

Sky Futures Ltd

Choice Care

Inspection report

Suite 16
Blackburn Enterprise Centre, Furthergate
Blackburn
Lancashire
BB1 3HQ

Tel: 01254504905

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31 October 2019

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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

About the service

Choice Care is a domiciliary care agency who were providing personal care to 199 people at the time of the inspection. 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

The service was well led. People were empowered to make decisions and choices and this was reflected in the feedback we received. Staff told us there was positive culture in the service which supported and promoted positive outcomes for people. One person had commented, "I think the care is really good and it has improved my life loads." Relatives also gave us very positive feedback about the service and staff. Management and staff knew people well and often went above and beyond expectations to support people.

People told us they felt safe using the service. Staff had carried out safeguarding training and knew their responsibilities. Risk assessments were in place and reviewed to keep people safe. The registered manager had robust recruitment systems and processes in place. Staff felt there were enough staff to meet people's needs.

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 told us staff were knowledgeable and skilled. Staff felt they had received adequate training and support to undertake their roles.

People unanimously told us staff were kind, caring and respectful. Staff maintained people's privacy and dignity and supported them to maintain their independence. Consideration had been made to people's needs in relation to equality and diversity.

The registered manager ensured people had person-centred care plans in place. These evidenced the person had been involved in the decision-making process. People confirmed their care and support was reviewed on a regular basis. All the people we spoke with knew how to make a complaint. The registered manager dealt with all complaints in line with policies and procedures.

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

Rating at last inspection

The last rating for this service was good (published 22 June 2017).

Why we inspected

This was a planned inspection based on the previous rating.

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 exceptionally well-led.

Details are in our well-led findings below.

Good 

Choice Care

Detailed findings

Background to this inspection

The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. 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

The inspection team consisted of one inspector and an Expert by Experience. 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.

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 a short period notice of the inspection because some of the people using it could not consent to a telephone call from an inspector or Expert by Experience. This meant that we had to arrange for a 'best interests' decision about this.

Inspection activity started on 30 October 2019 and ended on 31 October 2019. We visited the office location on both dates.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. We also contacted Healthwatch for feedback. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England. We also emailed 20 staff members to gain their feedback on the service.

The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report. We used all of this information to plan our inspection.

During the inspection

We spoke with 14 people who used the service and two relatives; we also emailed two relatives to ask about their experience of the care provided. We spoke with six members of staff including the registered manager and care workers.

We reviewed a range of records. This included five people's care records, medication records, one person's staff file in relation to recruitment and staff supervision records. We also reviewed a variety of records relation to the management of the service.

After the inspection

We contacted the registered manager to inform them we had only received a response from two staff members we had emailed. Following this we received a full response to the questionnaires sent to staff.

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 good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- The service had systems and processes to protect people from the risk of abuse. Staff had received safeguarding training and knew their responsibilities. The registered manager ensured appropriate policies and procedures were accessible to staff. People told us they felt safe. One person commented, "Oh yes I feel safe with the staff and comfortable." A relative told us, "Yes, [relative] feels safe with all her carers."

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- The registered manager and staff ensured risks to people's health and wellbeing had been assessed. Care records contained risk assessments to keep people safe and guide staff. For example, moving and handling and nutrition. Staff also carried out assessments of any risks within people's home environment. The registered manager ensured these assessments were reviewed and updated when changes occurred.
- Staff had received health and safety training and were aware of their responsibilities to ensure any equipment to be used was safe.
- The registered manager had systems and processes in place to record incidents and accidents. This included regular audits to check for themes and trends, so risks could be minimised. Lessons learned were discussed with staff in meetings, supervisions and informal discussions.

Staffing and recruitment

- People received effective and timely care and support. All the people we spoke with told us they received the agreed amount of support and that staff were consistent; no one had experienced a missed visit. One person told us, "I only need one carer and they are very reliable. They never let me down or not turned up."
- The registered manager had safe recruitment systems and processes in place to ensure staff were of a suitable character to work in a care setting.

Using medicines safely

- The registered manager ensured medicines were managed safely and people received their medicines when they should. Not everyone using the service received support with their medicines. Some people that did told us, "I have to have my tablets with my food, so it is important they get that right, which they do" and "When I had surgery, the carers had to put drops in my eyes four times a day, they did this without fail."
- Staff told us they had received training in administering medicines and confirmed they had their competency checked on a regular basis. Senior staff also conducted spot checks. The registered manager ensured medicine audits were carried out.

Preventing and controlling infection

- The registered manager had systems in place to prevent and control infection. Staff told us they had

received infection control training and knew their responsibilities. Staff had access to personal protective equipment.

