

Care 4U Services (Midlands) Ltd

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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

Care 4 U (Midlands) Limited is a domiciliary care agency which provides personal care to people in their own homes. At the time of our inspection the service was providing the regulated activity personal care to 109 people. CQC only inspects the service being received by people provided with personal care. This is help with tasks related to personal hygiene and eating. Where they do, we also consider any wider social care provided.

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

People and relatives spoke positively about the service they received. Staff knew how to keep people safe and protect them from harm. Staff were recruited safely. Risks associated with people's care and their home environments were identified, assessed and well managed. Staff were trained in medicine management and people received their medicine safely. The prevention and control of infections were managed in line with government guidance and the provider's procedures.

People and their relatives had confidence in the ability of staff to provide effective care. Staff development was supported through an induction when they started work. Ongoing training was provided to the staff team to ensure their skills and knowledge remained up to date to provide effective care. People had access to healthcare professionals to ensure their ongoing healthcare needs were met.

People received person centred care and had developed positive relationships with staff. Staff had a good understanding of the care and support people needed and provided this safely with care and compassion. People's right to dignity and privacy were respected and their independence was promoted.

Care plans were developed in partnership with people to ensure they reflected people's preferences, religious and cultural beliefs and values. People and their relatives knew how to make a complaint. Feedback was welcomed and was used to drive forward improvements and learn lessons.

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.

The registered manager had processes in place to monitor and review the quality of the service provided, for example, audits of care records. The provider had a contingency plan in place, to minimise any risks to the service running safely in the event of, for example adverse weather conditions. Staff felt supported by the registered manager who worked in an open and transparent way.

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

Rating at last inspection and update

The last rating for this service was requires improvement (published 15 March 2021) and there were two breaches of regulation. The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

Why we inspected

This inspection was carried out to follow up on action we told the provider to take at the last inspection.

The overall rating for the service has changed from requires improvement to good. This is based on the findings at this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Care 4 U (Midlands) Ltd on our website at www.cqc.org.uk.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information 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 ●

Care 4U Services (Midlands) 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

One inspector carried out this inspection.

Service and service type

This service is a domiciliary care agency. It provides personal care to people living in their own houses and flats. 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 24 hours' notice of the inspection. This was because we needed to be sure that the registered manager would be in the office to support the inspection.

What we did before the inspection

We reviewed the information we had received about the service since the last inspection. We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspection. We used all of this information to plan our inspection.

During the inspection

We spoke with five people who used the service and five relatives about their experience of the care provided. We spoke with seven members of staff including the registered manager and managing director.

We reviewed a range of records, including five people's care records. We looked at five staff files in relation to recruitment and staff support and a range of records relating to how the service operated and was managed.

After the inspection

We reviewed staff training records and the providers policies and procedures.

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 requires improvement. At this inspection this key question has now improved to good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People and relatives felt safe with staff. One person told us, "I feel safe and well supported, I trust (staff member), they are very kind."
- Staff received training in safeguarding adults and demonstrated they understood their responsibilities to report any concerns. Staff were confident that any issue reported would be addressed.
- The registered manager understood their responsibility to report any concerns to the local authority and to us (CQC) to ensure any allegations or suspected abuse were investigated.

Assessing risk, safety monitoring and management

- People's care and support needs were assessed before the service started, to ensure these could be met.
- At our last inspection we found risk of harm to people was not always well managed. During this visit improvements had been made. Risks associated with people's care and their home environments had been assessed and regularly reviewed.
- Staff demonstrated a good understanding of how to manage risks. One staff member said, "[Person's] behaviour recently changed, and they became abusive to me. I reported this to the manager, and they spoke to the social worker and it was agreed that [Person] would benefit from a different type of support."
- There was a contingency plan in place to minimise any risks to the service running safely in the event of adverse weather conditions for example.

Staffing and recruitment

- People told us they were happy with the timing of their care calls. One person told us, "they are late sometimes, but they will always phone me to apologise and explain."
- Staff were recruited safely and there were enough staff to provide people's planned care calls.
- The provider had an electronic system in place to monitor the time staff arrived and left people's homes. The management team checked this regularly to ensure people had received their planned care. This ensured any late or missed calls were quickly identified and addressed.

Using medicines safely

- Most people administered their own medicines or had family members who supported them to do this.
- Where staff supported people to take their medicines, this was done safely and recorded in their care plan.
- Staff completed training to administer medicines and their competencies were regularly checked.

Preventing and controlling infection

- People told us staff wore personal protective equipment (PPE). One person said, "they always wear a

mask and gloves while helping me, it keeps us both safe."

- Risks to infection were well managed and up to date policies and procedures were in place.
- COVID-19 tests were carried out three times a week as a minimum for staff.
- Staff received training in infection control and understood their responsibilities. They told us there was a good supply of PPE to maintain good infection control practice.

Learning lessons when things go wrong

- Lessons had been learnt since our last inspection. The provider had made improvements and was now assessing risks and monitoring the quality of care.
- Accidents and incidents were recorded and reviewed regularly to identify patterns and trends to prevent reoccurrence. For example, referrals to health professionals had been made following a change in a person's care needs.

