

Caafi Health Care Limited

# Caafi Health Care Limited

## Inspection report

Unit 18, The Coach House  
2 Upper York Street  
Bristol  
BS2 8QN

Date of inspection visit:  
09 January 2023

Date of publication:  
09 February 2023

### 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

Caafi Health Care Limited is a domiciliary care agency that provides personal care and support to people who live in their own home. At the time of our inspection there were three people using the service.

Not everyone who used the service received personal care. CQC only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do we also consider any wider social care provided.

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

At the time of the inspection, the location was providing care and support for one person with a learning disability or an autistic person. We assessed the care provision under Right Support, Right Care, Right Culture, as it is registered as a specialist service for this population group.

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

#### Right Support:

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 supported by staff who promoted their choice and control.

People were supported by enough staff who had received training. The registered manager had systems in place to ensure people were supported by staff who had various checks and risk assessments in place prior to working with vulnerable people.

#### Right Care:

People received care that was person-centered and promoted their dignity, privacy and human rights. One person's care plan required updating as it stated the person lacked capacity, the registered manager assured us this was not the case.

One relative and health professional confirmed people received positive care from staff. They told us how

positive changes had been experienced in how the person presented themselves and how through positive relationships built, they were more accepting of care.

Staff received training in safeguarding adults and care plans contained important information in promoting people's independence.

#### Right Culture:

People were supported by staff who were respectful and who were flexible to the needs of the service. The culture of the organisation was open and honest, and the registered manager was keen to ensure the care was of a good quality.

The registered manager and staff put people at the centre of the care delivered, ensuring their rights were respected.

#### Why we inspected

This service was registered with us on 26 August 2021 and this is the first inspection.

#### Follow up

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

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.

# Caafi Health Care Limited

## Detailed findings

### Background to this inspection

#### The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Health and Social Care Act 2008.

#### Inspection team

The inspection team consisted of one inspector.

#### Service and service type

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

This service provides care and support to people living in 'supported living' setting, so that they can live as independently as possible. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for supported living; this inspection looked at people's personal care and support.

#### Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations. At the time of our inspection there was a registered manager in post.

#### Notice of inspection

This inspection was announced. We needed to be sure the registered manager would be in the office to support the inspection. We also needed to speak with people over the phone.

Inspection activity started on 9 January 2023 and ended on 13 January 2023. We visited the location's office

on 9 January 2023.

#### What we did before the inspection

We reviewed the information we had received about the service. We used all this information to plan our inspection.

The provider was not asked to complete a Provider Information Return (PIR) prior to this inspection. A PIR is information providers send us to give some key information about the service, what the service does well and improvements they plan to make.

#### During the inspection

We spoke with the registered manager and two office staff. We reviewed a range of records. This included three care plans and two medication records. We looked at two staff files in relation to recruitment and various policies and procedures, and the providers mission statement. Following the inspection, we gained feedback from one person, one professional, two relatives and one care assistant.

# 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.

### Staffing and recruitment

- People were supported by enough staff.
- The registered manager had systems in place to ensure risks and checks were undertaken prior to staff working with vulnerable people. Staff had a Disclosure and Barring Service (DBS) check in place or were on the update service. Risk assessments were also in place if required. A Disclosure and Barring Service (DBS) check provides information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.

### Systems and processes to safeguard people from the risk of abuse

- Policies and procedures were in place to protect people from abuse. The registered manager was able to confirm the process they would follow should the need arise.
- Staff had received safeguarding training.

### Assessing risk, safety monitoring and management

- People's care plans contained important information such as environmental risks. No-one at the time of the inspection required assistance or support with their mobility.
- People were supported by staff who received training in safe moving and handling. This meant should people require assistance with specialist equipment staff had received training to support people safely.

### Using medicines safely

- People received their medicines safely from staff who had received training in the safe administration of medicines.
- Body maps were in place for people so that staff knew where to apply topical creams. Records confirmed this.
- People received their medicines when required. Records confirmed this.

### Preventing and controlling infection

- People were supported by staff who wore personal protective equipment, such as gloves, aprons and surgical face masks.
- The registered manager confirmed they had plenty of personal protective equipment.
- People were supported by staff who had received training in infection control.
- The registered manager confirmed all staff had been vaccinated at the time of the inspection. They also told us that they could provide additional information to people and staff in relation to vaccinations and

Covid-19 should the need arise.

#### Learning lessons when things go wrong

- At the time of the inspection the registered manager confirmed one incident had occurred. Actions had been taken to prevent this from happening again.
- The registered manager was responsible for monitoring any incidents and accidents and taking any necessary actions should this be needed.



# 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.

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.

- People's care plans contained important information about any medical diagnosis. However, one person's care plan stated they lacked capacity. Whilst discussing this with the registered manager they confirmed this was not the case. This meant the person's care plan needed to accurately reflect important information relating to if the person lacked capacity or not.
- Staff had received training in mental capacity.
- Staff prompted people to make decisions about their care and support. One member of staff told us, "We encourage people to make their own choices. We communicate with them it's their choice".

Staff support: induction, training, skills and experience

- People were supported by staff who had received training. Training included, dignity and equality, food hygiene, health and safety and basic life support.
- The registered manager following our inspection confirmed some staff were also qualified nurses this meant staff could seek guidance from colleagues if medical queries arose.
- Staff felt supported and able to raise any issues or concerns with the registered manager. The registered manager confirmed they aimed to provide staff with regular supervision about every 6 weeks.
- Staff were supported to complete the Care Certificate. The Care Certificate is an agreed set of standards that define the knowledge, skills and behaviours expected of specific job roles in the health and social care sectors. It is made up of the 15 minimum standards that should form part of a robust induction programme. Records confirmed staff had completed this.