- People told us, "Staff apply creams to me and always have their gloves on", "The staff always have gloves with them" and "The carers bring everything with them, gloves and tops." A relative told us, "Staff are always 'kitted up'; uniform top, gloves and I think apron."

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 good. At this inspection this key question has remained the same. 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 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 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 were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service supported this practice. The registered manager confirmed no one using the service was subjected to an authorisation from the Court of Protection. Staff had received training in relation to the MCA and demonstrated an understanding of the principles of this.
- People's capacity to make decisions were recorded in their care records and only those with correct authorisation in place had signed to consent to care and treatment. For example, those with a lasting power of attorney for health and welfare. People told us, "Staff ask how I want things done and if I want anything differently" and "The staff do things how I like, and I would say if they didn't."

Staff support: induction, training, skills and experience

- The registered manager ensured staff were provided with a suitable induction, training and supervision, appropriate to their role. However, staff new to care were not completing the care certificate. The care certificate is considered current best practice for those staff new to working in the care sector. The registered manager assured us they would address this to ensure all staff new to care completed this training in future.
- Staff had access to a range of courses deemed as mandatory and optional to meet the varying needs of people using the service. Staff told us, "I had an induction which covered all mandatory courses and I was offered additional. I feel confident on my own but also know someone is at the end of the phone" and "We had three days training and after that a carer took us out to show us what to do."
- People told us, "The staff are competent", "Always felt that they were experienced, even the younger ones they seem to know what they are doing" and "The main carer who has been matched to me is perfect as she

is older, and we have much more in common to talk about. This is important as I get lonely, time to just talk to someone is good. She has a lovely sense of humour."

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

- The registered manager ensured people's nutritional needs were met if this was part of the agreed package of support. Care records contained detailed information on the level of support people needed with their dietary intake to guide staff.
- People told us, "The staff get my lunch and a hot drink ready. They set up my table with my phone and everything before they go", "I have a hot meal made, I choose, my daughter buys them, and the staff prepare them all" and "My appetite is poor; the carers are very good and helpful. They will give me different choices and if I don't like something, they ask me if there is anything else they can make me."

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

- The registered manager ensured a thorough assessment was completed for each person referred to the service. This ensured care and support was delivered effectively to meet people's needs and choices. The registered manager supported staff to ensure they delivered effective outcomes to the person using current legislation and best practice guidance.

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

- People received appropriate support to meet their healthcare needs. Staff worked closely with other social care and healthcare professionals, as well as other organisations to ensure people received a coordinated service.

Adapting service, design, decoration to meet people's needs

- The service was managed from purpose-built offices.

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 good. At this inspection this key question has remained the same. 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

- The registered manager and staff treated people with respect, kindness and sensitivity. People told us, "The carers are all very respectful and treat me extremely kindly", "The care they give is dignified and caring, the personal care is given in an especially sensitive way" and "I am very happy with my carer, I have no concerns."
- Consideration had been made to the Equality Act 2010 and people were protected against any discrimination. The registered manager ensured equality and diversity training was completed by staff and relevant policies and procedures were accessible. The registered manager ensured people's human rights, equality and diversity was reflected in the care planning process.

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

- The registered manager and staff ensured people made decisions about their care and support and their views were respected. People told us they could make decisions about how they received support. They told us, "I have asked for and have agreed the support I want", "The carers and the supervisors always explain things to me about my care, if there are any changes we discuss them" and "Yes, I have agreed a care plan and the supervisors come along every few months and ask me if it is working out or if we need to change it." A relative told us, "The care is as discussed and is reviewed, and any decisions made have [relatives] full agreement."

Respecting and promoting people's privacy, dignity and independence

- People's privacy, dignity and independence was respected. Staff told us how they promoted people's privacy and dignity. Comments included, "I ensure privacy by doing things like closing blinds or curtains, by covering up sensitive areas during personal care or moving and handling procedures" and "I ensure doors and curtains are closed during personal care and as much of them is covered as much as is possible."
- One person told us, "They are very thoughtful, they pull the curtains, knock on the bedroom door, ask if I am dressed and call out before coming in."
- All the people we spoke with felt they were supported to remain as independent as possible. Comments we received included, "I do as much as possible for myself, they arrange the bathroom, then they help me into the shower and the rest I can sort out myself" and "It's hard having things done for you when you have managed by yourself, but they get the right balance and I can do still do a lot for myself."

