

Dunsmore Care Solutions Limited

# Flexicare South Midlands

## Inspection report

Wharf Farm  
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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

Flexicare South Midlands provides personal care to people who live in their own homes. Forty-eight people were receiving the service at the time of our inspection.

This inspection visit took place on the 10 May 2017 and was announced. The provider was given 48 hours' notice because we needed to be sure managers and staff would be available to meet with us. At the last inspection, the service was rated good. At this inspection we found the service remained Good.

There was a registered manager in post. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

The registered manager continued to have oversight of the service and to send us statutory notifications about important events at the service, in accordance with the regulations. They had delegated the day-to-day management of the service to a manager, who we refer to as 'the manager' throughout the report.

Staff understood their responsibilities to protect people from the risk of abuse. The registered manager checked staff's suitability for their role before they started working at the service and made sure there were enough staff to support people safely. Staff were trained in managing and administering medicines safely.

Risks to people's individual health and wellbeing were identified and care was planned to minimise the risks. People were supported to maintain as much independence as possible by being involved in planning their care.

People were cared for and supported by staff who had the skills and training to meet their needs. The registered manager and staff understood their responsibilities in relation to the Mental Capacity Act 2005 and the Deprivation of Liberty Safeguards.

People were supported to eat and drink according to their preferences and needs. Staff supported people to maintain their health and to obtain advice from healthcare professionals when needed.

The manager and staff understood people's individual needs and preferences for care and support. Staff knew people well, cared for them as individuals and respected their privacy and promoted their dignity.

People had confidence in the manager's willingness and ability to deal promptly and effectively with any concerns or issues they raised.

The provider employed staff and managers who shared their purpose and values, which put people at the heart of the service. The management team checked the quality of the service by observing staff's practice and asking people for their views of the service.

Further information is in the detailed findings below.

## The five questions we ask about services and what we found

We always ask the following five questions of services.

### **Is the service safe?**

**Good** ●

The service remains Good.

### **Is the service effective?**

**Good** ●

The service remains Good.

### **Is the service caring?**

**Good** ●

The service remains Good.

### **Is the service responsive?**

**Good** ●

The service remains Good.

### **Is the service well-led?**

**Good** ●

The service remains Good.

# Flexicare South Midlands

## Detailed findings

### Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection checked whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

The inspection took place on 10 May 2017 and was announced. The provider was given 48 hours' notice because the location provides a live-in and domiciliary care service and we needed to be sure that someone would be available to meet with us at their office.

The inspection was conducted by 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.

Before the inspection visit, the provider completed a Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make.

We also reviewed the information we held about the service. We looked at information received from the local authority commissioners and the statutory notifications the manager had sent us. A statutory notification is information about important events which the provider is required to send to us by law. Commissioners are people who work to find appropriate care and support services which are paid for by the local authority.

We spoke by telephone with 10 people who use the service and five care staff. We spoke face to face with the provider, the registered manager, the care manager and five care staff. We reviewed three people's care plans and daily records, to see how their care and support was planned and delivered. We checked whether staff were recruited safely and trained to deliver care and support appropriate to each person's needs. We reviewed management records of the checks the management team made to assure themselves people

received a safe, effective quality service.



## Our findings

At this inspection, we found the same level of protection from abuse, harm and risks as at the previous inspection and the rating continues to be Good.

People told us they felt safe and said they trusted their care staff, because they were regular visitors who arrived when they were expected. People said, "They are reliable", "I feel safe and at ease with the staff" and "You get to know them. It's nice. I don't get strangers every day." The provider's recruitment procedures included making all the pre-employment checks required by the regulations, to ensure staff were of good character and suitable to deliver personal care.

Staff told us they had no concerns about people's safety and would recognise any signs of a person being at risk of harm, because they received training in safeguarding. Staff told us, "I would report any signs of neglect or abuse, if a person was unhappy with a member of staff or unsettled by a family member, I would report it to the office" and "I would check for bruises or if a person is anxious, I would report it." Staff told us they had no concerns about other staff's practice. The registered manager notified us when they referred people to the local safeguarding authority, in line with their responsibilities to protect people from harm.

People's plans included risk assessments related to their individual needs and abilities that promoted their independence and identified any practical risks associated with their home environments. People's care plans explained the equipment, number of staff and the actions staff should take to minimise their identified risks. One person told us their care staff understood when they needed support and when they felt confident to act independently. Other people told us, "Support is done safely, no falls or accidents" and "They are very careful." Staff told us people's care plans were sufficiently detailed and any required equipment was provided and regularly checked, to enable them to deliver a safe service.

