

# The Care Staff Consulting Limited

## TCS Homecare

### Inspection report

Chartwell House 620-622  
Newmarket Road  
Cambridge  
CB5 8LP

Tel: 01223298247  
Website: [www.thecarestaff.com](http://www.thecarestaff.com)

Date of inspection visit:  
20 July 2021  
02 August 2021

Date of publication:  
01 September 2021

### 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

TCS Homecare is a domiciliary care service providing personal care to 54 people living in their own homes at the time of their inspection.

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

People and their relatives told us that they felt safe when staff were providing care. Risk assessments had been completed to ensure that action was taken to keep people safe. People received their medication as prescribed. Staff were only employed after satisfactory checks about their suitability had been completed. There were systems in place to record, monitor and learn from accidents and incidents.

Staff had the knowledge, skills and support they required to meet people's needs effectively. People's physical, emotional and social needs were identified so staff could meet these. People were supported to maintain good health and were supported by or referred to the relevant healthcare professionals. People consented to their care or when appropriate best interest decisions were taken on their behalf.

Staff knew people's needs in detail including, their likes and dislikes and what gave them comfort. One person told us that the care staff made their life worth living. Health and social care professionals were highly complementary about the support that people received and the excellent working relationships they had with the staff. The service demonstrated the achievements made to improve people's quality and experience of life. People's privacy and dignity was protected and promoted.

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.

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 06/12/2019 and this is the first inspection.

### Why we inspected

This was a planned inspection.

### 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 ●

# TCS Homecare

## 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

Two inspectors and one expert by experience carried out this inspection. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

#### 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 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.

#### What we did before the inspection

We reviewed information we had received about the service since it was registered. We sought feedback from the local authority and professionals who work with the service. 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 inspections. We used all of this information to plan our inspection.

#### During the inspection-

We spoke with three people who used the service, five relatives, the registered manager and three members

of staff.

We reviewed a range of records. This included three people's care records. We looked at two staff files in relation to recruitment. A variety of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection

We continued to seek clarification from the registered manager to validate evidence found. We spoke with two professionals who have had contact with the service.

# 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 for this newly registered service. This key question has been rated Good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People and their relatives told us they felt safe. One person told us, "This is the third agency I have had to care for me and I can say that I have been really lucky having TCS. I have a wonderful male carer who knows exactly how to keep me safe." One relative told us, "We feel very safe with the carers we have now."
- Staff knew how to recognise abuse and reduce the risk of people suffering harm. Staff had received training and had a good understanding of the provider's safeguarding systems and procedures. They were confident the management team would address any concerns and make the required referrals to the local authority. The registered manager was aware of their responsibilities for reporting concerns to the CQC.

Assessing risk, safety monitoring and management

- Processes were in place to protect people from avoidable harm.
- Risk assessments were completed to identify risks to people's health and safety such as their risk of falls or road safety. Staff reviewed the risk assessments regularly and put actions in place to reduce any risks.

Staffing and recruitment

- Safe recruitment practices were in place to ensure staff were safe to work with vulnerable people. Staff were not employed until the relevant checks had been completed to ensure they were suitable to work with vulnerable people.
- The registered manager told us they ensured staff did not go to care for people without being introduced first.

Using medicines safely

- Peoples' medicines were managed safely. Processes were in place for the timely ordering and supply of medicines where needed. One person told us, "They keep an eye on my back as after I came home from hospital following my second operation the skin on it was inflamed. They called and spoke to my GP who prescribed creams and anti-biotic."
- Staff completed training to administer medicines and their competency was checked regularly.
- The management team completed daily and monthly audits of medicines to ensure policies and procedures were followed and any errors or concerns were identified.

Preventing and controlling infection

- Staff had completed training in how to reduce the risk of infection and followed good practice guidance. We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was accessing COVID -19 testing for staff.

### Learning lessons when things go wrong

- Staff followed the provider's procedures when any accidents or incidents occurred. This included completing forms that the registered manager reviewed.
- The registered manager was analysing accidents and incidents to identify any trends. When possible, action was taken to prevent a recurrence of accidents and incidents.

# 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.

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

- Staff assessed and documented people's physical, mental and social needs and preferences in relation to their care and they planned care based on this. People's outcomes were good. For example, one relative told us, "They (the staff) know (name given) that he gets confused from time to time - sometimes he talks as normal and others he is really confused. The carers coax him to do the things needed. All the staff who come here are trained to manage the equipment and deal with his [medical equipment]"
- People's care and support was regularly reviewed to ensure they were providing the right care and support in line with best practice and guidance. One person told us, "I have deteriorated a little bit and the staff are aware that I need a little extra help at times. They know my history and talked to me about my family and friends and football."

Staff support: induction, training, skills and experience

- People and relatives told us that staff knew how to care for people and knew how to use equipment. Staff had received training when they first started working at the service and this was updated each year. One person told us, "I do get new [care workers] from time to time but they all know what is needed and I feel are well trained to meet my needs".
- Staff told us they received regular supervision on a one to one basis, and had an annual appraisal. The registered manager also held group supervisions so they could discuss various themes such as safeguarding or record keeping.

