

Carers Direct (S.W.) Ltd

Unit 2N, First Floor

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

About the service:

Unit 2N, First Floor, referred to as Carers Direct in this report, is a domiciliary care agency that was providing personal care to 25 people at the time of the inspection. It supports people with different needs and backgrounds. Including people with mobility needs, mental health needs, learning disabilities and dementia.

People's experience of using this service:

People, relatives and staff spoke highly of Carers Direct. The service had strong person-centred values and placed people at the heart of their work. People had access to a stable staff team they knew well and achieved positive outcomes and strong relationships. Comments from people included; "I receive such a high standard of care I have nothing to complain about", "I receive an excellent quality of care" and "I have recommended this company to a friend of mine who like me is losing her sight and she tells me she is getting good care like me from this company."

People were fully involved in their care and their wishes respected. People's views were sought and their consent was always gained before any care took place. People were offered as many choices as possible in ways which met their individual needs. For example, staff had created personalised picture cards to help a person communicate when they were having difficulties with verbal communication.

People's care plans contained personalised information which detailed how they wanted their care to be delivered. Staff knew people well and expressed care and affection for them when speaking with us. All staff we spoke with were proud to work for the service and praised the high standards of care expected.

Risks to people's health, safety and wellbeing were assessed and management plans were put in place to ensure these were reduced as much as possible. During the inspection we identified some risks assessments which had not been completed but this had not impacted on the people using the services because of their stable staff teams. The registered manager assured us these would be completed following the inspection.

People were protected from potential abuse by staff who had received training and were confident in raising concerns. There was a thorough recruitment process in place that checked potential staff were safe to work with people who may be vulnerable.

There was strong leadership at the service and people, relatives and staff spoke highly of the registered manager. There was a positive culture and staff felt their voices were listened to. Carers Direct was a cooperative and as such each member of staff was a member and participated in big decision making.

People were supported by kind and caring staff who worked hard to promote their independence and sense

of wellbeing. We were given examples of the staff going above and beyond for people. For example, one relative said, "One morning I had nipped out and when I got back the carer was hoovering the stairs for me. I was so grateful to her. She said she uses the stairs as well as me and it was the least she could do."

There were quality assurance systems in place to assess, monitor and improve the quality and safety of the service provided.

More information is in the full report

Rating at last inspection: This service was last inspected on 5 September 2016 where it was rated good overall and in every key question. The report was published 13 October 2016.

Why we inspected: This inspection was scheduled based on the registration date of the service.

Follow up: We will continue to monitor the intelligence we receive about the service. If any concerning information is received we may inspect sooner.

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 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 ●

Unit 2N, First Floor

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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Inspection team:

The inspection team consisted of one adult social care inspector and an expert by experience. An expert by experience is a person who has direct or personal experience with care services. In this instance the expert by experience conducted telephone calls to better understand people's experiences.

Service and service type: This service is a domiciliary care agency. It provides personal care to people living in their own homes in the community. It supports adults with different needs and backgrounds. Including people with mobility needs, mental health needs, learning disabilities and dementia.

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

Notice of inspection:

We gave the service two days' notice of the inspection site visit because we wanted to ensure there would be someone in the office.

We visited the office location on 30 April 2019 to see the registered manager, speak with staff; and to review care records and policies and procedures. We also undertook phone calls to speak with people who used the service and their relatives on 1 and 3 May 2019.

What we did:

The registered manager sent us a provider information return (PIR). This is a document completed by the registered manager which contains information on how the service is developing and any planned improvements.

As part of the inspection we spoke with nine people who received care from the service and seven relatives of people who received care over the telephone. We spoke with the registered manager and four members of care staff. We looked at three people's care records and looked at three staff files including training and recruitment. We reviewed the service's accidents and incidents, audits and complaints policies.

Is the service safe?

Our findings

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

People were safe and protected from avoidable harm. Legal requirements were met.

