

North London Homecare and Support Limited

North London Home Care & Support Limited Enfield

Inspection report

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18 October 2023
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25 October 2023

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Ratings

Overall rating for this service	Good ●
Is the service safe?	Good ●
Is the service effective?	Good ●
Is the service well-led?	Good ●

Summary of findings

Overall summary

About the service

North London Home Care and Support Limited Enfield is a domiciliary care agency. The service provides support to older people living in their own homes. At the time of our inspection 16 people were using the service.

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

People who used the service and their relatives told us they were happy with the care they received and would recommend the service to others.

People were supported by staff who knew how to protect them and keep them safe. There were safeguarding policies in place and the registered manager and staff knew how to identify and report concerns.

Staff followed risk assessments to ensure people were supported in a safe way. Medicines were managed safely.

Staff wore personal protective equipment (PPE), including face masks, when supporting people and were trained in infection control.

People's needs were fully assessed prior to the start of the care package. The provider ensured staff were trained to meet people's needs and kept them up to date with best practice guidance.

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.

The provider actively engaged with people and staff to be able to continuously learn, expand and improve the service they provided.

Auditing and quality assurance processes were in place to enable the service to identify where improvement was needed.

The service worked in partnership with other agencies to make sure people received the right care and support.

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 19 December 2018).

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 well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

North London Home Care & Support Limited Enfield

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

The inspection was carried out by 1 inspector and 1 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 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

This inspection was announced.

We gave the service 48 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the provider or registered manager would be in the office to support the inspection.

Inspection activity started on the 18 October 2023 and ended on 25 October 2023. We visited the location's office on the 18 October 2023.

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 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 spoke with the registered manager, team leader and 3 care staff. We also spoke with 2 people and 10 relatives of people using the service.

We looked at a range of documents and written records including 3 people's care records, 3 staff recruitment records and information relating to staff training and the auditing and monitoring of service provision. A variety of records relating to the management of the service, including policies and procedures were also reviewed.

We continued to seek clarification from the provider to validate evidence found. We continued to look at records the registered manager shared with us.

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. The rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were protected from the risk of abuse and received safe care.
- Staff told us they received safeguarding training and updates and were confident that they would know how to access the provider's safeguarding policy and procedures if needed.
- Staff were familiar with the whistleblowing policy and they were aware of contacts outside the provider if they needed to escalate a concern. A staff member told us, "I have read the policy and know how to raise concerns. I can speak with the manager and also contact the local authority or CQC."

Assessing risk, safety monitoring and management

- Risks to people's personal safety were assessed, monitored and managed effectively.
- Risk assessments considered risks associated with people's environment, their care and support, mobility and health conditions.
- Regular reviews took place and plans were updated to reflect any changes in people's needs.
- Staff told us risk assessments provided them with clear information about the risks people faced and how to manage them safely. Staff were confident about reporting any concerns about people's safety.
- The provider had a business contingency plan which provided information and guidance on actions staff should take in emergency situations.

Staffing and recruitment

- There were enough staff to meet people's needs safely. People received consistent care from staff who knew them well. Relatives told us, "[Person] calls the office to check who's coming but we know it's almost always the same people. We know them well; they are friendly and approachable and [person] loves chatting with them" and "His needs are complex and fortunately, he has had a very stable team working with him."
- People and relatives told us they were satisfied with their call times. The registered manager told us call times were kept under review and they worked with people to improve call times to their satisfaction.
- Safe recruitment processes were in place. These included pre-employment checks such as Disclosure and Barring Service (DBS) checks. DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.

Using medicines safely

- People received their medicines as they had been prescribed.
- A relative said, "They have got a good routine for tablets. They get them out, give them to her with a drink

and record this."

- Staff were trained, and their practice monitored to ensure it was safe. Competency assessments took place to help make sure that their medicine administration practice was safe. Regular spot checks took place which included a medicine observation.

Preventing and controlling infection

- Safe practices were followed to help prevent the spread of infection including those related to COVID-19.
- Staff received training in infection prevention and control (IPC) and the use of personal protective equipment (PPE) and they were provided with up-to-date government guidance in infection prevention and control practices. The registered manager carried out spot checks to assess staff knowledge and practice in this area.
- A person said, "They always seem to find time to do extra things and the place is always clean and tidy."

Learning lessons when things go wrong

- Staff raised concerns and recorded incidents and near misses. This helped keep people safe.
- There was evidence that learning from incidents and investigations took place and appropriate changes were implemented. For example, care plans and risk assessments were updated when changes were noted.
- Actions had been taken in line with the service's policies and procedures. Where incidents had taken place, involvement of health and social care professionals was requested where needed to review people's plans of care and treatment.