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

- Staff assessed people's nutritional needs and any risks related to their eating and drinking. One person told us, "They do all my meals. Breakfast is usually cereal and toast, but they will do anything I want. Lunch they make a sandwich and tea time they do me a meal usually potato, meat and vegetables. They always make sure I have plenty to drink near to hand before they leave. I order my shopping and when it comes the [care worker] puts it away for me."
- One relative told us how their family member had been confined to their house for a long period. They explained, "On a Friday my [family member] always used to go to the local fish and chip shop for her lunch. Now [care staff] takes her in her wheelchair to collect her fish and chips and return home for her to eat them. The [care staff] sent me a picture of their first outing."

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

- Staff had good relationships with other professionals who had contact with the service. One healthcare

professional told us, "[Registered Manager] is approachable and contactable which is really important as it helps to maintain clear communication. Joint working with TCS is easy and effortless, as it should be."

- Relatives told us that they were consulted and kept informed about health issues. One relative told us, "They cream [family member's] legs as she has dry, sore skin. If they spot any sores etc; they let me know and also the nurse who comes in daily to do my [family member's] insulin."

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.

- Staff obtained consent for people's care and support where possible. Staff had a good understanding of the principles of the MCA and people were supported wherever possible to make their own decisions. Staff provided information to people in a format that they understood so that their capacity to make decisions could be assessed in a meaningful way.
- When people could not make a decision, staff completed a mental capacity assessment and the best interest decision making process was followed and documented. Staff tried to ensure that any action taken was done in the least restrictive way possible.

# 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

- Throughout our inspection the staff team and the management team demonstrated a non-judgmental, supportive approach towards people with protected characteristics. This had a significant impact on people who previously struggled to find the right support. One person told us "This is the third agency I have had to have to care for me and I can say that I have been really lucky having TCS.
- People were respected by staff and each person was valued as an individual with their unique preferences, wants and needs. People and their relatives told us that staff treated them with respect and gave them the level of support they wanted. One person told us, "The carers make my life worth living." Another person told us, "All my carers are very kind and compassionate: they will call the Doctor or District Nurse if necessary and when I am down they cheer me up." A relative told us, "The male carer who comes at night is so very gentle with [family member]. Once he has him ready for bed he gets him in the bed and makes sure the pillow he puts under (name given) head is in the right place he then wishes him a good night. He is like an angel so gentle kind and compassionate."
- Staff were supported by the management team to be flexible in their approach and ensured that when needed people received extra support. People really appreciated all the little extras that staff did for them, including the way they would re-arrange call times to fit in with the person's plans. One relative told us that they needed to attend a hospital appointment so the care staff had come earlier than normal so that the relative knew everything done before they left.
- People's diverse needs were fully respected, and care plans identified people's cultural and spiritual needs. Staff had supported one person to follow their religious practices by providing them with the personal care they needed at the right times. One person told us, "My carers always ask me what I would like doing and always ask for my consent before doing anything. They never rush me and often notice things that need doing."
- Cultural differences were respected and staff worked with people to provide the best outcomes for them. For example, one person was not living in a conventional building but the staff worked with them to provide a comfortable environment that they could enjoy. Staff helped them to purchase suitable furniture that met their needs and helped them to redecorate. They also added in a curtain to ensure that the person could be supported with personal care in private. Staff offered care and support that is compassionate and kind.
- People were supported to undertake individual activities based on their interests and what was important to them. For example, one person who was living with dementia was supported to go shopping for flowers and then take them to family members' graves – something which was really important to them.

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

- The service was good at supporting people to express their views and ensuring those views were known and understood by all the staff. People and relatives told us that they were involved in decisions about their care and could ask for things to be done differently if needed. One person told us, "Staff are aware of changes in my ability from time to time and will provide extra help, or if I feel something needs changing at that particular visit they will make that change. For example, if I am not up to a shower I tell them and they give me a wash instead." For those people that couldn't communicate their feelings the registered manager ensured that they worked with other family members or professionals to understand people's individual needs.

- People told us that staff were kind and considerate. One person told us, "They are so kind to me. One day my carer noticed I had [a medical issue] and she phoned the nurses for me and stayed with me until they came." Another person told us, "I have a really good rapport with my carers. They make me laugh and from time to time we share a joke. If I am feeling a bit down they will do their best to cheer me up and if I am unwell they will ring the GP or DN for me. They know they can be the only person I might see and will talk to me. They pick up when I deteriorate a little and aware that at times I need a bit of extra help. We talk about family and friends and football."

#### Respecting and promoting people's privacy, dignity and independence

- People and relatives gave positive feedback about how caring staff, managers and the provider were. The positive attitude, empathy and kindness showed to people had a impact not just on people who received care and support but, on their families, as well. People feeling valued and empowered led very often to improvements in their mental and physical well-being. The registered manager told us about one person who had been cared for in bed for several months. The care staff had purchased some weights so that they could help to strengthen the persons muscles with exercises and they were able to spend time out of their bed. This had also improved the relationship they had with family members.