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 good. At this inspection this key question has remained the same. 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

- Management and staff planned people's care and support in line with their choices and preferences. The registered manager and staff understood people's needs well and recognised the importance of appropriately supporting people on an individual basis.
- Management and staff ensured support plans reflected the required support and identified the person's wishes, choices, preferences and things that were important to them. Care plans were reviewed with the person and/or their family on a regular basis.

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 ensured the service was responsive to people's communication needs. They told us, "We can arrange for information to be in different languages, we have braille, larger fonts and we do use picture cards with some people. We have also developed book of a trip one person went on, so they can look through this." One person told us, "I have poor sight and the staff will read things for me and make sure I can understand."

Improving care quality in response to complaints or concerns

- The registered manager had systems and processes in place to manage and respond to complaints and concerns. The registered manager had dealt with all complaints and concerns in line with company policies and procedures.
- People told us they knew how to raise a complaint. Comments we received included, "I think we have a leaflet we were given, but I would ring the office if I ever have to make a complaint", "I would talk with the supervisor or manager. I wouldn't have any problems doing this they have always been very helpful" and "My family would make a complaint for me, but there hasn't been any need we have been very happy with everything." A relative told us, "We have been given lots of information and I wouldn't hesitate to contact the manager if we were unhappy. They have given us the impression that they are very approachable."

End of life care and support

- The service was not supporting anyone at the end of their life at the time of the inspection. However, the registered manager told us they explored people's wishes in relation to end of life care, if they were willing to discuss this. Care records confirmed this.

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 good. At this inspection this key question has remained the same. 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 staff demonstrated a commitment to provide person-centred care and support which achieved good outcomes for people. There was outstanding elements within this key question. People told us they were empowered to make decisions and choices. One person had commented on a survey, "I think the care is really good and it has improved my life loads." Relatives also gave us exceptionally positive feedback about the service and staff. For example, "I really want to point out one particular thing, since the very beginning of the care programme, two carers have been attending continually and I cannot praise both highly enough. They have been absolutely fantastic, and mum is benefitting from them hugely. I have got to know them a little bit, as would be expected, and they are a credit to their profession." Management and staff knew people well and often went above and beyond expectations to support people. For example, the registered manager sent Christmas hampers to all people they supported who had no family.
- Staff gave us overwhelmingly positive feedback about the registered manager and told us how they felt exceptionally well supported. For example, one staff told us, "I have never seen a manager care so much about their staff. I would not be as good in my role if it were not for them. They do not get the credit they deserve. She will go above and beyond to support people." Staff told us what they enjoyed about their job. They told us, "I feel I make a difference in someone's life", "Making a difference and ensuring people get a good service" and "Knowing I am helping them keep their independence and wellbeing."
- The service and some staff had received recognition from The Great British Care Awards in 2016 and 2017, including national carer of the year, outstanding contribution to care (for the provider) and best newcomer. The service was more recently carrying out their own awards night and other incentives for staff. Staff told us this was motivating for them. One staff told us, "People work harder when there is a target."

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Continuous learning and improving care

- The registered manager ensured there was a positive culture of engaging staff, people using the service, carers and relatives to help provide care that promoted positive outcomes for people. One relative told us, "There are constant chats/dialogue with both the office and particular carers, so mum's needs are constantly monitored and if necessary, amended and adjusted to suit her needs and comfort."
- The registered manager sent surveys out to gain feedback from people and their relatives. Records showed 79 had been returned in 2018, which were very positive. An action plan was in place to make some improvements from the results. New surveys were due to be sent to gain more recent feedback.

- Staff told us they were engaged and involved in shaping and developing the service. They told us staff meetings, supervisions, appraisals, informal talks, suggestion box and spot checks were forums at which they could give feedback. They told us they felt listened to by the registered manager.

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

- There was effective management oversight in the service. The registered manager was knowledgeable about their legal responsibilities. Any notifications they were obliged to make, had been made to CQC and the local commissioners. The most recent inspection rating was displayed.
- The registered manager used robust quality assurance systems effectively to monitor key aspects of the service. Senior staff carried out regular monitoring visits to ensure high standards of care were met and maintained.

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 open, honest and transparent throughout the inspection. They promoted and encouraged candour through openness and honesty from staff, for example reporting incidents or complaints. Positive relationships had been developed between management, staff, people using the service and their relatives.

Working in partnership with others

- The service worked exceptionally well with external professionals to meet the needs of people using the service. Records showed the service worked with services such as, moving and handling teams, district nurses, tissue viability nurses, speech and language therapists, local authority and safeguarding teams.
- The service also provided emergency support 24 hours a day through a separate team of staff. This team supported people in their own homes when there was a crisis and until a package of care was put in place. This team worked exceptionally well in partnership with others.