Systems and processes to safeguard people from the risk of abuse; Staffing and recruitment

- People, staff and relatives told us the service was managed in a way that protected people from abuse. The registered manager and staff had undertaken further training in this area. Comments from people included, "I always feel safe with the carers that come to me", "I definitely feel safe as I receive an excellent quality of care" and "I do feel safe. I have an excellent service and am satisfied that I have someone I can trust to keep an eye on me."
- Staff and the registered manager were aware of their responsibilities to protect people and to report concerns over people's safety and wellbeing. We saw evidence of the staff and management having done this in the past to ensure people were safe.
- Recruitment practices were safe and included pre-employment checks from the Disclosure and Barring Service before starting work.
- There were enough staff to ensure people had access to the care that met their needs and protected them from risks. People had small staff teams of known carers to ensure consistency.

Assessing risk, safety monitoring and management

- People were protected from risks associated with their care needs. Risks had been identified and action had been taken to minimise these. At the time of our inspection we identified a number of risks which had been identified and where action was being taken but a risk assessment had not been completed. We spoke with the registered manager about this but found that due to each person having a dedicated team of staff who knew them well and low staff turnaround this did not have an impact on people's care and welfare. The registered manager assured us they would complete these assessments following our inspection.
- Staff were knowledgeable about identifying risks to people and knew to raise this with the management and healthcare professionals.
- Where necessary, we saw specialist advice from healthcare professionals was sought. For example, one relative said, "If mum develops sore skin (the carer) will warn me and tell me to keep an eye on it or to get the District nurse. On odd occasions they will ask me if it is okay if they ring the GP to come and look at mum. I know if they felt it is necessary then it is required."

Using medicines safely

- Where possible people were encouraged to self-medicate or participate in their medicine management.
- Medicines were managed safely and people received their medicines as prescribed. Comments from people included; "No concerns they make sure I take it on time and write up what I have taken."
- The deputy manager conducted audits and reviews of people's medicines and medication administration records (MAR) and responded to any issues identified.
- Only staff who had been trained in the safe management of medicines administered medicines to people. Staff undertook regular competency checks, tests and spot checks.

Preventing and controlling infection

- People and relatives did not have any concerns with regards to staff following good infection control practices.
- Staff had access to personal protective equipment and gloves and received training to ensure good practice in infection control.

Learning lessons when things go wrong

- Where incidents had occurred, action had been taken immediately to minimise the risks of reoccurrence. For example, one member of staff identified that the pharmacy had doubled the amount of medicines in a person's blister pack. They contacted the office who took immediate action to get the person a new prescription.

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

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 needs had been assessed and support plans had been created to guide staff on how best to meet people's needs.
- People's needs were regularly reviewed and where changes had occurred their care plans were updated. For example, following a change in mobility needs.
- People had been involved in the planning of their care and their wishes were respected. People made comments including; "I was involved in the setting of my plan.as I transferred to this company as unhappy with previous one. They always record what they have done in the book and before starting read what was put in on the previous call. If I ask for changes they will give me a new plan" and "I was involved in my care plan and got what I asked for. They always write up in the book what they have done. I am lucky to have such wonderful carers who are not just easy to get on with but efficient all round. A feeling of trust and capability."
- Best practice was sought and communicated to staff.

Staff support: induction, training, skills and experience

- People and relatives spoke highly of the staff competencies with comments including; ""They are well trained and meet my needs at all times", "Their training is excellent" and "Yes the carers are very well trained. They are alert and will pick up anything that needs attention."
- Staff knew people and their needs well and were skilled in caring for people. One person said, "They are all very well trained and know what to do if an emergency arises. In fact in February I (had an emergency) so they rang the Paramedics and stayed with me until they came."
- Staff undertook a thorough induction to the organisation and staff new to care work completed the Care Certificate, which is a nationally recognised course in Induction for care workers. There was a comprehensive training programme to ensure staff had the necessary skills to meet people's individual needs.
- Staff spoke highly of their training from Carers Direct, with comments including; "I am doing loads of training here. I just finished my Care Certificate" and "All the training is great. We're kept up to date with regular training."
- Staff had the opportunity to discuss their training and development needs at regular supervision and appraisals. Staff felt supported and made comments including; "We have high standards here. We talk all the time and have supervision."