- An equality, diversity and human rights approach to supporting people's privacy and dignity is well embedded in the service. Good practice examples show positive outcomes for people in line with this. People were encouraged to maintain their independence wherever possible. The staff had taken the time to support one person to be able to be independent. The person told us, "I no longer need any equipment for them to use and they used to do my [medical issues] but now I can do that myself. They are very good and very patient teaching me how to do things for myself".

- Health professionals highly praised the staff for their compassion and caring attitude. A health care professional told us, "I have not had too much contact directly with specific carers, apart from with one lady; however, I found her to be the epitome of caring and was a credit to the team. She transformed a situation where a lady had not had personal care for a number of years. She was able to slowly encourage her to have personal care and enabled her to live at home for a number of months where other professionals felt that she should live in [a care home]."

# 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

- The support plans were detailed and included information on each aspect of the person's needs such as, eating, personal care, communication and moving and handling. The information was person centred and described what the person was able to do and how staff should support them.
- People told us they were involved in writing their care plans and also included in reviews. One person told us, "We have had a review due to my trapped nerve and assessed for the extra care needed which has been put into place."
- The registered manager stated in the pre inspection information that they had worked with numerous health and social care professionals to ensure that people received the support they needed. The records showed this to be the case.

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.

- The registered manager was aware of the accessible communication standards and told us of ways in which the service was meeting the standards. Each person's care plan included a section about how staff should communicate with people according to their needs.
- The registered manager told us how they had supported people living with dementia to use white-boards in their homes. This meant staff could write key information such as when they were next coming or what they had done that day to prompt people's memory. This in turn helped to reduce stress and anxiety when people became confused.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- People were supported to maintain friendships and spending time with family. One person had told the registered manager that they would really like to be able to go on a trip to Hunstanton with their family member. Staff had supported the person to go on short walks, building up to further distances. This had meant they were able to go to Hunstanton with their relative and enjoy the surroundings.

Improving care quality in response to complaints or concerns

- People and their relatives were confident their complaints would be dealt with appropriately and any necessary action taken. One person told us, "The complaint I had to make about the abusive care staff was handled really well and resolved to my satisfaction. I am so pleased with all the care we receive."

#### End of life care and support

- The registered manager was very passionate about ensuring that people were supported to have their choices fulfilled at the end of their life. Some of the staff had attended end of life care training with further training planned for the rest of the staff. The registered manager was developing a detailed end of life care plan.
- When people were happy to discuss their wishes they had end of life care plans in place.

# 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

- The registered manager and care staff were very passionate about providing a service that met people's needs and helped them to become as independent as they wanted to be whilst maintaining their safety.
- Staff were aware of the values of the service and how to achieve them.
- People, their relatives and staff all told us that they found the registered manager and senior staff to be approachable. One person told us, "I know the manager well. She has spoken to me on the phone and visited us in our home when it was apparent that more care was needed." One member of staff told us, "I like the communication, we are a very good team - we have each other if we have troubles, we support each other. I have a very good relationship with the office, it doesn't matter what the time is they always answer the phone."

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

- The registered manager was clear about her responsibilities for reporting to the CQC and the regulatory requirements. Risks were clearly identified and escalated where necessary.

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

- The registered manager completed regular audits and had an action plan to take forward improvements to the service based on the audits and feedback from people who used the service.
- In a recent survey carried out by TCS Homecare 71.7% of people said the overall quality of the service was excellent and the remaining 28.3% said it was very good.
- One health care professional told us, "[The registered manager] has an excellent knowledge base of care based on her experiences. She backs this up with a really sound understanding of relevant legislation too. Most importantly, [the registered manager] genuinely cares and this shines through." One person told us, "The deputy has come out on a Saturday to do my care now and again and I find her very approachable. She always listens and if I have any questions and she isn't sure of the answer she will get back to me."

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

- Information from analysis of incidents and accidents, feedback from people and their relatives and health and social care professionals and complaints were used to continually improve the service being offered.

- People and staff were encouraged to contribute their views on an ongoing basis informally and through surveys. Where needed people were supported to complete the surveys. Staff confirmed that they were encouraged to make suggestions to improve the care and support provided.
- The registered manager had plans in place to involve people and their relatives in the recruitment of new staff.

#### Working in partnership with others

- The registered manager and staff achieved good outcomes for people by working very well with health and social care professionals. For example, the registered manager stated in their PIR that they had worked with the Gypsy and Traveller Specialist Nurse so that staff could be, "educated around the culture."
- Health and social care professionals provided very positive feedback about working with TCS Homecare. One professional told us, "I've now been working with TCS for about a year on a number of different cases. All have been complex and difficult situations – often where other providers have pulled out/not been able to manage the complexity of the work. However, [the registered manager] and the team embrace challenge which is refreshing! I've never worked with such a proactive, positive and approachable care provider and I think the face of care would be very different if all agencies were as supportive."