

# Assist Domiciliary Care Limited

## Choose Your Care

### Inspection report

Silverdale Care Home  
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Newcastle under Lyme  
Staffordshire  
ST5 6PQ

Tel: 01782618357

Date of inspection visit:  
16 May 2019  
20 May 2019

Date of publication:  
14 June 2019

### 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: Choose Your Care is a domiciliary care service which is registered to provide personal care to people living in their own homes. At the time of inspection, 63 people were receiving care and support services.

People's experience of using this service:

People told us they felt safe and staff knew how to identify and report concerns relating to people's safety. Risks were assessed and managed to reduce the risk of avoidable harm. People received support to take their medicines safely. People received timely support by a consistent staff team.

Decisions about people's care and treatment were made in line with law and guidance. People received sufficient amounts to eat and drink to maintain their health. Staff received training relevant to their role and understood people's individual needs well.

People were supported by a caring and compassionate staff team. People were supported to maintain their independence and their dignity was valued and respected.

People were supported by a staff team who understood their needs and preferences. People and those close to them were involving in the assessment and planning of their care. People knew how to raise a concern if they were unhappy about the service they received.

People, relatives and staff felt the service was well managed. The registered manager and provider had made improvements since the last inspection. People and staff were given opportunities to share their views about the service. The registered manager and provider carried out regular auditing to ensure the quality of care provided.

Rating at last inspection: The service was last inspected on 26 March 2018 and rated Requires Improvement. At this inspection we found improvements had been made and the service is now rated Good.

Why we inspected: This was a planned inspection based on the rating from our last inspection.

Enforcement: No enforcement action was required.

Follow up: We will continue to monitor intelligence we receive about the service until we return to visit as per our re-inspection programme. If any concerning information is received, we may inspect sooner.

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

# Choose Your Care

## **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 was carried out by an inspector and an Expert by Experience (ExE). An expert by experience is a person who has personal experience of using or caring for someone who uses this type of care service. Their area of expertise was older people.

**Service and service type:** This service is a domiciliary care agency. It provides personal care to people living in their own houses and flats. It provides a service to older adults, people living with dementia and younger adults.

Not everyone using Choose Your Care receives a regulated activity; CQC only inspects the service being received by people provided with 'personal care'; help with tasks related to personal hygiene and eating. Where they do we also take in to account any wider social care provided.

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 48 hours' notice of the inspection visit because it is small, and we needed to be sure that they would be in.

Inspection activity started on 16 May 2019 when the ExE made telephone calls to people and their relatives. We visited the office location on 20 May 2019 to see the registered manager and office staff; and to review care records and policies and procedures.

What we did:

We used the information we held about the service to plan the inspection. This included checking for any statutory notifications that the provider had sent to us. A statutory notification is information about important events which the provider is required to send us by law. We used information the provider sent us in the Provider Information Return (PIR). This is information we require providers to send us at least once annually to give some key information about the service, what the service does well and improvements they plan to make. We also reviewed any information about the service that we had received from external agencies.

During the inspection we spoke with five people and five relatives of people who received a service. We also spoke with four staff members, the registered manager and the provider. We looked at five people's care records and medicine administration records, records of accidents, incidents and complaints and quality assurance records. We also looked at three staff recruitment records and staff training records.

# 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

- People told us they felt safe when receiving support from Choose Your Care. One person told us, "I certainly do feel safe. I have them four times a day to look after me and give me safe support when getting to shower me and making sure I am safely upstairs at night to my bed."
- Relatives expressed similar views, with one commenting, "Very safe. They can't walk so carers put a belt around his body and hoist him after positioning his legs to a safe and comfortable position. I have watched them and have no concerns at all with their safety."
- Staff had received training in protecting people from harm and knew how to recognise potential signs of abuse and how to raise any concerns for people's safety.
- The registered manager submitted relevant notifications to CQC and had notified the relevant local authority where there were concerns for people's safety.

Assessing risk, safety monitoring and management

- People and relatives told us staff knew about the risks they faced and supported them safely. One relative said, "Exceptionally safe. Their mobility is getting worse so two staff move them carefully supporting under their arms and are very gentle."
- Staff demonstrated a good knowledge of people's individual risks knew and how to manage these risks safely and effectively.
- Risk assessments were in place to ensure staff acted consistently to protect people from harm. For example, where people were at risk of choking, staff received direction and guidance about how the person should be positioned and how they should be supported to eat their meals.
- There were environmental and health and safety risk assessments in place to make sure people and staff were safe in individual homes.

