and drink enough to maintain a balanced diet. Details were seen in people's support plans.
- One relative told us, "They [staff] help prepare meals, some staff need a little bit of guidance to do it the way we like the meals cooking, but that's just our own personal preference."

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

- Care records included information and guidance from other professionals supporting people.
- People's health needs were identified by the provider's assessment procedures. Care records included clear information about the support people needed to maintain their health.

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, whether appropriate legal authorisations were in place when needed to deprive a person of their liberty, and whether any conditions relating to those authorisations were being met.

- Staff understood the principles of the Mental Capacity Act (2005) and how to support people to make decisions for themselves when they had capacity.

Is the service caring?

Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

This is the first inspection for this newly registered service. This key question has been rated 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

- People all confirmed they received kind and compassionate care.
- Staff used positive, respectful language which people understood and responded well to. A relative told us, "I've had care companies before but [Chizhande Care Services Limited] are by far superior, the attitude, the care they give my relative and the communication is exceptional" and "They [staff] will do anything for us, they leave my relative feeling great."
- Staff were focused and attentive to people's emotions and support needs. A staff member told us, "I know the people I care for well. I know what they want me to do for them by familiarising myself with their routine, looking at their care plan and talking to individuals."
- Staff were able to tell us about people's preferences and how they like to be supported.

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

- The registered manager worked closely with people and their relatives to ensure care was tailored to match their individual needs. We saw evidence of this in people's support plans.
- Support plans were kept up to date and regularly reviewed to ensure staff had all the information they needed.
- The manager had tools in place to gather feedback such as surveys for relatives and people to complete on their experience of care.

Respecting and promoting people's privacy, dignity and independence

- The service ensured people's confidentiality was respected. Records were kept securely.
- Staff treated people with respect and dignity. A staff member told us, "Providing care that promotes dignity is doing things like making sure they are comfortable during personal care and making sure curtains are closed and no one else is in the room."
- People confirmed staff maintained their privacy, dignity and independence. One relative said, "[My relative] is so lucky to drop on such lovely people. We really appreciate how good the staff are."

Is the service responsive?

Our findings

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

This is the first inspection for this newly registered service. This key question has been rated 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 personalised support based on their assessed needs. The registered manager undertook a thorough assessment of people's care needs when they first contacted the service. Care packages were planned with people's and relative's involvement to ensure their needs could be met.
- People were supported by a small team who knew them well and how they like to be supported. One relative told us, "All the staff are lovely, lovely women. Their work ethic is great there's nothing they won't do. I am happy and I'm at ease knowing [my relative] is in their care."
- People's care was reviewed regularly, and people had the opportunity to shape the service they received. The manager told us they regularly amended or updated the care plans with families as and when required.

Meeting people's communication needs

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

- The service had met this standard. Information was available in a variety of formats.
- Staff were skilled in supporting people to communicate and express their views.

Improving care quality in response to complaints or concerns

- There was a complaints policy and procedure in place and people who used the service and their relatives were given information about this.
- A relative told us they had no complaint and said, "If I was concerned about anything, I think they would take action. I have never had to raise a concern."
- The registered manager confirmed they had not received any complaints since they had registered.

End of life care and support

- No-one was in receipt of end of life care at the time of our inspection.
- If required, the registered manager would assess each person individually and work in partnership with community based health professionals.

Is the service well-led?

Our findings

Well-led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

This is the first inspection for this newly registered service. This key question has been rated good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- The provider had clear systems in place to monitor the quality and safety of the service. The registered manager carried out regular quality audits. We found these audits were thorough but did not identify which person's records they had checked.
- Managers completed spot checks of staff during visits which helped ensure people received consistent high-quality support.

We recommend the provider strengthens the audits and further embeds them into practice.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- The registered manager and staff team were fully committed to the values of the organisation which aimed to provide high-quality, person-centred care. The registered manager said, "Our values are that the client comes first and that we have to look after our clients how they want to be looked after."
- People's relatives praised the quality of care provided and said it was better than any they had seen before.
- Staff felt valued and respected by the registered manager and were proud and happy to work for the agency.
- People were encouraged to give their views and feedback about the quality of the service they received.
- The provider ensured people were visited shortly after the start of their service and their views sought.
- People's relatives and staff said they found the management team supportive and approachable.

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 registered manager was aware of their obligations in relation to the duty of candour.
- People's relatives told us they were kept up to date at all times.
- The registered manager was aware of their legal obligations to incidents to appropriate agencies when needed, including CQC and the local authority safeguarding team.

Working in partnership with others

- We received feedback from professional that was positive. One professional said, "I can only mention positive things about this company based on the packages of care they have supported and would recommend them to any other organisation."