

Ray of Sunshine Care Ltd

# Ray of Sunshine Care Ltd

## Inspection report

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Date of inspection visit:  
08 December 2023

Date of publication:  
04 January 2024

## Ratings

Overall rating for this service

Good ●

Is the service safe?

**Requires Improvement** ●

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

Ray of Sunshine Care Ltd is a domiciliary care service providing care and support to older people and younger adults in their own homes. The service supports people with physical disabilities, mental health needs and dementia. At the time of our inspection there were 21 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.

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

Improvements were needed in relation to the safe management of people's medicines. Some people's care plans needed clearer guidance for staff on how to safely manage risks associated with their health and their care and support needs.

People and their relatives felt staff delivered safe care and support. Management completed pre-employment checks on prospective staff to ensure they were suitable to support people in their own homes. People received their medicines from staff who had been trained in the provider's medicines procedures. Staff took steps to protect people from the risk of infections. Management sought to learn lessons when things went wrong and to cascade learning throughout the staff team.

People's care and support needs, choices and preferences were assessed before their care started. Staff were provided with a range of training and ongoing management support to ensure they worked safely and effectively. People had the support they wanted to prepare meals and drinks. Staff and management collaborated effectively with other agencies and helped people access healthcare services when needed. Staff sought people's consent before delivering care and support.

People and their relatives told us staff and management treated them in a respectful, kind and caring manner. People and their relatives felt able to express their views to staff and management at any time, to shape the care and support delivered to suit them.

People received personalised care and support, as part of which consideration was given to their individual communication needs. People and their relatives knew how to complain about the service and were confident concerns would be addressed. People were encouraged to think about their wishes for their future care in a sensitive manner.

The management team promoted a positive, open, inclusive and person-centred culture within the service. People and their relatives had confidence in the management team, and staff felt well-supported and listened to. Management completed regular audits and checks to assess, monitor and improve standards of care and support. As part of this, they actively sought feedback on the service from people, their relatives

and staff.

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

Rating at last inspection

This service was registered with us on 21 September 2021 and this is the first inspection.

Why we inspected

This inspection was prompted by a review of the information we held about this service.

Follow up

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

## 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 not always safe.

Details are in our safe findings below.

**Requires Improvement** ●

### 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** ●

# Ray of Sunshine Care Ltd

## Detailed findings

### Background to this inspection

#### The inspection

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

#### Inspection team

The inspection was completed by 1 inspector.

#### Service and service type

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

#### 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

We gave the service 48 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the provider or registered manager would be in the office to support the inspection.

Inspection activity started on 8 December 2023 and ended on 21 December 2023. We visited the location's office on 8 December 2023.

#### What we did before the inspection

We sought feedback from the local authority and Healthwatch on the service. Healthwatch is an

independent consumer champion that gathers and represents the views of the public about health and social care services in England.

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

During our visit to the location's office, we spoke with the nominated individual, registered manager, care coordinator and a senior care staff. The nominated individual is responsible for supervising the management of the service on behalf of the provider. We also reviewed a range of records, including 5 people's care records, medicines records, 3 staff members' recruitment records and records associated with the management of the service.

Following the visit to the location's office, we spoke with 2 people who used the service, 4 relatives, a person's friend, 3 care staff, 1 senior care staff and a social care professional. We also reviewed additional information provided by the management team, namely staff training information and selected 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.

This is the first inspection of this newly registered service. This key question has been rated requires improvement. This meant some aspects of the service were not always safe and there was limited assurance about safety. There was an increased risk that people could be harmed.

### Assessing risk, safety monitoring and management

- The provider assessed risks to keep people safe and staff knew people well.
- People told us they felt safe receiving care from staff in their own homes and people's relatives said staff delivered safe care.
- However, some people's care plans lacked clear guidance for staff on how to keep them safe. This included insufficient guidance in supporting people with their mobility needs and the expected use of their care equipment. The management team took prompt action to address these concerns.
- Staff were clear how to report any accidents or incidents involving people and management took appropriate action to reduce the risk of things happening again.

### Using medicines safely

- People were supported to receive their medicines in a way that was not always safe.
- The information recorded on people's electronic medicines records was not always fully accurate, up-to-date or complete. For example, people's prescribed topical medicines were not always included on medicine administration records and staff made inconsistent use of administration codes.
- However, we did not identify anyone who had not received their prescribed medicines and management took prompt action to address these concerns. People's relatives told us staff provided safe support with medicines.
- Staff had training in the provider's medicines procedures and said this gave them confidence with this aspect of people's care.