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 requires improvement. At this inspection this key question has now improved to good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Staff support: induction, training, skills and experience

At the last inspection there was insufficient support and training in place for the staff, to ensure that they could support people safely. This was a breach of regulation 18 (Staffing) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 18.

- New staff received an induction and worked with an experienced staff member until they were confident to be included on the staff rota, to work unsupervised.
- Staff felt improvements had been made to their training and development since our last inspection. Staff spoke positively about their training. One staff member said, that working for the provider had "been the best experience because of the training and support offered."
- The management team carried out spot checks of staff practice to ensure they were providing care, in line with their training.

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

- People and relatives had confidence in the ability of staff to provide effective care. One relative said, "the staff are friendly, professional and respectful."
- People and relatives had contributed to an assessment of their needs, including how they wished to be supported by the provider.
- Staff told us the information gathered during assessments was used to develop care plans and risk assessments which helped them to get to know people.

Supporting people to eat and drink enough to maintain a balanced diet; Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- Staff had a good understanding of people's dietary needs and followed recommendations made by health care professionals. For example, staff told us a health care professional had recommended serving bite sized food for one person.
- The service has established effective working relationships with other professionals involved in people's care, including GP's and social workers. This supported people's health and well-being.

- The registered manager ensured staff had access to information about professionals involved with each person, this meant they could be contacted if support was needed.

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

- People and relatives confirmed staff worked within the principles of MCA. One person told us, "The [staff] always ask me, before helping me. They ask what I want them to do first and wait till I'm ready."
- Staff ensured people were involved in decisions about their care, by having regular discussions with them.
- Staff had received MCA training and demonstrated an understanding of the principles. One staff member said, "If I felt there was a change in someone's ability to give consent, I would inform the manager, as the care plan may need to be reviewed."

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 requires improvement. At this inspection this key question has now improved to 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 said staff were caring and treated them with dignity and respect. One relative described staff as, "very caring", stating that they "couldn't fault them."
- People were supported by staff to express their individuality and to live their lives, in a way that was important to them.
- Staff spoke with care and compassion about the people they supported.
- Staff felt supported in their roles. One staff member told us, "There's good teamwork and everyone is supportive."
- The registered manager supported staff through team meetings, one to one support and being available over the telephone. One staff member told us, "The manager always sorts things out promptly."

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

- At our last inspection we found people were not always involved in decisions about their care. At this visit improvements had been made. People and relatives were contacted regularly by the registered manager to see if changes were needed to the service. One person told us, "I do speak to them regularly and they address any issues for me straight away."

Respecting and promoting people's privacy, dignity and independence

- People and relatives told us their right to privacy was respected. One relative said, "The staff always knock and say hello to me when they arrive, they respect that they are in my home, which is important to me."
- Staff promoted people's independence. One person told us, "Staff help me to manage at home by myself and be as independent as possible, I would not be able to cope without them."

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 requires improvement. At this inspection this key question has now improved to good. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- People received personalised and responsive care. One person said, "I get good care, it meets my needs, in a way I want to receive it." This demonstrated improvement had been made in this area since our last inspection.
- Care records contained detailed information to help staff meet people's needs, including their likes and dislikes and things that were important to them.
- Staff told us if people's needs changed, they would discuss this with the manager. This meant the care plan could be reviewed.

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.

- Staff knew how to communicate effectively with people. One staff member told us, "[Person] can communicate but needs time to process what you have said, short, simple sentences are needed and you need to wait, to give them time to answer you."
- The registered manager demonstrated a good understanding of the AIS. Information was available in the appropriate format for each person, such as large print and available in different languages.

Improving care quality in response to complaints or concerns

- People and relatives knew how to complain. One person said, "I would call the manager and they would sort it out for me."
- Complaints were recorded and analysed monthly by the registered manager. The registered manager said, "If something goes wrong, it is important to put it right for that person, however small or minor it is, as it is important to them."

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 requires improvement. At this inspection this key question has now improved to 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

At the last inspection robust systems were not in place to ensure the quality and safety of the service was monitored effectively. This was a breach of regulation 17 (Good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 17.

- The service had a registered manager in post who was supported by two care co-ordinators. People and staff had access to an on-call duty manager, out of office hours.
- Staff understood what the provider expected of them and they demonstrated a commitment to providing good care.
- Managerial oversight of the service was good. The registered manager demonstrated an understanding of the regulations and their responsibilities. For example, they had informed us about important events within the service.

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

- People and relatives were encouraged to share their views and provide feedback about the service. The registered manager regularly contacted people to seek feedback about the care being delivered and knew people well.
- Staff gave positive feedback regarding the open, honest and supportive culture of the service. One staff member said, "I really enjoy working for them, it's the best job I've had."
- The providers' policies and procedures prompted inclusion and diversity and reflected protected characteristics as defined by the Equalities Act 2010.

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; Continuous learning and improving care; Working in partnership with others

- The registered manager understood their responsibility to be open and honest when things went wrong in

line with their responsibilities under the duty of candour.

- Since our last inspection management oversight and monitoring of the service had improved. The registered manager completed audits and checks to monitor the quality of the service provided and to identify any shortfalls so these could be addressed. This included checks of the care records and care call times and duration.
- Lessons had been learnt as improvements had been made to the audit systems and oversight of the service.
- The registered manager and staff team worked closely with health professionals to ensure people receive safe, consistent care and support.