Staffing and recruitment

- People and their relatives told us there were staff available to support them at the times they needed. Where people required the support of two staff, they told us they always received this. One relative said, "[Person's name] does require two carers in the morning and evening calls and always gets two at these times without fail."
- People told us staff arrived on time and stayed for the required amount of time. One person said, "Timing is good and will phone if held up. Always stay full time given and never missed me."
- Staff had been recruited safely. The provider had carried out appropriate checks on staff members to ensure they were safe to work with vulnerable people.

Using medicines safely

- People received their medicines as prescribed.
- Systems used to manage medicines were safe and the registered manager undertook regular checks to ensure people received their medicines safely.
- Improvements had been made to the recording of 'as required' medicines since the last inspection, which improved the registered manager's oversight of medicines administration.

#### Preventing and controlling infection

- Staff told us they had access to personal protective equipment (PPE) such as gloves and aprons and used these to reduce the risk of infection.
- Staff had received training in safe practices to control the risk of infection.

#### Learning lessons when things go wrong

- Staff understood their responsibility to report incidents and accidents involving people they supported. The registered manager then acted to ensure similar incidents did not take place in the future. For example, staff noted a person had injured themselves due to the positioning of their bed. Following a discussion with the person's relative the furniture was repositioned to reduce the risk of further injury.
- Where there were errors observed in staff recordings, the registered manager had identified these and taken action to ensure staff were re-trained to reduce the risk of repeat occurrences.

# 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.

- At our last inspection in March 2018 we rated the service under this key question as, 'Requires Improvement'. This was because the principles of the Mental Capacity Act (MCA) were not always being followed. At this inspection we found improvements had been made and the rating is now judged as 'Good'.

Ensuring consent to care and treatment in line with law and guidance

- People told us they were asked to consent to their care. One person told us, "[Staff ask for my consent] every time. They wouldn't dream of just coming and doing without chatting to me first."
- 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 and found that it was.
- At the last inspection we found a person's representative was signing consent when they did not have the legal right to do so. There were also instances whereby people had been assessed as not having capacity but had been asked to sign their documentation, such as consent forms or assessments. At this inspection we found improvements had been made.
- The registered manager told us they had worked with the staff team since the last inspection to develop and improve their understanding of the MCA. Records reflected appropriate assessments of people's capacity to make decisions about their care had been carried out and recorded. Where people were unable to consent to their care this had been recorded and explained so that staff were aware.

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

- People's needs and preferences were assessed before they started to receive support to ensure their needs could be met. This included information about people's diverse needs such as sexuality and religion.
- People told us they and their relatives were involved in the assessment and planning of their care.
- Care plans reflected people's needs and preferences and included clear guidance for staff. For example, one person's care plan described how a person could become anxious if they felt staff did not understand their health needs. Staff we spoke with were aware of this.

Staff support: induction, training, skills and experience

- People and relatives told us they were confident staff had the required skills to support them effectively. One person told us, "Most certainly [they are well trained]. You can tell by the way they pick up on things knowing my sight is poor like helping me take my watch off which I really struggle doing."
- Staff told us they felt they were well equipped to meet people's need through the support and training



they received. New staff received an induction, relevant training and regular supervision.

- Staff felt supported in their role and able to approach the care co-ordinator or registered manager for guidance.

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

- Where people received support from staff to eat and drink they told us they received sufficient amounts to maintain their health. One relative told us, "Yes staff do meals. They arrange breakfast and lunch. They also always leave her with a drink before they go."
- Staff we spoke with were knowledgeable about people's individual tastes and preferences and told us they encouraged people to eat and drink regularly.
- Where people had specific dietary needs, staff were aware of these and care plans offered detailed guidance about how people's meals should be prepared and the support people required to eat safely.

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

- People were supported to access healthcare services and support when required.
- Where staff noticed a change in a person's healthcare needs they contacted the care coordinator to report this. The care coordinator then contacted the person's relative or, if appropriate, arranged for the person to have a review with the relevant healthcare professional.
- The registered manager described how they worked with other partner agencies to ensure people received care that meet their changing health needs. For example, staff liaising with the district nursing team to support a person with poor skin integrity.