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

- Where people needed help with cooking and eating this was provided. People's comments included; "My carer can do straight forward cooking but I am trying to teach her other cooking. She always checks I am well hydrated and if I have spilt anything on my clothes when eating or drinking she will tell me and get me a change of clothes, so important when one can't see" and "They do my main meal, ask what I would like and make sure I have plenty to eat and drink."
- Relatives commented on the ways in which the care staff not only cared for their loved one but also for them. One relative said, "They look after us both in a subtle way ensuring that we eat and drink, provide us with good hydration tips."
- Where people had specific needs and preferences relating to food this was provided. For example, where people required a diabetic diet.

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. We checked whether the service was working within the principles of the MCA, whether any restrictions on people's liberty had been authorised and whether any conditions on such authorisations were being met.
- Care plans had signed consent documents in place and people had been involved in completing them.
- Staff and the registered manager had a good knowledge of the MCA framework.
- People told us staff always asked for consent and explained what they were doing when supporting them. Comments from people included; "Always ask me how I want things done and in what order" and "They are directed by me as I know what I need. They never rush or take over."

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

People were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported

- People and relatives told us how well cared for they felt. Comments included; "I receive such a high standard of care I have nothing to complain about", "I receive an excellent quality of care" and "I have recommended this company to a friend of mine who like me is losing her sight and she tells me she is getting good care like me from this company."
- People were supported by staff who knew people's needs, personalities, likes and dislikes well.
- The registered manager worked hard to ensure people had continuity of care. People had a stable staff team who knew them well. Relatives made comments including; "We have about 3 or 4 regular carers but if they have any new carers they are sent to shadow our regular carer. They are always introduced to us."
- The service were passionate about providing people with the time they needed to have their needs met. The minimum visit time was one hour and people told us staff always stayed for their allotted time. Comments included; "They do spend the full time with me; It is such a change not to be rushed as this company won't provide less than an hour of care time whereas my last company were trying to get it done within 15 mins to 30 mins. It is lovely not to be rushed."
- People told us how staff were dedicated and went 'above and beyond' for them. Comments from people included; "They will help me with anything I ask them to do. If I need some shopping they will take my list and get the things I want bringing it with them on their next call. They also knew I was getting a bit lonely having lost several friends so they found a service that sends volunteers to pick you up and take you to a lunch club and take you home afterwards. This has been wonderful as I now have a main meal with company."
- Relatives also felt staff went 'above and beyond' for them. With comments including; "One morning I had nipped out and when I got back the carer was hoovering the stairs for me. I was so grateful to her. She said she uses the stairs as well as me and it was the least she could do" and "A good example of this is when over Easter when mum and I went to stay with some friends. One of the carers helped with mum's packing. She suggested various garments that she thought mum looked really nice in as well as accessories. They also support me at times when I am feeling unwell."
- Staff spoke about people in ways which demonstrated they cared for them on an individual level and enjoyed their company and attributes. Comments from staff included; "I've built relationships and bonds with my clients. It's lovely" and "I love (Name of person). We go out together, water the plants, go for walks. I love going there, you have a laugh. She's so funny."

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

- People were fully involved in creating and reviewing their care plans.
- People's views were sought, listened to and used to plan their care and improve the service. One person said; "If I have wanted to change my plan I just ring and tell them and they alter it for me."
- People told us they were offered choices in every aspect of their lives. Relatives confirmed this was the case. Where one person had difficulty communicating verbally, staff had created picture cards to help them express themselves. Staff had thought carefully about which pictures to use in order to be respectful of the person's age and intellect. Staff told us these cards were working very well and enabling the person to have more control.
- Care plans included information about people's personal, cultural and religious beliefs. The service respected people's diversity and was open to people of all faiths and belief systems, and there was no indication people protected under the characteristics of the Equality Act would be discriminated against. The Equality Act is legislation that protects people from discrimination, for example on the grounds of disability, sexual orientation, race or gender.
- People were asked whether they had any preferences with regards to the gender of their carers and these preferences were respected.

Respecting and promoting people's privacy, dignity and independence

- People's right to privacy and confidentiality was respected. People made comments including; "They always treat me with dignity and respect. They put the heat on in my bathroom before helping me to shower. They make sure they close door and wrap me in towels when I get out of the shower" and "They are very respectful and protect my dignity. I live downstairs so they make sure I have privacy when using the commode. They will go into the kitchen and attend to things in there."
- People told us staff treated them with dignity and respect. Comments included; "The carers are very kind and I can talk to them if I am worried about anything" and "Everyone I have had contact with from this company has always been kind and respectful. It is important to me as I am over 100 yrs old."

