

Eleanor Nursing and Social Care Limited

# Eleanor Nursing and Social Care Ltd - Barnet Office

## Inspection report

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## Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

# Summary of findings

## Overall summary

### About the service

Eleanor Nursing and Social Care is a domiciliary care agency providing personal care and support to people living in their own homes. The service is registered to support with a broad range of physical, mental health, learning disability needs and older people with dementia. 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. At the time of the inspection there were 67 people receiving a service that is regulated by CQC.

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

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.

### Right Support:

People told us, staff supported them to have the maximum possible choice, control and independent which enable people to take control over their own lives. People and relatives told us, that they felt there were enough staff working at the service, which met people's individual needs.

The provider ensured that staff were recruited safely and had the right skill mix to support people who used the service. Staff supported people with their medicines and promoted people's independence as much as possible. The service also took measures to help prevent the spread of infections.

Most people told us that their care was delivered on time, and they had no concerns with staff calls. We reviewed the monitoring call systems, which showed some late calls were recorded and some staff were leaving before their allocated time was up. However, the registered manager was able to provide evidence that appropriate action was taken for staff lateness and that people instructed the office that once their care was completed staff was to leave. People support plans were update and the local authority were informed.

### Right Care:

Staff understood people's cultural and spiritual needs. People spoke positively about the service and told us that they were treated with kindness and their privacy was respected.

People's care plans and risk assessments were reviewed and updated. We found that plans were written in a person-centred way that people understood. Staff understood and were able to demonstrate how to protect people from poor care and abuse.

### Right Culture:

People told us that they felt inclusive and empowered because of the attitudes and behaviours of the management and staffs. People felt that they received good quality care and support, as staff were trained to meet people's needs and wishes. During the inspection we identified that not all office staff understood the correct terminology when talking about people support needs. We recommend the provider review their current communicate training.

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

We last inspected this service on 20 May 2021 where it was rated overall good. (Published 16 June 2021).

#### Why we inspected

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

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Eleanor Nursing and Social Care on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

#### 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 well-led?**

**Good** ●

The service was well-led.

Details are in our well-led findings below.

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## **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 carried out by 1 inspector.

#### Service and service type

Eleanor Nursing and Social Care is a domiciliary care agency which provides personal care to people living in their own houses and flats.

#### Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

#### Notice of inspection

The provider was given 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 service to support the inspection.

### What we did before the inspection

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.

### During the inspection

We spoke with the registered manager and the area manager, also with the HR co-ordinator. We reviewed a range of records. This included 6 people's care plans and risk assessments, 6 peoples medicine administration records (MAR charts), 6 recruitment records and 2 quality audits. We also checked the providers had key policies and procedures in place to help guide Staffs. We spoke with 10 people who used the service and 3 family members about their experience of the care provided. We also received feedback about the service from 10 members of staff including the registered manager, care staff.

# Is the service safe?

## Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At our last inspection we rated this key question good. At this inspection the rating has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- The provider had effective systems to keep people safe from avoidable harm of abuse. For example, the service had up to date policies and procedures in place, which provided staff with clear guidance of what actions were required if abuse was identifying.
- People told us they felt safe. Comments included, "The staff are good, they help me in the areas I need support with. The staff has helped me to live at home safely.", "I feel safe with all the staff that visits me." And "Staff are very good; they know what they are doing."
- Staff were clear who to report concerns to and how to work with other agencies such as the safeguarding team and police. Comments included, "I would talk to the person and speak to my manager about the concerns.", "I would contact the office and the [safeguarding team]. and "I would report to my manager and to the local authority and to the police if need."
- Staff received appropriate training in safeguarding people from abuse, which gave them the knowledge and skills to help protect people who used the service.

Assessing risk, safety monitoring and management

- People's care records and risk assessments were up to date and helped people get the support they needed due to the detailed information recorded with in the plans.
- People told us that they were given a copy of their risk assessments and care plans. One person told us, "I have my folder that is kept in my home, which has my care plan and risk assessment in it for me and staff to read."
- People's risk assessments covered a variety of areas to help support them with risks. This included people's mobility needs, medicines, home environment, nutrition, and hydration.

Learning lessons when things go wrong

- The provider had systems and processes to review accidents and incidents forms. This was completed by the registered manager who identified any concerns, and a lessons learnt action plan was completed and shared with staff at the team meetings.
- Staff confirmed that they receive regular updates and meetings by the registered manager on any changes as part of lessons being learnt.

Staffing and recruitment

- The provider carried out checks on all staff before they were able to care for people. This practice helped ensure that staff were recruited safely, and that staff had the right skills and experience to meet people's needs. The checks consisted of a pre-employment check, employment references, proof of identification and right to work in the UK.

