

Infinity Home Care Ltd Infinity Home Care Ltd

Inspection report

First Floor 44b Mill Street Kidderminster DY11 6XB

Tel: 01562911652

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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

Infinity Home Care is a small home care agency providing support to people living in their own homes. At the time of the inspection Infinity Home Care was providing personal care support to 17 people.

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

Relatives of people who engaged the service expressed confidence that safe care and support was provided by staff they considered to be trustworthy and caring. People were protected from the risk of harm or abuse by staff who were well trained to deliver safe care and knew about acting promptly when they felt people were at risk. Staff recruitment processes were safe and robust. Relatives said people were safely supported by staff who had been trained in safely moving people, and administration of medication by staff was well managed.

People's care and support needs were assessed and regularly monitored to ensure they were still current and being met. People's wishes, and legal rights were promoted and protected by staff who had received up to date training. The staff felt the training equipped them well to deal with any issues.

People were supported to have maximum choice and control of their lives and staff advised they had been trained to support them in the least restrictive way possible and in their best interests. Relatives told us about positive action taken to ensure people were supported to maintain their independence and to assist them to continue living in their own homes.

Relatives advised they considered the staff to be attentive and able to pick up on issues when they provided care. Relatives spoke positively about staff and said some of the care staff went above and beyond the agreed level of care, making sure the person was well cared for and settled before they left them.

People were cared for by staff who showed genuine regard for their physical and emotional well-being and relatives commented on people receiving personalised care from the staff who supported them in ways they particularly liked.

Relatives said the staff responded well to changes in how people were to be supported, providing prompt support when people were particularly unwell and in need of a level of support that was greater than had been originally planned at the assessment stage. Requests for any short-term changes were also attended to promptly and always met. Agreed plans of care reflected the full care and support needs of people.

Concerns or complaints were responded to in line with the policy and procedures. Relatives expressed confidence that any concerns or complaints would be properly addressed.

The registered manager was well known by staff and relatives of people using the service. Staff and relatives made numerous comments about the registered manager being very approachable, skilled and supportive.

Feedback on the quality of the service had been sought from people who used the service and their relatives using regular questionnaires. The registered manager had plans in hand to improve the regular newsletter and provide fuller feedback from the analysis of the questionnaires returned.

Why we inspected

This was a planned inspection based on the previous rating.

Rating at last inspection

The last rating for this service was good (report was published in July 2017)
For more details, please see the full report which is on the CQC website at 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?	Good •
The service was safe. Details are in our safe findings below.	
Is the service effective?	Good •
The service was effective. Details are in our effective findings below.	
Is the service caring?	Good •
The service was caring. Details are in our caring 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.	



Infinity Home Care 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 Care Act 2014.

Inspection team

The inspection was undertaken by one inspector.

Service and service type

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

The service was managed on a day to day basis by a registered manager who is legally responsible for how the service is run and for the quality and safety of the care provided. The registered manager also delivered direct care to people using the service and had regular contact with relatives of all the people.

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 registered manager would be in the office to support the inspection.

Inspection activity started on 14 January 2020 and ended on 17 January 2020. We visited the office location on 14 January 2020.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report.

During the inspection

We reviewed a range of records. This included two people's care records together with assessment and review records. We looked at one staff file in relation to recruitment and staff supervision and looked at two staff training files. In addition to these records we looked at a small selection of other records relating to the management of the service, including policies and procedures.

After the inspection

Within days of the office part of the visit we spoke with one person who used the service, four relatives of people who used the service and two members of staff.



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 this key question has remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- There were procedures and guidance followed to ensure that people were safeguarded at all times from the risk of abuse.
- Staff were clear about actions and processes they would follow to report any concerns should they arise. People were supported to keep safe by staff who demonstrated good knowledge about known risks.
- People had risk assessments in place for everyday situations and for routine activities of daily living where agency staff were involved in providing support..
- Relatives told us they were confident in the ability of staff to act on any issues should they arise.

Staffing and recruitment

- Full checks were undertaken on staff before they started work with the agency to make sure they were suitable to work with people using the service in their own homes. Obtaining references as part of safe recruit practices were followed.
- Relatives advised there were always the agreed number of staff on each visit to provide the agreed levels of care and support. One relative positively commented, "The staff are trustworthy."

Using medicines safely

- Staff received training in how to safely administer medicines to people following clear procedures.
- Records were maintained by staff detailing medicine administration and application of any prescribed creams or lotions.

Preventing and controlling infection

• Staff were provided with personal protective equipment including gloves and aprons as needed to reduce the risk of cross infection when supporting people.

Learning lessons when things go wrong

• The registered manager advised they always reviewed and followed up on any incidents or occurrences to check staff had taken appropriate action, and to identify any lessons to be learnt.



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 this key question has remained the same. 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 care and support needs were regularly reviewed and reassessed. The registered manager advised the initial visits to people were carried out by them or the deputy to ensure the support plans were accurate and sufficiently detailed. One relative commenting positively on the assessment process concluded by saying, "New staff are introduced to us never have had someone without an introduction being provided first."
- On starting to use the service, a full assessment of support needs had been conducted for each person and the assessment information had been used to inform individual care plans used.