# 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; respecting equality and diversity

- People told us they were treated with kindness by the staff who supported them. One person told us, "They [staff] are all super. Very kind and nice to me, all of them. Very happy with them I don't know what I would do without them. They always cheer me up before they go."
- Relatives also expressed positive views. One commented, "They [staff] are excellent. I cannot praise the carers highly enough. Kind, considerate, talkative, you name it they have it. They will do anything for her. They are outstanding. They show they actually care."
- Staff were aware of people's religious, cultural and social needs and these were reflected in care planning and delivery.

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

- People told us they were supported to be involved in decisions about their care.
- Staff described how they offered people choices and delivered care with consideration for people's personal preferences and routines. For example, staff described how one person is given their medicines in a specific order according to their preferences.
- Care records were written in a way that promoted choice and control. For example, 'I do not like to be rushed, give me time to make decisions'.

Respecting and promoting people's privacy, dignity and independence

- People told us staff respected their privacy and dignity. One person said, "[Staff are] most respectful when washing or showering me. The door is closed and blinds drawn."
- Another person described how staff promoted their independence, "By making sure everything is in position due to my poor sight this helps me knowing where things are."

# 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 told us their care was planned in a way that met their needs and preferences. A relative shared with us how personalised call times helped their family member, "By being flexible with calls times it helps his independence no end to know he can get to external appointments and still knowing the carers will be coming to him later on."
- Another relative told us they felt staff had a good knowledge of their family member's needs which helped them to remain calm; "One of the most important things is they stop and talk to him. He really likes that due to his lack of speech and this puts him at ease."
- Staff demonstrated a good understanding of people's needs and preferences. They spoke passionately about people's life histories, personalities and interests and records also reflected people's individual wishes.

Improving care quality in response to complaints or concerns

- People and their relatives told us they knew how to raise a concern about the support they received if necessary. People shared with us concerns they had raised and how they had been addressed. For example, the timing of support calls.
- The provider had a system in place to ensure the effective management of complaints and the registered manager and provider oversaw any concerns escalated to them by staff.

End of life care and support

- No-one was receiving end of life care at the time of the inspection.
- Where appropriate people's wishes for their end of life care had been considered and recorded. For example, using an advanced decisions care plan.

# 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.

- At our last inspection in March 2018 we rated the service under this key question as, 'Requires Improvement'. This was because quality monitoring systems were not always effective in identifying omissions. At this inspection we found improvements had been made and the rating is now judged as 'Good'.

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

- People and their relatives told us they felt the service was well-led. One relative said, "The service is brilliantly run, so responsive and flexible."
- The management team promoted a positive culture which was reflected in feedback from staff who told us they felt valued and listened to.
- The management team had a good understanding of people who used the service and were keen to ensure people received a good quality of care.
- The management team were aware of their responsibilities under the Duty of Candour. The Duty of Candour is a regulation which all providers must adhere to. Under the Duty of Candour, providers must be open and transparent, and it sets out specific guidelines providers must follow if things go wrong with care and treatment.

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

- The registered manager understood the legal requirements to notify CQC of incidents of concern, safeguarding and deaths.
- The registered manager regularly reviewed the quality of care people received. They completed audits on care and medicines records and took action where inconsistencies were identified.
- The registered manager was aware of their obligation to display their rating given by the CQC. The rating from our previous inspection was displayed in the registered office. This is important as it allows the people, relatives and the public to know how the service is performing.

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

- People and their relatives had the opportunity to express their views about the quality of service provided. One person told us, "I have given them plenty of feedback and sent my form back. It's all good."
- People and their relatives were able to contact the care coordinator or registered manager to raise any queries or concerns.

- Staff felt able to share concerns with the registered manager and told us they found them to be approachable. One staff member said, "I can't praise [name of registered manager] enough. We are given the freedom we need to support people well. We are not judged, we are supported."
- Staff received supervision and feedback about their role.

#### Continuous learning and improving care

- The registered manager and provider had worked together to make the improvements required following the last inspection. The registered manager told us, "We have worked hard on continuity, ensuring people receive consistent care. Our staff are very caring and they are good at reporting any concerns."
- The registered manager was open about where further improvements could be made and told us they worked alongside the provider to further develop the service.
- The provider told us they felt the registered manager's impact on the staff team was positive and they provided consistency and support.

#### Working in partnership with others

- The registered manager and staff worked well with healthcare professionals when required.
- Where appropriate, relatives were involved in the care planning process and offered guidance to staff about people's preferences.