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 our last inspection we rated this key question good. The rating for this key question has remained 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

- People received care and support in line with standards, guidance and the law. People's needs were holistically assessed to include their physical, mental and social needs.
- People's needs were assessed before they began using the service to ensure these could be met. If people were referred to the service in an emergency, assessments were carried out at the shortest delay possible. Following this, personalised care plans and risk assessments were put in place for people.
- People and their relatives told us, "We signed off the care plan and [person] was included in the discussion" and "We look at the care plan whenever things change – it happens quite often."

Staff support: induction, training, skills and experience

- Staff had the necessary skills, knowledge and experience to perform their roles.
- Staff completed the Care Certificate as part of their induction. The Care Certificate is an agreed set of standards that define the knowledge, skills and behaviours expected of specific job roles in the health and social care sectors. It is made up of the 15 minimum standards that should form part of a robust induction programme.
- New staff worked alongside experienced staff to ensure they could meet the needs of the people they supported.
- Staff completed a wide range of training courses including dementia care, mental health awareness, and equality and diversity. If specialised training was needed this was also provided.

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

- People were supported to maintain a balanced diet where this was part of their care package. Where people received support with their meals and drinks their dietary preferences and allergies were recorded.
- Daily care records showed staff offered people choices to meet their preferences.
- Staff were trained in food safety. This helped to ensure they provided effective care when people needed support with their meals and drinks. Relatives told us, "[Person] is obstinate with food. Their first reaction to any choice is 'no' and staff have to work round this. They know what he likes and eventually get him to eat" and "before staff leave, they put a drink beside [person] where he can reach it."

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

- The service worked collaboratively with healthcare professionals. A range of professionals were involved in assessing, planning, implementing and evaluating people's care and treatment to ensure people received the right healthcare.

- People were encouraged and supported to be as independent as possible in managing their own health, for example ringing for GP or district nurse appointments. If people were not able to manage their appointments, their family would usually do this, with staff supporting where necessary.
- Staff knew how to respond to people's specific health and social care needs. For example, recognising changes in a person's physical health. A relative told us, "If the carers think that he is not well they call me straight away. They always stay on until help arrives which is really kind."
- Staff recorded any concerns around people's health, if appointments had been requested or made and the outcomes.

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 MCA 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, whether appropriate legal authorisations were in place when needed to deprive a person of their liberty, and whether any conditions relating to those authorisations were being met.

- The registered manager understood their responsibilities under the MCA and ensured staff were working within the principles of the MCA.
- People's capacity was considered at initial assessment and staff were encouraged to support people to make their own decisions where they could.
- Staff were trained in the MCA and understood the importance of gaining consent from people and ensuring the care and support they received was in their best interests.

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 good. The rating for this key question has remained 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 demonstrated their commitment to providing a person-centred responsive service. Staff we spoke with shared this commitment.
- People were supported in a sensitive and kind manner. Feedback from relatives was positive and they felt included and listened to. People and their relatives spoke very positively about the registered manager, management team and staff. They told us, "They keep [person] happy and cared for; that's all we can ask for" and "They are reliable and trustworthy – we wouldn't have stayed with them so long if we didn't trust them."

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; Continuous learning and improving care

- The registered manager understood and acted on the duty of candour.
- The service apologised to people, and those important to them, when things went wrong.
- Staff gave honest information and suitable support and applied duty of candour where appropriate.
- The service was committed to continuous learning and improvement.
- Thorough investigations into incidents were completed to identify any actions that may prevent incidents happening again. Learning from incidents was shared with staff.

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

- The provider had a system in place for monitoring and managing service quality. This included regular audits, spot checks, care reviews and supervisions.
- The registered manager and staff understood their responsibilities for ensuring that risks were promptly identified and mitigated. Risks to people's health, safety and well-being were effectively managed through the review and monitoring of the service.
- Staff understood their responsibilities, they were provided with job descriptions and had access to a range of policies and procedures relating to their work.
- The provider and registered manager understood and demonstrated compliance with regulatory and legislative requirements. They knew to notify CQC of incidents and events occurred at the service.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- Regular surveys were undertaken to gain feedback from people who used the service and staff. Feedback was used to continuously improve the service.
- The service worked in partnership with other agencies to ensure people received care and support which was safe and met their needs.
- Care records showed evidence of professionals working together. For example, GPs and various specialists specific to people's health conditions/needs. Regular reviews took place to ensure people's current and changing needs were being met.