

House of Care Services Ltd

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Inspection report

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Worcestershire
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09 October 2020

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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

House of Care Services Ltd is a domiciliary care service providing personal care support to people in their own homes. Support is provided to older people, people living with dementia, people with learning disabilities, people with physical disabilities and people with mental health conditions. At the time of our inspection the service provided personal care to 17 people. This is help with tasks related to personal hygiene and eating.

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

People felt safe with their care workers and safeguarding procedures protected people from harm. Risk management had improved since our last inspection and detailed risk management plans supported care workers to provide consistent, safe care to people. Staff were trained in safeguarding and understood their responsibility to report any concerns about people to their managers. Lessons had been learnt when things had gone wrong.

Care workers followed good infection control practice and understood their responsibilities in relation to preventing and controlling infections to keep people safe.

Staff were recruited safely. People's needs had been assessed before they started to receive a service. People confirmed their care calls had been provided at the correct times for the agreed duration.

People received their medicines when they needed them from trained and competent care workers. People were supported to eat and drink enough to maintain their health.

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.

People and their relatives had confidence in the ability of their care workers to deliver safe and effective care. Care workers spoke positively about their training and felt supported and appreciated by their managers.

Effective governance systems monitored the quality and safety of the service provided. People spoke positively about the leadership of the service and told us they would recommend the service to others. People felt listened to and were encouraged to share feedback about the service they received, which had been used to support service improvement.

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

Rating at last inspection (and update)

The last rating for this service was requires improvement (published 21 March 2019) and there were two

breaches of regulations. The provider completed an action plan after that inspection to show what they would do and by when to improve. At this inspection we found improvements had been made and the provider was no longer in breach of the regulations 11 (Need for Consent) and 17 (Good Governance).

Why we inspected

This was a planned inspection based on the previous rating. We undertook this focused inspection to check the provider had followed their action plan and to confirm they now met legal requirements. This report only covers our findings in relation to the key questions of Safe, Effective and Well-led. The overall rating for the service has changed from requires improvement to good. This is based on the findings at this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for House of Care Services Ltd on our website at www.cqc.org.uk.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our reinspection programme. If we receive any concerning information we may inspect sooner.

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.

House of Care Services 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 Care Act 2014.

Inspection team

The inspection team consisted of two inspectors and an assistant inspector. One inspector visited the provider's office. The other inspector, and the assistant inspector contacted people, relatives and care workers by telephone to gather feedback on their experiences.

Service and service type

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

The service had a manager registered with the Care Quality Commission. They were also the provider and that means they legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection

We gave the service 72 hours' notice of the inspection. This was because it is a small service and we needed to be sure a manager would be in the office to support the inspection. Inspection activity started on 08 October 2020 and ended on 12 October 2020. We visited the office location on 09 October 2020.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We gathered feedback from local authority commissioners who work to find appropriate care and support services for people and fund the care

provided.

During the inspection

We spoke with five people who used the service and two people's relatives about their experiences. We spoke with the care coordinator and four care workers. We reviewed five people's care records and six people's medicine administration records (MAR) to ensure people had received their medicines as prescribed. We reviewed records relating to the management of the service including quality audits. We also reviewed three staff files to check staff had been recruited safely.

After the inspection

We reviewed further records relating to the management of the service including minutes of staff meetings, training data, electronic care records and a some of the provider's policies.

Is the service safe?

Our findings

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

At the last inspection this key question was rated as requires improvement. At this inspection this key question has improved to good. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- Risks associated with people's care had been assessed. Risk management plans informed care workers how to provide safe, consistent care.
- One person was at high risk of developing sore skin and their care records contained detailed instructions for care workers to follow to mitigate and manage the risk. Care workers were aware of this. One staff member explained how they used a piece of equipment to reposition the person whilst they were in bed which reduced the risk of person's skin becoming damaged.
- The provider had a business continuity plan and care workers knew what to do in the event of an emergency. This included the action they needed to take if they arrived at someone's home and the person was poorly.
- Previously some risk management plans had not been reviewed or updated in a timely manner which posed a risk. The frequency of reviews had increased to ensure documented information was correct and up to date. This demonstrated improvements had been made and lessons had been learnt.
- Accidents and incidents including falls were recorded. Completed records were analysed to identify patterns or trends, so appropriate action could be taken to reduce the likelihood of them happening again.

