

# Filcare Ltd

# Filcare Ltd

### **Inspection report**

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### Ratings

Overall rating for this service	Good •
Is the service safe?	Good
Is the service effective?	Good
Is the service caring?	Good
Is the service responsive?	Good
Is the service well-led?	Good

# Summary of findings

### Overall summary

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

At the time of the inspection, the location did not care or support for anyone with a learning disability or an autistic person. However, we assessed the care provision under Right Support, Right Care, Right Culture, as it is registered as a specialist service for this population group.

#### About the service

Filcare Ltd is a domiciliary care agency providing personal care for 15 people at the time of the inspection. The service is registered to provide support for older people and younger adults who may live with physical disabilities, sensory impairment, mental health needs, dementia, eating disorders, learning disabilities or autism.

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

#### Right Support:

People were encouraged to be involved in planning how their care needs would be met. 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. Care workers understood the importance of providing respectful and dignified person-centred care tailored to people's individual needs.

Care workers had received training and demonstrated a clear understanding of how to provide safe and effective care and support. Additional specialist training was provided to enhance care workers' understanding of people's medical conditions.

People were safeguarded from abuse and care workers were knowledgeable about how to support people safely. Accidents and incidents were recorded and shared with the wider care team to promote learning.

#### Right Care:

People had detailed risk assessments and care plans in place to support care workers to provide safe and consistent care and support.

The provider operated a robust recruitment process which helped to ensure people received care and support from care workers who had been safely recruited and inducted into care.

People were supported by caring and kind care workers who knew their likes and dislikes.

#### Right Culture:

The provider had developed a quality assurance system encompassing all aspects of the service delivery. The registered manager undertook a range of routine checks to satisfy themselves the service was performing safely and in line with regulation.

The provider and management team had developed an open and inclusive culture in the service. They empowered the care team to truly promote people's individuality, protected their rights and supported care workers to develop and flourish.

We received positive feedback from people, their relatives and staff about the management team. Everyone we spoke with, including external professionals, said the management team were approachable and responsive.

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

#### Rating at last inspection

This service was registered with us on 03 May 2022 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?	Good •
The service was safe.	
Details are in our safe findings below.	
Is the service effective?	Good •
The service was effective.	
Details are in our effective findings below.	
Is the service caring?	Good •
The service was caring.	
Details are in our caring findings below.	
Is the service responsive?	Good •
The service was responsive.	
Details are in our responsive findings below.	
Is the service well-led?	Good •
The service was well-led.	
Details are in our well-led findings below.	



# Filcare 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

This inspection was undertaken 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 the registered manager in post was also the nominated individual.

#### Notice of inspection

We gave the service 24 hours' notice of the inspection. This was because it is a small service and we needed to be sure the provider or registered manager would be in the office to support the inspection.

Inspection activity started on 30 May 2023 and ended on 06 June 2023. We visited the location's office on 31 May 2023.

#### What we did before inspection

We reviewed information we had received about the service since registration. We sought feedback from the

local authority and professionals who worked with the service. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

#### During the inspection

We sought feedback by telephone and email from people who used the service and their relatives, care workers, partner agencies and external health and social care professionals. We received feedback from 2 external health and social care professionals, 8 care workers, 2 people who received care and support, 3 relatives, the care manager and the registered manager.

We reviewed records including staff training, complaints and compliment logs, accident and incident trackers and the registered manager's governance and monitoring documents. We reviewed care plans and risk assessments for 2 people and recruitment documents for 2 care workers.



### 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 Good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- The provider operated effective systems to help protect people from the risk of harm or abuse. Care workers received training and were clear about how they would report any concerns both internally to the provider and externally to the local authority safeguarding team.
- The registered manager understood their responsibilities to safeguard people from abuse. They advised they had not needed to raise any safeguarding alerts since registration, however, demonstrated a clear knowledge and understanding of the safeguarding processes.
- People, external professionals and relatives said care workers provided safe care for people.

Assessing risk, safety monitoring and management

- Risks to people's health, safety and well-being were assessed and a care plan was developed to help remove or reduce any risks where possible. Risk assessments had been developed for areas such as using a walking aid to mobilise independently, using a stair lift, falls, using an inhaler and risks of medicine reactions. This enabled people to stay as independent as possible within the confines of their health needs.
- The management team helped ensure people received support in the event of an emergency. The management team provided a 24 hour on-call service and provided emergency cover themselves if needed for care worker sickness or other such events.
- Care workers said they were supported to provide care that was safe. A care worker told us, "If I raise any concern, the management will act on it right away without any delay." An example given was where care workers advised the management team about a person's care taking longer than initially assessed. A member of the management team visited the person with care workers to observe and understand the concern. The outcome was the person's visit time was extended to enable unrushed care and support.
- People's care plans reminded care workers to 'shuffle' the keypad numbers on the key safe once they had replaced people's keys on leaving. This was good practice as it helped give people the assurance they were safe in their homes.