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

- People were safeguarded from abuse and avoidable harm.
- Staff were clear how to report and record any abuse concerns and had confidence management would act on these to keep people safe.
- Management understood the need to notify relevant agencies of any safeguarding concerns, so these could be fully investigated.

### Staffing and recruitment

- The provider ensured there were sufficient numbers of suitable staff.
- People and their relatives told us they received a reliable service from staff they were familiar with. One person said, "I have the same group of 1 to 3 staff. I always know who they are when they come; I know them quite well."

- The provider operated safe recruitment practices. Prospective staff underwent pre-employment checks to ensure they were suitable to work with people.

#### Preventing and controlling infection

- People were protected from the risk of infection as staff were following safe infection prevention and control practices.
- People and their relatives told us staff made consistent and appropriate use of personal protective equipment (PPE), such as disposable aprons and gloves.

#### Learning lessons when things go wrong

- The provider had learned lessons when things had gone wrong.
- People and their relatives told us staff and management welcomed feedback on the care provided and were keen to learn from any issues or concerns raised. One relative said, "If anything goes wrong, they [management] put it right."
- Staff described how learning from incidents was shared at staff meetings.

# 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 of 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.

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

- People's needs, choices and preferences were assessed with them before their care started. People and their relatives felt fully involved in the assessment process.
- Care and support was delivered in line with current standards to achieve effective outcomes for people. People and their relatives consistently referred to the positive outcomes of their care and support.

Staff support: induction, training, skills and experience

- The service made sure staff had the skills, knowledge and experience to deliver effective care and support.
- Staff received a structured induction to help them understand and settle into their roles. One staff member told us, "It was a good induction. I had a good tour of the office, was shown the policies and procedures, and had online training and shadowing. I also received a phone call [from management] at the end of each day and felt I could call them at any time with any questions."
- Staff and management completed a comprehensive range of training, which reflected their duties and responsibilities and people's individual care needs. A social care professional told us, "They [staff] are mature, professional, knowledgeable, understanding and well-trained."
- Staff spoke positively about the ongoing support they received from management, including regular one-to-one supervision meetings with a senior. One staff member said, "They [management] ask me how I'm getting on, if I have any problems or worries and what's going well or badly with the service users."

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

- People received the individualised support they needed to prepare meals and drinks according to their preferences.
- The level and nature of the support people needed to eat and drink had been assessed and recorded in their care plans.

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

- The provider ensured the service worked effectively within and across organisations to deliver effective care and support, including liaison with people's doctors and the district nursing team.
- A social care professional spoke very positively about their relationship with, and confidence in, the service to deliver effective care and support to meet people's complex needs.

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

- People and their relatives told us the care and support staff delivered took into account people's individual health needs and long-term medical conditions. One person's relative said, "[Person] has

[medical condition]. Staff are so gentle with them and understand how to help them move about very well." Another person's friend told us, "They [staff] are very conscious of [medical condition] and help [person] to reposition themselves."

- Staff and management took prompt action to help people to seek professional medical attention and advice in the event of a deterioration in their health or medical emergency. A social care professional said, "They [management] notify people's families and relevant professionals of any health concerns. They monitor any changes in people health or behaviour; they're very sharp."

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.

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.

- Staff received training in, and understood, people's rights under the MCA to make their own decision, with support where this was needed. One staff member told us, "I always ask for people's consent, even when completing a simple activity like combing someone's hair ... If I don't ask for consent, that would mean their dignity had been taken away."
- People and their relatives confirmed staff were respectful of their choices and decisions about the care and support delivered.

# 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 their relatives told us staff treated them well. One person said, "They (staff) are very caring. They're lovely; I couldn't wish for better." Another person's relative told us, "They [staff] are very caring towards [person]. They are very attentive to [person's] wants and needs."
- Some relatives described particular acts of kindness shown by management and staff, which had gone beyond their expectations. One relative said, "They [service] are going to bring us a Christmas dinner, which we thought was lovely, and turkey sandwiches on Boxing Day." Another person's friend told us, "They [staff] go beyond the call of duty. [Staff member] came to see [person] last week, in their own time, to put up their Christmas tree."
- Staff received training to ensure they understood their role in respecting and promoting people's equality, diversity and human rights.