- The service also completed background checks with the Disclosure and Barring Service (DBS). A DBS check is a way for employers to check staff criminal records, this helps to decide whether they are a suitable person to work with vulnerable adults.
- The majority of people we spoke to, told us they were happy with their staff and that staff were on time. Comments included, "I am very happy with the staff, they are very reliable, and they have never missed a visit." "I feel I have the right level of staff that helps me with my care. they always come on time and stay until their time is up." "One relative said we have recently had some issues with the lunchtime call as the staff has been running a bit late at times due to the traffic. The agency is reviewing this at present."
- The majority of people told us they had regular staffs who they knew well, comments included "I have regular staff that I know." "The manager has given me a rota, so I know who is supporting me on each day." "The service is fine, and the staff do a good job, however, I do have a lot of different staff that visit me, which I am planning to talk to the manager about as I have not yet informed them of these issues."

#### Using medicines safely

- People received the level of support needed from staff to receive their prescribed medicines safely. People confirmed that staff supported them to take their medicines on time. Comments included, "Staff reminded me to take my medication, as sometimes I may forget to take them." "Staff give me the medication that I must take each day. I have never had any issues with my medication as staff know what they need to do for me."
- We reviewed people's medicine administration records (MAR) which were completed correctly by the staff.
- The provider's medicines policy was in place and up to date and staff were trained and assessed before they administered medicines to people.

#### Preventing and controlling infection

- The service had effective systems for the prevention and control of infection which helped and lowered the risk of the staff catching and spreading infections to people who use the service.
- People told us that the staffs followed good hygiene practices. One person said, "Staff always wash their hands when they first come into my home. Also, they wear gloves and aprons when supporting me with personal care."
- All staff were trained in infection prevention and control, including the correct use of PPE, which staff and training records confirmed had been delivered.
- The registered manager told us that staff carried out weekly audit checks to ensure that the service had the right amount of PPE in stock.

# 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 our last inspection we rated this key question requires improvement. At this inspection, the rating has changed to good. This meant that the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- The providers systems and processes for monitoring quality and safety were effective. The management team carried out a range of checks such as medicine management, IPC audits and call monitoring audits.
- During the inspection we reviewed the call monitoring data, which identified that some staff were late for their care visits and that staff were leaving before the allocated time was finished, however, from our discussions with the registered manager, they were able to demonstrate the concerns had been identified and action were in place to address the concerns. For example, people told us that they received their care and support on time and that staff left early at the person's request.
- The management team visited people in their homes and observed the care being delivered to make sure staff had the right skills, knowledge and competency. One person told us, "A senior member staff carries out spot checks to ensure that staff are doing their job right. They also talk to me and ask me for feedback on how things are going with my Staff and if there are any changes to my care support needs."
- The provider communication was effective and ensured staff and people were kept up to date. Regular team meetings were held, and staff told us they were always informed when any changes were made. One staff told us, "We have staff meeting with the management team, they will update us on any changes to people support needs. I find the meetings to be helpful."
- The provider had a governance system to help analyse any learning and making improvements where identified. For example, the registered manager, showed us the improvements they had put in place from a safeguarding concern that was raised.

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; Working in partnership with others; Continuous learning and improving care

- The provider was clear of their registration requirements under CQC and of their duty of candour.
- During our inspection we reviewed the provider's safeguarding and investigation log, there were evidence the service took the necessary actions to address the concerns. The service also apologised to people when things went wrong.
- The provider's policies and procedures had up to date information and staff discussed them at their team meetings.
- Staff understood their roles, and responsibilities in relation to duty of candour. One staff told us, "We have discussed in staff meetings and supervisions with our manager of the importance of under duty of candour, this is also a part of staff induction when staff first start with the organisation. I report any concerns to my

manager and follow our duty of candour policy."

- As part of the provider's monitoring and processes systems they carried out audits and spot checks. This was to help improve and develop the running of the service.
- The provider had appropriate systems to review accident and incident forms. The registered manager reviewed and actioned the necessary steps to help avoid re-occurrence. The learning from them were also fed back to the staff team within an action plan.
- The service participated in provider engagement meetings with the Local Authority, which help improve care services in the local area.
- The service kept up to date with national policies which helped to improve the service and keep up with any new changes within social care.

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

- Staff told us that they felt respected, supported and valued by management. Staff comments included, "I have never had any concern or worries about the way I am supported by the management team; they have always been helpful." , "I have learnt a lot since I have worked for the company. Everyone is very nice to work with and my manager is very supportive." , "I know that I can call the office any time to get advice or support if I need to." And "The office staff are very helpful and supportive,"
- People and relatives were positive about the management and staff team. For example, one relative said, "I have always found the manager and office staff to be helpful and open to feedback." Another relative said, "Generally I find that if I have any concerns the office addresses the issues quickly." One person also told us, "The office staff are very good, if I have any suggestions about my care, they will look at how they can support me."
- People and staff felt the provider set a culture that valued reflection, learning and improvement to the service.
- During the inspection, we found a staff member that worked in the office did not use the correct terminology when speaking about a person who used the service. We discussed our concerns with the registered manager, who addressed the concern immediately.

We recommend the provider review the current communicate training with staff.

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

- The service worked well in partnership with other agencies such as, health and social care organisations and they were aware how to access the advocacy service if people were to need this support.
- People told us that the provider asked for feedback from them and their family members. This helped to develop the service and ensure people's needs were being met.
- Staff encouraged people to be involved in making decisions about their service. This was done by asking people if they wanted their care and support to be delivered at different times or given in a different way.