Systems and processes to safeguard people from the risk of abuse

- People felt safe. One person said, "I always feel safe with the carers. They treat me like a friend and look after me well." Relatives supported this viewpoint.
- Safeguarding procedures protected people from harm. The care coordinator told us there had been no recent safeguarding incidents.
- All staff members had completed safeguarding training which supported them to understand the different types of abuse people may experience.
- Care workers knew to report any suspected or witnessed abuse to their managers and whilst confident these would be addressed, they understood how to escalate their concerns if they were not. One care worker said, "Safeguarding is protecting people from abuse. It could be physical, mental, verbal... I would report it to my manager. If they didn't do anything, I would tell the Police or CQC."

Staffing and recruitment

- Staff were recruited safely. The provider had completed required checks to make sure staff were suitable. Enough care workers were employed to ensure people received safe, consistent care.
- People confirmed their care calls had taken place at the agreed times and for the correct duration. Comments included, "They (care workers) come on time every day to help me get washed and dressed," and, "They've never been later than a few minutes and they stay long enough with me."

Using medicines safely

- Medicine administration records confirmed people had received their medicines as prescribed. A relative commented, "They [staff] help Mum to take her medicines safely. They encourage her to be as independent as possible; they put her medicines in an egg cup for her, and she takes them from that. It's how Mum likes it done."
- Care workers were trained and deemed competent by the management team before they administered medicines.
- Medicine audits had been strengthened since our last inspection which meant any errors could be identified and addressed promptly.

Preventing and controlling infection

- People and their relatives confirmed care workers followed good infection control practice in their homes. One person said, "They [staff] always wear masks and gloves and wear aprons when they need to. We do feel safe with the carers."
- All staff had completed infection control training and understood their responsibilities in relation to this.

Is the service effective?

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

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

At our last inspection, systems and processes to monitor, assess and improve the quality and safety of the service were not effective. This was a breach of regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. (Good governance)

At this inspection we found enough improvement had been made and the provider was no longer in breach of regulation 17

- Actions taken since our last inspection had driven forward necessary improvement. The provider worked within the requirements of the MCA and was compliant with all of regulations. This demonstrated lessons had been learnt and improvements had been made.
- The management of risk had improved, and good governance systems had been embedded. For example, medication audits showed people had received their medicines as prescribed. The care coordinator commented, "We worked hard and have revamped and improved our paperwork since our last inspection. It's so much better now."
- The management team had clear oversight of the service provided. The electronic care system required care workers to log in and out of people's care calls. If a care worker failed to arrive at the scheduled call time management team were quickly notified which meant they could take action to address.
- The management team consisted of the registered manager and a care coordinator who was responsible for the day to day running of the service. The management team kept their knowledge of legislation and best practice up to date. They did this by, for example, attending local manager forums.
- The management team understood their responsibility to be open and honest when things went wrong.

Planning and promoting person-centred, high-quality care and support

- People were happy with the service they received and told us they would recommend the service to others.
- People spoke positively about the management team. One person said, "Managers are always at the end of the phone. They are very good and accommodate my requests. Nothing could make them better." Relatives shared this viewpoint. One relative told us, "Managers are good at communicating, whether it's about

shopping or general things about how she's been." They added, "It gives me confidence in the service."

- Care workers felt supported and appreciated by their managers. One care worker said, "It's a happy place to work... the culture is good. We had lots of support during the height of Covid; they [management] made sure we were keeping ourselves well."
- The service had received many compliments since our last inspection. One person had commented, 'House of care, I would like to thank each and every one of you who turned up in such bad weather conditions to care. It was really appreciated. In my books this is called dedication. You all deserve a medal. My sincere thanks, god bless you all.'

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

- People felt listened to. One person explained when they had told the management team, they were dissatisfied with how one care worker cooked their meals; the issue had been promptly addressed and resolved to their satisfaction.
- People had opportunities and were encouraged to provide feedback about their care. One person said, "Someone phones me from the office to check things are okay and I get surveys to fill in."
- Quality questionnaires were sent to people. Analysis from feedback gathered in 2019 showed 98% of respondents were extremely satisfied with the service they received.
- Staff attended regular team meetings which gave them the opportunity to discuss any issues of concern and ideas for improvement with their managers.
- The management team worked with health and social care professionals to ensure people received effective care.

Is the service well-led?

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