Is the service responsive?

Our findings

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

People's needs were met through good organisation and delivery.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control

- People received care and support in a way that was flexible and responsive to their needs. Comments included, "If I give them notice they will change times for me especially if I need to go for a hospital appointment."
- Care plans provided staff with descriptions of people's abilities and how they should provide support in line with people's preferences. Care plans were regularly reviewed with people and their relatives to ensure they remained current and provided accurate information about how to meet people's needs.
- People were supported to take part in routines and activities of their choice. Staff were knowledgeable about people's preferred routines. Staff also looked for ways to entertain and stimulate people. For example, we heard a member of staff looking for day trips they could take a person on to ensure they had more options when leaving the house.
- People's communication needs were identified and guidance for staff was provided to ensure they could understand people and be understood. The service was able to provide information in different formats, such as large print, and were aware of their responsibility to meet the Accessible Information Standard. One person said, "They are very good as they don't just help with my personal care. I am blind so they also read my mail to me and then take me to the shops to help me with that."

Improving care quality in response to complaints or concerns

- People and their relatives felt comfortable raising complaints and were confident these would be listened to and acted on. Comments included; "I have not made any formal complaints in writing but I have rung the office if I have had any concerns and I think they listen to me and will deal with my concerns" and "I have nothing to complain about. Should something arise I would start with the carer and if still not sorted would contact the office."
- Systems were in place to address any concerns raised. We looked at copies of responses to concerns and saw the service had acted to address any concerns. Learning took place as a result to avoid any repetition.

End of life care and support

- People's care wishes at the end of their lives were recorded in their care files.
- Staff received training on how to support people at the end of their lives.

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

The service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Planning and promoting person-centred, high-quality care and support; and how the provider understands and acts on duty of candour responsibility

- People and relatives told us the service was well managed and spoke highly of the registered manager. Comments included; "I know her (the registered manager) by name and I think the company is well run", "I know the manager, I have spoken to her, she always listens and if anything needs sorting out she will do it for me. I asked her not to send me young carers as I get on better with older carers and they have ensured that is the case" and "I think this company is extremely well led. They provide a high standard of care provision."
- The service informed relatives of any concerns if an accident had happened, and fulfilled their duty of candour.
- The service had a clear, positive and open culture that was shared both amongst the management team and care staff. People were very much at the heart of the service. People and staff told us they would very much recommend the service to others needing care.
- Each staff member we spoke with told us how positive they felt working for an organisation that shared their personal values about delivering high quality personalised care. Staff were highly motivated and very proud to work for Carers Direct.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- Staff spoke highly of the registered manager and made spoke of how appreciated and included they felt. One member of staff said, "(The registered manager) is amazing and really supportive. Her knowledge is incredible."
- The registered manager was supported by administration staff who had auditing and monitoring duties.
- Carers Direct was run as a cooperative. All carers were self-employed, members of the cooperative and involved in all big decision making. These included nominating different staff members each year to be the directors. One member of staff said, "The beauty about the cooperative is they definitely care about my opinions, everyone's opinions are valued. We listen to each other."
- Quality assurance processes, such as audits, were in place and ensured the registered manager had the information they needed to monitor the safety and quality of the care provided.
- The registered manager was aware of their responsibilities to provided CQC with important information.

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

characteristics

- Staff said the service's management were caring and supportive and that everyone worked well as a team. Comments included; "I feel valued. Everyone is so supportive. We have high standards here."
- The registered manager was committed to involving people in service. They regularly sought views from people, their relatives, staff and external healthcare professionals. Comments from relatives included; "We often get a questionnaire in fact had one about a week ago" and "They send us a questionnaire and they do act on what I have put or suggested."
- Regular staff meetings took place in order to ensure information was shared and expected standards were clear.
- Staff told us they felt listened to, were supported by the registered manager, and had an input into the service.

Continuous learning and improving care

- The registered manager was continually working towards improvements and attended training events and development initiatives.