Staff support: induction, training, skills and experience

- On commencing employment with the agency, one staff member said, "Although I was experienced in providing care when I started here I still received good training and get training updates regularly."
- We saw there were clear records detailing training which had been provided for staff alongside detail of training was due to be provided, to enable them to confidently support people. One staff member said, "
 The training is very good.... We work to care plans and when extra training is required we get it."

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

• A relative advised the staff knew what the person liked to eat and drink and ensured that they received timely support with eating and drinking.

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

- The registered manager and deputy advised they had experience of liaising and working with healthcare professionals such as district nurses when needed to help people to continue living safely in their own homes. One relative said, "The staff are skilled and observant and promptly act on health concerns and if there is a need, they do contact a doctor."
- One relative advised that the person using the service had complex care needs and had been very pleased with support provided by the agency. "[Name] is made to feel at ease by staff who know them well. They are very attentive and always on the ball, responding to changes and providing good skin care." Another relative said, "They act on health issues and know when they need to call the doctor."
- One other relative commented, "The staff provide good care and pick up on issues and act promptly."

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 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.

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 and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met. We found that the any such conditions in place were known and followed by staff. When people were unable to make their own decisions, we were informed that relatives were involved in making best interest decisions on their behalf.

• Staff had a good understanding of how to support people to make decisions about how their care and support needs were being met.



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 has remained the same. 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

- Each person's preferences about how they were to be supported was recorded and staff said they liked providing continuity of care as it was usually the same staff who supported each person. One staff member added, "We get good introductions to people we are caring for so we know them, and they get care from staff who they know." One relative confirmed this saying, "We requested continuity of care and this is what we get."
- Relatives said when they had seen staff during support calls they noted, "The staff respond well to [name] and in turn [name] responds positively." One person, who used the service, said, "They go above and beyond their jobs... I couldn't get a better care team."

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

- The registered manager had ensured people's rights were upheld in how the care and support was initially planned to be delivered by staff. The registered manager or deputy went out on each first call to ensure staff delivered care in line each person's wishes. The checking systems in place included occasions when the registered manager or deputy visited people after they had received a call to check with the person all aspects of their planned care had been delivered as they had wanted.
- One relative said, "The staff are friendly, and they adhere to [name's] plan of care that they decided on."

Respecting and promoting people's privacy, dignity and independence

- One relative said, "We are very impressed as a family. The carers are respectful and timely."
- People were supported by staff who upheld each person rights to have their privacy and dignity respected. One relative commented, "They help [name] to be comfortable and privacy and dignity is maintained behind closed doors."



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. At this inspection this key question has remained the same. 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

- Each person had a personalised care and support plan which reflected their preferences and wishes in respect of how their care needs were to be met.
- Care and support was provided by staff who knew everyone well and all were up to date with any changes in how care was to be provided.

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 registered manager had developed care plans which were clear and understood by people who used the service. They advised the care plans were always developed based around discussion with people and presented in plain language to make them clear.

Improving care quality in response to complaints or concerns

- Relatives were clear and confident that any complaints they raised would be listened to and responded to by the registered manager. One relative advised, "If I had any concerns I would talk to the manager." Another relative said, "I have had no complaints or concern about this agency, I know it would be okay to raise a complaint with them; they would deal with it."
- There was an accessible complaints procedure in place to deal with any complaints received.
- Staff referred to action they would take to advocate on behalf of people and raise complaints themselves if they had any concerns. Staff expressed confidence that any concerns raised would be responded to.

End of life care and support

- No one was receiving support for end of life care at the time of the inspection.
- The registered manager advised details of end of life wishes were agreed and recorded in care plans along with any details about who would take care of making arrangements to support last wishes including funeral arrangement in line with the persons own preferences.



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 the same. 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

- Staff commented positively on the support they received from the registered manager. One staff member said, "We get good on-call support. We never feel un-supported."
- Relatives were positive about the support provided to people using the service and to themselves. One relative commented, "They provided a lot of support to me and [name] when someone else was suggesting a change be made which we didn't want to make. They were responsive and caring in how they supported us."
- •One person said, "I always get reminders from the registered manager to speak up and let them know if I have any comments or concerns. They have become like friends to me."

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 advised regular contact was maintained with relatives and people who used the service. There was a process in place to share information with relatives and others should any incident occur.
- The registered manager was open and transparent throughout the inspection process.

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

- The registered manager undertook regular reviews of the support provided and after consultation made changes as needed in the level of support provided.
- The registered manager had delivered on planned improvements which had been advised to CQC at the time of the last inspection, demonstrating the plans were realistic and they did deliver improvements.
- The registered manager had a clear focus on regularly checking the quality of all aspects of the service. The findings from audits and checks were used to identify when changes were needed to maintain the service or to make further improvements. Direct checks on the quality of the care provided included unannounced checks after a call had concluded and observed practice when the registered manager or deputy worked alongside care staff.

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

• The agency produced regular newsletters for people using the service and took the opportunity in them to

share information about the team of care staff as well as the senior staff and administration support. The newsletters were printed in large font and laid out so that people could focus on topics of interest to them.

• The registered manager had sought feedback from people who used the service and their relatives. A questionnaire had been developed and used to gather the views of people and their relatives. The responses received were made available and they were all positive about the support provided. Full analysis and feedback had been undertaken and the results were shared with all who used the service.

Working in partnership with others

• The registered manager, deputy and staff said that they had a good working relationship with healthcare professionals and other agencies when they were involved in supporting people to continue living in their own homes.