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

- People and their relatives told us they were fully supported to express their views to shape the care and support they received.
- People's individual communication needs had been assessed and staff had been provided with written guidance on how to support effective communication with people.

Respecting and promoting people's privacy, dignity and independence

- People and their relatives told us staff treated them with dignity and respect. One relative said, "They [staff] talk to [person] properly and seem very fond of them."
- Staff received training in privacy and dignity and described to us how they promoted these in practice. One staff member told us, "It's always about person-centred care ... It's about asking people how they want to be supported, giving choices, seeking consent and respecting their religious beliefs. If it was me [receiving care], I'd want to feel my choices matter."

# 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 and support needs and preferences were assessed with them, and individualised care plans developed to ensure these were met.
- People and their relatives felt fully in control of the care and support delivered. One person's relative said, "They [staff] are very flexible and adaptable to [person's] needs and moods."
- Staff praised the clear insight management gave them into people's individual needs, choices and preferences. One staff member told us, "They [management] go through what people like and dislike before their care starts. They're very thorough with it... You almost feel like you've been there [to the person's house] before, because they've walked you through everything."
- Staff demonstrated a clear understanding of and commitment to person-centred care. One staff member said, "It's all about listening to them [service users]. It's little things like how many sugars they like in their tea and which are their favourite pyjamas."

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.

- The provider assessed people's individual communication needs and preferences to ensure effective communication with people.
- Staff showed a good awareness of personalised support people needed with their communication.
- The provider had the capacity to provide key information to people about the service in alternative accessible formats to suit individual needs.

Improving care quality in response to complaints or concerns

- People and their relatives told us they knew how to raise any concerns or complaints about the care and support provided, and had confidence management would act on these. One person told us, "I would go straight to management, but, at the moment, I don't have any complaints." Another person's relative said, "If anything goes wrong, they [management] put it right."
- The provider had developed clear procedures for recording and responding to any concerns or complaints about the service.

End of life care and support

- The provider was not currently providing care to anyone at the end of their life, but had done so previously.
- They encouraged people, in a sensitive manner, to share their wishes for their future care.
- Staff received training in end of life care to ensure they knew how to meet people's needs and wishes as they approached 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.

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.

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

- Management promoted a positive, caring, open and person-centred culture within the service; feedback from people, their relatives and staff confirmed this.
- People and their relatives described a positive relationship with the management team, who they found easy to get hold of and very responsive. They confirmed the service provided had positive outcomes for people and said they would recommend the service to others.
- Staff were clearly motivated in their work and felt very well supported by management. One staff member told us, "I know I can go to them [management] with a problem, whether personal or professional. You don't dread speaking to them and know you will be met with a professional and caring manner." Another staff member said, "They [management] accept criticism as well. If it's not right, you don't feel scared to tell them."

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

- Management understood their responsibility to be open with people and their relatives whenever things went wrong with the care and support provided, and to offer people an apology for this.
- A social care professional told us, "They [management] will phone people's family and apologise if anything goes awry."

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

- The management team had a good understanding of regulatory requirements, worked well as a team, and had identified individual roles and responsibilities.
- The provider had developed quality assurance systems and processes to enable them to assess, monitor and improve the quality and safety of people's care and support. This included audits on key aspects of the service, such as monitoring the punctuality and duration of people's care calls, prevention of trips and falls, promotion of dignity and infection prevention and control practices.
- The effectiveness of audits in relation to people's care plans and the management of their medicines needed some improvement, as these had not identified the concerns we found on inspection.
- Staff underwent regular spot-checks and competency checks to ensure they were providing safe and high-quality care and support.
- The outcomes of audits, feedback on the service and any incidents or accidents were used to direct

improvement in the service.

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

- People, their relatives and staff felt listened to and involved in the service. One staff member told us, "They [management] are really friendly; it feels like you are working as part of a family. They listen to everything and I can always take any concerns to them."
- The provider distributed quarterly feedback questionnaires to people and their relatives and analysed the comments received about the quality of the service to learn from these.
- Management understood the need to consider people's protected characteristics under the Equality Act 2010 in assessing and meeting their care and support needs and preferences.

Working in partnership with others

- Staff and management understood the importance of working collaboratively with external agencies and professionals to ensure people received joined-up care and support.
- A social care professional spoke positively about their collaboration with staff and management. They told us, "They [management] are always very responsive and get back to you. They deal with issues very promptly."