People and staff said there were enough staff to care for and support people in the way they needed, without feeling hurried. People told us, "They don't rush the care" and "They take the time to do it right." Staff told us they worked the hours they had agreed with the provider and never felt pressured into doing additional hours. A member of staff said, "It is a really good team. Everyone knows all the runs and will pick up work and emergency cover." The provider's arrangements for unplanned staff absences and emergencies included an on-call service. The provider told us supervisors maintained their care skills to make sure they could provide back-up, on-call and emergency cover when needed.

Medicines were managed and administered safely. People told us they had their medicines when they

needed them. People said, "My tablets get done at the right times, no mishaps", "They make sure I have taken my medication" and "My medication is time-critical and they call on time and have been reliable." Care staff told us they felt safe in giving medicines because they had training and people had a medicines administration record (MAR), which listed each medicine and the times they should be given. Supervisors checked people's medicines were administered according to their prescriptions when they undertook regularly quality checks at people's homes. The service had not reported any medicine errors in the previous 12 months.

## Our findings

At this inspection, we found staff had the same level of skill, experience and support to enable them to meet people's needs as effectively as we found at the previous inspection. People continued to be supported by trained care staff and external health professionals when needed. The rating continues to be Good.

People received the care and support they needed to maintain their health and wellbeing. People told us staff seemed well trained and experienced and said they were effective because they understood when to assist and when to be on-hand to assist. People said, "It's having an extra pair of hands", "They let me do as much as I can for myself" and "I'm very independent and they respect that, but they know my limits." Staff told us they felt confident in their skills because they had training that was relevant to people's needs and time to get to know people well.

Staff's induction to the service included reading care plans, training and shadowing experienced staff on a variety of calls, to make sure they understood the complexities of supporting people with diverse needs and abilities. Staff told us they felt well prepared to support people before they delivered care on their own. Staff told us, "I went out with a supervisor to begin with" and "The training was brilliant and I went to the homes of people I work with now." All staff studied for the Care Certificate, which included training in the fundamental standards of care, during their probationary period.

Staff told us they felt enabled to deliver care and support effectively, because they had regular one-to-one meetings with their supervisor and could always speak with a supervisor or member of the management team if they had any concerns. Staff said, "We might speak with the office two to three times a day, about any issues or concerns" and "There is always someone there to help, even 20 miles away I feel supported." Staff were encouraged to consider their professional development and were supported to obtain nationally recognised qualifications in health and social care.

The Mental Capacity Act 2005 (MCA) and the Deprivation of Liberty Safeguards (DoLS) set out the requirements that ensure, where appropriate, decisions are made in people's best interests when they are unable to do this for themselves. The registered manager understood their responsibilities under the Act and completed mental capacity assessments to check people had the capacity to sign a contract with them. People or their representatives signed their consent to their care plan, to unannounced spot checks by a supervisor and consent to staff administering medicines where required.

Staff understood their responsibilities under the Act and respected people's rights to make their own decisions. A member of staff said, "What the client wants, we follow their wishes" and "It's their routine that they choose." People told us they made their own decisions and staff respected their right to decide. People said, "They check with me as they help me" and "Staff will help in agreeing my priorities."

People who needed support with preparing meals told us staff understood the importance of choice and food presentation. They told us, "I decide what I eat. It's well prepared and presented" and "I find it hard to eat, so it's important to help me enjoy my food, to get it right and my meals are done well."

People were supported to maintain their health. Staff were observant to changes in people's energy and mood and encouraged people to see their GPs or other healthcare professionals when needed.

## Our findings

At this inspection, we found people were as happy with the service as they had been during our previous inspection, because they felt staff cared about them. The rating continues to be Good.

People told us they were happy with the care staff and the management, because they were 'nice people', who treated them like friends. People told us, "They are both excellent", , "They are very friendly and very helpful" and "She is like a friend." Staff told us they enjoyed their work because working with people was satisfying. They said, "I don't feel like I am at work, it's like family. It feels like being at home, home from home" and "It becomes your second home because you spend so much time there."

Staff told us they called on the same people regularly, which enabled them to get to know and understand people well and gain their trust and confidence. Staff said, "People don't like too much change and I see how well they adapt to a regular routine" and "It's talking to them, getting to know them that is important." Staff's training in dementia awareness helped them to understand the importance of familiarity and routine. A member of staff said, "People with dementia associate my face with the activity and it builds a good relationship."

People told us they were involved in making decisions about their care because a manager came to see them to discuss and agree their care plan when they started to use the service. One person explained, "They set out a care plan when they first introduced themselves. I was agreeable, and they have more or less kept to it." People's care visits were arranged for precise times of day that suited their preferences to get up, to eat, to go out and to go to bed. The provider's electronic rota system included a facility to ensure only staff that met the person's preferences were allocated to work with them.

Staff attended training in equality and diversity and understood the importance of respecting people's beliefs, values and cultural traditions. Staff told us, "I don't mind who I work with. They all just need help and that's why we are here" and "I respect their views and beliefs, we are all different."