#### Staffing and recruitment

- People's relatives felt there were enough care workers available to meet people's care needs. There had not been any missed care calls and all feedback confirmed people's care and support was delivered within agreed timeframes. A person said, "The staff are all friendly and if they are not on time, it is because of traffic delays in getting here, which is not often, and that doesn't worry me at all."
- The provider operated robust recruitment procedures; appropriate checks were undertaken to help ensure applicants were suitable to work at the service. Criminal record checks and satisfactory references had been obtained for all applicants before they worked with people independently.

• Newly appointed care workers were personally introduced to people who used the service by the management team. This meant people always knew the care worker coming into their home.

#### Using medicines safely

- Care workers received training to support them to administer people's medicines safely. The management team undertook competency assessments once staff had completed their training to help ensure safe practice.
- Care workers supported some people with administering their medicines and just prompted others to take theirs as needed. A relative said, "Care workers do not administer any medication, but they always make sure [person] has taken it when they arrive in the morning and remind them to do so when they leave."

#### Preventing and controlling infection

- People were protected from the risk of infection because care workers had been trained in infection control and followed current infection prevention and control guidance. People said care workers wore aprons and gloves during personal care.
- Care workers were supplied with personal protective equipment (PPE) to help prevent the spread of infections and were clear on their responsibilities with regards to infection prevention and control. The provider held plentiful stocks of all PPE.

#### Learning lessons when things go wrong

- The provider took appropriate actions in response to any concerns and learning was shared with the whole team. No accidents or incidents had occurred since the service began but we were re-assured the registered manager would take quick and effective action.
- A care worker told us, "Managers have taught us what actions are to be taken during accidents and incidents at workplace. In terms of complaints, managers will speak to us about the problem straight away and teach us the right thing to do. They will also follow up from time to time to make sure errors are not repeated."



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

- People's needs were robustly assessed before they started to use the service. These assessments were undertaken with the person and their relatives (if appropriate) and included information about care and support needs and individual wishes and preferences. These assessments formed the basis of people's care plans and risk assessments.
- The registered manager said, "I support our small team in attending the needs of people, particularly on the very first day of the care package where possible. By doing so, I can see what exactly the needs of people are, and we are able to complete a person-centred care plan and risk assessment. It is also an opportunity to build a trust from the start."
- People's relatives praised the care team for the effective care and support they delivered. A relative spoke of how a person had 'thrived' with the care and support provided by care workers from Filcare Ltd.
- People's dietary needs and requirements were identified in their care plans. At the time of this inspection there was little support provided in this area however, care workers had received training around how to support people with these needs.

Staff support: induction, training, skills and experience

- Care workers received training in basic core areas including safeguarding, safer moving and handling, dementia, fire safety and the Mental Capacity Act. Care workers had a good understanding of these topics and received supervision and competency observations to help ensure they had the appropriate knowledge to perform their job roles. The service embraced training opportunities provided by the local authority quality innovation team. Management and care workers attended a variety of training modules reflecting care and support of the frail and elderly. These included topics such as end of life care, falls prevention and managing chronic pain amongst others.
- Care workers advised they enjoyed good support from the registered manager and the wider management team. A care worker said, "I have regular supervision and have completed all my training. Management is very supportive and hands on. They work with us and they do spot checks. They also explained that they do this to ensure continuity of care and that we practice what we have learned."
- Newly recruited care workers were mentored throughout their induction by a member of the management team. Inductions were thorough and care workers knowledge was tested by the management team during shadow shifts prior to them working with people unsupervised. The registered manager said the amount of shadow shifts and support provided depended on the skills and confidence of the individual care worker.

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live

healthier lives, access healthcare services and support

- The provider and management team worked well with external professionals for the benefit of people who used the service. These included social workers, GPs, occupational therapists and district nursing teams.
- Information was shared with other agencies if people needed to access other services such as hospitals.
- The registered manager advised they changed the times people received their support around health appointments if this was people's choice.

Ensuring consent to care and treatment in line with law and guidance

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The Act requires that, as far as possible, people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA. When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty. We checked whether the service was working within the principles of the MCA.

- People and relatives told us care workers always asked for consent when supporting them. People had been asked for their consent to be supported in line with their individual care plans and risk assessments.
- Care workers received training in the Mental Capacity Act and had a good understanding of how to put this in to practice.



# 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

- Care workers had a good understanding of the people they supported and took their time to get to know people's individual likes and dislikes. People's past lives and interests were incorporated into their care plans.
- People and their relatives praised care workers for the kindness, care and support they provided. A relative said, "What we observe is fantastic care. They (care workers) truly seem to enjoy their time with [person] and have tried to find things to engage them according to person's interests/likes."

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

- People were consulted about changes to their care and these were documented. Regular and robust reviews of people's care support were undertaken involving people and their relatives where appropriate.
- People and their relatives told us they were always involved in any decisions about their care.