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

- People were supported, if required to receive a balanced diet and to stay hydrated.
- Care plans contained important information relating to people's wishes and what they enjoyed to eat and drink.
- Staff gave examples of how they supported people. For example, one member of staff told us, "I give a choice of what sandwich and what drink someone would like".

Staff working with other agencies to provide consistent, effective, timely care;

Supporting people to live healthier lives, access healthcare services and support

- People's care plans contained important information relating to health care professionals and any involvement they might have with people's care.
- Records were retained to demonstrate when the registered manager had liaised with social workers about any changes to people's care and support needs.
- One professional told us how good the communication was with staff. They told us, "They communicate with us every day. It's very good".
- One Social care professional had provided feedback to the service. They had confirmed, '[Individual] is looking great. The way you have engaged with [Individual] and worked in partnership has been fantastic. Thanks to you and your team for all your hard work'.

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

- Care plans contained important information relating to people's religion or any hearing or visual needs. This included any prompts the person might require from staff such as visual aids or pictures.
- People were supported by staff who had completed equality and diversity training. This was covered within the Care Certificate. The registered manager and staff confirmed how care was provided in a personalised way to people respecting them as individuals.

# 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 and relatives felt the care provided was supportive and good. One person told us, "Very Good". One relative told us, "Really good".
- People were supported by a small staff team who had formed positive relationships with people. One relative told us, "They keep consistency, their relationship is good". One professional we spoke with told us, "There has been a complete difference, I can't fault them. [Name] looks completely different in a positive way. They have a good approach with [Name]".
- People received support from staff who respected their equality and diversity. One member of staff told us, "We respect people. It's their choice"
- People were supported by staff who had received training in equality and diversity.

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

- People were supported by staff to make daily decisions about their care and support. One member of staff gave examples of how they encouraged people to make daily decisions. These included what they wanted to eat, drink, if they wanted a shower and what they wanted to wear that day.
- People's care plan's contained important information such as how people wished to be supported with their care including their daily support routines. One member of staff told us, "I always ask giving choice". For example, "If they would like a shower and giving choice about clothes".

Respecting and promoting people's privacy, dignity and independence

- People were supported by staff who respected people's privacy, dignity and independence.
- One member of staff told us, "We take it slow and very patiently. We give choice and preference". They went on to say how they ensure curtains are closed and doors are shut to promote people's privacy when providing intimate personal care routines.
- One professional shared with us their experience of the difference they had observed in one person since getting care from Caafi Health Care Limited. They told us how the person was presenting in clean clothes and well kempt. They also confirmed how staff had built such a good rapport with the person they were accepting their support whereas in the past they had often declined care provided.

# 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's care plans were personalised and contained important information relating to people's life histories.
- One relative shared with us with how comprehensive they felt the initial assessment had been. They told us, "They spent a lot of time at the assessment, gathering information" they went on to explain it was a positive experience for them.
- One member of staff spoke passionately about how important it was to provide care that was personalised to the person. They described the importance of the person being at the centre of the care they provided, ensuring they promoted their wishes and choice through their individual needs and preferences.

Meeting people's communication needs

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

- People had access to an easy read version of a service user guide. This covered important information such as who is responsible for the service, what to expect of the care provided and data protection and how information is handled.
- The provider had a policy to ensure people received their care in a format suited to their needs. Should this be identified.
- No-one at the time of the inspection required information in line with the Accessible Information Standard (AIS).

Improving care quality in response to complaints or concerns

- The provider had a complaints policy and easy read version of this within the service user guide document available in their care plan.
- At the time of the inspection no complaints had been made. Feedback we received from people and relatives was positive. When one relative shared information with us, we passed this on to the registered manager. They took necessary action and they fed back to us the action they had taken.

End of life care and support

- No-one at the time of the inspection was receiving end of life care.
- Care plans contained important information relating to people's health diagnosis and any health conditions.

# 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

- The registered manager was responsible for ensuring quality assurance checks were undertaken.
- The registered manager understood when to make notifications to the Care Quality Commission (CQC).
- The registered manager at the time of the inspection was supporting people with their care and support. This was whilst the service was establishing and growing in size.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; 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

- People received person-centred care that promoted a good positive outcome for people. One relative told us, "They are developing a good relationship, more than happy".
- The mission, vision and values of Caafi Health Care was, 'To treat everyone with integrity, kindness and respect'. The core values were; 'Kindness is honesty' and 'Empowering you to have the life you want'.
- The registered manager was accessible and approachable. Due to the service at the time of the inspection only supporting three people, the registered manager confirmed they were undertaking care visits whilst also managing the service. This they felt would change in the future as the service grew in size.
- The staff team at the time of the inspection was small and flexible. All staff including office staff were able to adapt to the needs of the service. This included providing care and support to people if and when required.
- The registered manager was building up the service slowly. It was important to them they created a team that could support people safely and inline with their individual needs.
- The registered manager was open and honest and was passionate about getting things right for people they supported.

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

- The registered manager confirmed they would be implementing a system to gain feedback from people in the future. At the time of the inspection this was being done regularly through reviews and visits.
- We received positive feedback from one professional who spoke highly of the care and support provided by the service. They felt the care the person was now receiving was not only working well for them but they had seen a significant improvement in how the person presented themselves each day.

Continuous learning and improving care;

Working in partnership with others

- The registered manager confirmed they had a positive working relationship with the local authority.
- The registered manager liaised with professionals as required to ensure people received the care and support required and care that met their individual needs. Records confirmed this.