People told us staff were always polite, respectful and considerate of their needs and feelings. People told us staff supported them to maintain their dignity, especially while delivering personal care, and treated their relatives, pets and homes with respect, because they understood the importance of person centred care. People told us, "It's very personal to me", "It's not intrusive" and "[Name of staff] knows the boundaries and respects our privacy."



## Our findings

At this inspection, we found staff were as responsive to people's needs and concerns as they were during the previous inspection. The rating continues to be Good.

People told us the staff and management team listened to their views about how they were cared for and supported and responded appropriately. People told us the management team regularly checked that their care plan continued to meet their needs, because they understood the importance of being flexible to changes in their needs and abilities. People told us, "Flexicare is very personal and the manager came round to see us" and "The manager followed things up early on to see it was working okay."

People's needs were assessed at the start of service and continually reviewed, to make sure their individual needs and preferences were met. A member of the management team phoned people within the first two weeks of starting the service to check whether any changes were needed, for example, in the times of each call and whether the person was happy with their team of care staff. People told us the management team was responsive to their feedback about their care. They told us, "They will make changes to suit me", "They will try to send me the staff I like and mostly I get the ones I like" and "They do reviews. We go through the care plan and it has been adjusted."

Staff told us their work was rewarding because they were empowered to respond to people's emotional needs for support and reassurance. One member of staff told us, "It's when you walk in and they have not had a good morning and when you leave they have a big smile on their face. You can change how they feel. If they are having a down moment, you can change their mood." One person told us, "They always ask me if they can do anything else before going."

Staff kept daily records at people's homes of how people responded to care and about their appetites, health and well-being. Staff told us the daily records were detailed enough for them to understand and follow up any changes in people's needs or in how they should support people. Staff also notified the management team of any changes they had noticed. Staff told us, "They tell us of any reports from earlier in the day, by text message. Reports are sent automatically to the staff on that run." Records showed staff were advised of changes in people's medicines and health and any additional actions they should take to keep people safe, as well as changes in their personal preferences.

The provider's complaints policy and procedure was explained in the brochure people were given at the start of service. The provider had not received any formal written complaints, because they had dealt with

concerns and issues as soon as they arose. People told us, "I've asked to have one carer changed once and they did this with no fuss" and "I've had no complaints, but I know I could if it was ever needed." Other people told us when they made a complaint about anything, it was taken seriously and resolved promptly to their satisfaction.

## Our findings

At this inspection, we found the service was as well-led as we had found during the previous inspection. The rating continues to be Good.

People told us they would recommend the service to others because the staff were friendly and reliable and the provider and management team sought their opinion and empowered them to make changes to the service they received. People told us, "We have had a very good experience with [Name] at the start", "It's been excellent for us. I rate them very well" and "Overall it is really impressive."

The registered manager was also the owner of the service and had been the registered as the manager for 3 years. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

The registered manager continued to have oversight of the service and to send us statutory notifications about important events at the service, in accordance with the regulations. They had delegated the day-to-day management of the service to a manager, who maintained face-to-face contact with people at regular reviews of care. Everyone we spoke with was impressed with the manager's empathy and understanding of their individual needs and their skill at matching them with suitable staff. They trusted the manager's judgement and leadership.

The manager and staff shared the registered manager's values, which was to put people at the heart of the service. A member of staff told us, "There is no management versus staff divide. It is a proper team with the same purpose." Staff told us they liked working for the service because they always felt supported in their day to day work. Staff told us, "Any problems, I just call the office. They reply and advise or come out if needed. They are always on call and always answer" and, "It's a great company to work for, a really friendly feel. There's no dramas, everyone knows the clients. It's a really nice atmosphere."

Staff had regular opportunities to discuss their work and any personal concerns at one-to-one meetings with their line manager. They were encouraged and supported to consider their long term personal development. Staff told us they could 'talk about anything' and several staff were working towards nationally recognised qualifications in health and social care.

Staff told us the management team conducted regular and ad-hoc, unannounced checks of them in practice at people's homes, to make sure people received care in accordance with their care plans. The senior staff checked that people's daily records reflected their care plan, that medicines had been administered in line with prescriptions and that staff worked in accordance with the provider's policies. They also took the opportunity to ask people if they wanted to make any changes to their care plan.

The provider's quality assurance process included checking that people were satisfied with the quality of their care and support. The manager arranged regular telephone conversations and face to face meetings with people in their own home, to assess the quality of the service from their perspective. People were asked if they were satisfied with the time and duration of their calls, their carers' attitude and whether they wanted any changes made. People told us they appreciated that the management team took a personal interest in how they felt about the service.

People were also invited to take part in annual written quality surveys. Any mixed or negative feedback, and any non-response, was followed up by the manager to make sure action was taken to improve the service from the individual's perspective.