Respecting and promoting people's privacy, dignity and independence

- People and their relatives told us care workers promoted people's privacy, dignity and independence. People described how they were supported to have their personal hygiene delivered whilst still feeling 'in control' and respected as a human being. A person told us, "The support I have makes me feel I am still a person with rights and choices."
- A relative said, "We are extremely happy with their (Filcare Ltd) flexibility, their kindness and the wonderful service they provide for not only [person], but us as well. Fantastic piece of mind."



## 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 received care to meet their individual needs and preferences. People's care was adapted to meet their changing needs. For example, where people began to regain some of their mobility the support was amended to help maximise independence.
- Care plans were detailed with regards to people's preferences, likes and dislikes. This meant care workers had the information available to help ensure people received consistent care to meet their individual needs.
- People's care was kept under regular review. Each person's care plan was reviewed within the first month and then every three months routinely unless their needs changed or they requested a review. This meant staff had up to date information to help ensure they provided the right care to meet people's needs.

#### 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 provider had not had the need to make information available in different formats yet but said they would do so should the need arise.

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

• The registered manager said support was provided to follow interests and activities if people requested it. Examples given where this support was provided included supporting a person to go for a walk, to attend clubs or to go out for a coffee.

Improving care quality in response to complaints or concerns

- The provider had a complaints and compliments policy; people and their relatives told us they had a copy of the policy in their homes to access if needed. People and their relatives said they had not had the need to raise any complaints, but all said they would be confident to do so if the need arose.
- A relative said, "I wouldn't say we've ever had any complaints." The relative went on to say, "The [registered manager] and [care manager] are very responsive. We feel very comfortable approaching them."

End of life care and support

• The registered manager advised no-one was receiving end of life care and support at the time of this

inspection. However, care worke life.	ers had received trainir	ng and knew how to su	ipport people at the e	nd of thei



### 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 provider and management team had a good understanding of their responsibilities towards the people they supported and demonstrated a strong passion for delivering person-centred care.
- People and relatives said they found the registered manager and wider management team to be warm and professional with, "nothing too much trouble" and a, "can do attitude."
- The service delivered good outcomes for people. An external professional told us, "They (Filcare Ltd management) are always honest and upfront with what they can and cannot take on, whilst always taking existing clients into account. I am thoroughly satisfied with the service and am happy to sign post clients to them."
- The provider had created an open, inclusive and supportive environment for the care team. This enabled care workers to be more confident, to feel valued and respected and to thrive and learn in a non-blame culture. A care worker said, "They (management team) look after us, they listen to us. We have a voice and I'm happy working at Filcare."

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

- The provider demonstrated a clear understanding about the duty of candour and told us they encouraged the care team to be open and honest in their feedback.
- The management team and care workers understood their roles and respected the impact their roles had for people. The registered manager and care manager worked alongside the care team routinely and assessed the quality of the care provided as part of their daily work.

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

- People and their relatives gave positive feedback about the service and how it operated. One person said, "I have told friends to keep them (Filcare Ltd) in mind if they should need assistance." A relative said, "Contact with the management has been exemplary since day one. They came to see [person] to do a very thorough assessment of their needs and discussed with us what Filcare's responsibilities would be, what they can do and what they can't do. It was all very clear; we were left with no unanswered questions or anxiety. I would recommend Filcare without hesitation."
- Care worker feedback was sought via regular scheduled face-to-face meetings and supervision with the

management team. Care workers were positive about working with Filcare Ltd. A care worker said, "I will absolutely recommend Filcare Ltd to staff looking for care work because I have seen a high standard of care and the management treat everyone fairly and they give good incentives. Mostly, they are approachable and our (registered) manager is a good leader."

• Regular feedback about the quality of the service provided was gathered from people and their relatives. The satisfaction scores were high and people's comments were positive.

#### Continuous learning and improving care

• Learning was taken from incidents to improve people's experience of care. A care worker told us, "The management shares information regarding learning outcomes of complaints, incidents or accidents through a digital group chat. The management gives us the information we require about people especially when a person or relative has a concern. The (registered) manager shares it without putting names of the staff involved and gives actions to be taken so that it will not happen again. The (registered) manager will say, 'lessons to be learnt for everyone'."

#### Working in partnership with others

- The management team often worked with other professionals to achieve good outcomes for people. For example, social working teams, community nurses, occupational therapists and GPs.
- An external professional advised, "My impression from (The registered manager and the care manager) is that they are extremely passionate about the quality of their service delivery and their willingness to attend ongoing training to continually improve."
- An external professional advised of the feedback they had received from people receiving care and support from Filcare Ltd. They told us, "At all times we have had excellent feedback. All clients are satisfied with the care and many say how the agency go over and beyond. They (Filcare management) have excellent communication skills and the time they take to contact the client and assess is amazing."