

Mrs Kathleen Ann Dawson

# F & K Domestic Services

## Inspection report

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Tel: 01744733692

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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

F&K Domestic Services is a small domiciliary care agency that provides personal care to people living in their own homes. 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 our inspection, the service was supporting 1 person with personal care.

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

Risks to people's health, safety and well-being had been considered and where necessary, information was available to ensure staff supported people safely. Processes were in place to ensure the safe management of medicines.

Systems were in place to ensure accidents, incidents and safeguarding concerns were acted upon appropriately. The manager demonstrated a knowledge and understanding regarding incidents of concern and what action they were required to take.

There were enough staff employed by the service to ensure people received the support they needed. Safe recruitment processes were in place to make sure any new applicants were suitable to work for the service.

Systems were in place to support continuous learning and improvement of the service. The manager engaged with people and staff to enable them to give their views and provide feedback.

The manager demonstrated a knowledge and understanding for their role and was responsive to feedback given throughout the inspection.

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

The last rating for this service was good (published 27 July 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** ●

This service was safe.

Details are in our safe findings below.

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

**Good** ●

This service was well-led.

Details are in our well-led findings below.

# F & K Domestic Services

## 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 completed by 1 inspector.

#### Service and service type

This service is a domiciliary care agency. It provides personal care to people living in their own homes.

Inspection activity started on 1 November 2023 and concluded 15 November 2023. We visited the services' office location on 1 November 2023.

#### Registered manager

The 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. However, they had recently taken a long term absence. There was a manager in post who had recently applied to CQC to become registered.

#### Notice of inspection

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.

#### 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 looked at 1 person's care plan and a range of other records related to the running of the service.

We spoke with 1 person to gather their views of the service they received. We spoke with the manager to gather their knowledge and understanding of the service. We did not speak with staff during this inspection as the staff employed did not support anyone with personal care.

# 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; Learning lessons when things go wrong

- There were systems in place to safeguard people from the risk of abuse and learn lessons when things went wrong.
- There had not been any accidents, incidents or safeguarding concerns since the last inspection. However, the provider had systems in place to ensure concerns were acted upon appropriately.
- Staff had received safeguarding training and had access to information about how to report concerns.

Assessing risk, safety monitoring and management; Using medicines safely

- Risks to people's health, safety and well-being had been considered and documented to ensure staff had access to relevant information.
- Care plans provided information about how to support people safely.
- The service was not supporting anyone with medicine administration. However, the manager had systems in place to ensure medicines were managed safely in the event they supported people with this.

Staffing and recruitment

- There were enough staff available to ensure people received support at the times they needed it.
- The service had not recruited any new staff since our last inspection. However, the manager had systems in place to ensure safe recruitment processes were followed to ensure any new applicants were suitable to work for the service.

Preventing and controlling infection

- We were assured the provider was preventing the spread of infection.
- Staff had received training in infection prevention and control and had access to PPE where required.

# 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.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care; 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 manager demonstrated a knowledge and understanding for their role and responsibilities.
- The service was only supporting 1 person with personal care. This support was provided by the manager. Staff employed by the service supported other people with tasks outside of CQC's regulatory remit; such as shopping and cleaning tasks.
- Systems were in place to support continuous learning and improving care. However, the service had only recently started to support 1 person with personal care which meant checks in place had not yet been used.
- The manager and provider were aware of their duty of candour responsibilities when things go wrong.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- The manager was keen to promote a person-centred culture and approach to the support provided to people using the service. They were able to demonstrate ways in which this would be accomplished.
- Systems were in place to engage with people using the service and staff.
- Surveys and reviews were completed to gather the views of people and staff to help improve the service.
- The service worked with external agencies to ensure people received the right support.