

Opal Carers Ltd

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Inspection report

40 Thorpe Close
New Addington
Croydon
CR0 0SG

Tel: 02084059364

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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

About the service

Opal Carers Ltd is a domiciliary care agency that provides personal care to people living in their own homes in the community. 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 there were three people using the service.

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

People were safe. Staff had been trained to safeguard people from abuse and knew how to manage risks to people, to keep them safe. There were enough staff to support people and meet their needs. The provider carried out recruitment and criminal records checks on new staff to make sure they were suitable to support people. Staff followed current practice when providing personal care and when preparing and handling food which reduced infection and hygiene risks in people's homes.

People were satisfied with the care and support they received from staff. People were involved in planning their care and support and could state their preferences for how this was provided. They received the care and support that had been planned and agreed with them because staff knew people well and understood how their needs and preferences should be met.

Staff received relevant training to help them meet people's needs. Staff were well supported and encouraged to continually learn and improve in their role. The registered manager carried out spot checks on staff to make sure they were carrying out their duties appropriately and to a high standard.

Where the service was responsible for this, staff helped people to eat and drink enough to meet their needs and to take their prescribed medicines. Staff understood people's healthcare needs and how they should be supported with these. Staff were kind and caring and respected people's rights to privacy, dignity and independence.

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 registered manager monitored and reviewed the quality of service that people experienced. They checked with people at regular intervals that the care and support provided was meeting their needs and sought their views about how the service could improve. There were arrangements in place to make sure any accidents, incidents and complaints would be fully investigated and people would be involved and informed of the outcome. The registered manager worked proactively with healthcare professionals involved in people's care and acted on their recommendations to deliver care and support that met people's needs.

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

Rating at last inspection

This service was registered with us on 4 November 2020 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.

Opal Carers 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

The inspection team consisted of one 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 service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided. At the time of our inspection there was a registered manager in post.

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 registered manager would be in the office to support the inspection. Inspection activity started on 30 June 2022 and ended on 4 July 2022. We visited the location's office on 4 July 2022.

What we did before the inspection

We reviewed information we had received about the service since they were first registered. The provider was not asked to complete a Provider Information Return (PIR) prior to this inspection. A PIR is information providers send us to give some key information about the service, what the service does well and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with two relatives and one advocate about their experiences of the service. We spoke with the registered manager and reviewed a range of records including two people's care records, medicines administration records for one person, two staff records and other records relating to the management of the service.

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

- People were safe using the service. A relative told us, "I think [family member] is very happy and safe with them." Another relative said about the registered manager, who provided care and support to people on a regular basis, "[Family member] is happy and safe. I have been there several times when [registered manager] is there and she always treats her politely and gently."
- Staff received relevant training and support to help them safeguard people from abuse.
- The registered manager understood their responsibility to liaise with the relevant agencies if a safeguarding concern about a person was reported to them.

Assessing risk, safety monitoring and management

- The service managed risks to people's safety and wellbeing. People's records contained information about identified risks to their safety and wellbeing and how staff should manage these, to reduce the risk of people being harmed or injured.
- The registered manager provided examples of action they took to help people stay safe at home. For example, they told us for people with reduced mobility they checked that trip and slip hazards were minimised around their home.
- Staff had been trained to deal with emergency situations and events if these should arise in people's homes.

Staffing and recruitment

- There were enough staff to meet the needs of people using the service.
- The provider operated safe recruitment practices. They carried out appropriate checks on staff that applied to work at the service to make sure only those suitable were employed to support people.

Using medicines safely

- Where the service was responsible for this, people received their medicines safely and as prescribed. A relative told us, "[Registered manager] goes out of her way to make sure [family member] gets his medicines on time."
- People's records contained information about their medicines and how staff should support them to take them in a timely and appropriate way. Our checks of records showed people consistently received the medicines prescribed to them.
- The registered manager undertook competency checks on staff and audits on people's records to make sure staff administered medicines safely.

Preventing and controlling infection

- The service managed risks associated with infection control and hygiene.
- Staff had received relevant training and followed current guidance to keep people safe from risks associated with poor infection control and hygiene. They used personal protective equipment (PPE) effectively and safely.
- Staff supported people to keep their homes clean and hygienic to prevent the spread of infection. A relative told us, "They keep the place spotless."
- The provider's infection prevention and control policy was up to date. The provider had plans in place to make sure that infection outbreaks could be effectively prevented or managed
- Staff had been trained in food hygiene to help them reduce hygiene risks to people when preparing and serving food.

Learning lessons when things go wrong

- There were systems in place for staff to report and record accidents and incidents.
- Although there had been no recent accidents or incidents, there were arrangements in place for the registered manager to review these and to take appropriate action when required to reduce the risks of these events reoccurring.

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

- The service had arrangements in place to make sure people's care and support needs could be met by the service. Prior to people using the service the registered manager undertook assessments of people's needs to make sure these could be delivered in line with current practice and guidance.
- People and others involved in their care had been involved in assessments and were asked for detailed information about their needs and how and when they would like care and support to be provided. A relative told us, "Before we started using the service, [registered manager] got us involved and asked us about [family member's] needs and how we wanted things done." Another relative said, "[Registered manager] was really patient and really good right from the start and listened to us about what [family member] needed." An advocate for one person told us, "What we liked about them was that they listened to us a lot at the beginning and were very receptive. They were very good with [person using the service] and very respectful. [Person using the service] had a voice in choosing her carer."
- People's choices about how and when support was provided had been recorded in their care records. This helped to make sure staff provided support in line with people's wishes and needs. People's care and support needs were reviewed with them at regular intervals.

Staff support: induction, training, skills and experience

- People were supported by staff who received relevant training to help them meet the range of people's needs.
- New staff were required to successfully complete a period of induction. The registered manager assessed their skills and knowledge during this period to make sure they were competent to work alone with people.
- Staff received support in the form of supervision and recognition of good practice. The registered manager and staff team worked closely together and had daily conversations to share information and talk through any issues or concerns they had about people. A relative told us, "[Registered manager] always makes sure that she takes time to explain to staff how support should be provided."

Supporting people to eat and drink enough to maintain a balanced diet; supporting people to live healthier lives, access healthcare services and support; staff working with other agencies to provide consistent, effective, timely care

- Where the provider was responsible for this, people were supported to eat and drink enough to meet their needs.
- People's records included their preferences for meals and drinks. This helped people receive food and drink of their choice. People's specialist dietary needs had been noted for staff to take account of when planning and preparing meals.

- People were supported to manage their health and medical conditions. People's records contained information for staff about how they should do this. For example, for one person with oral health needs, staff were prompted about how they could support them with this to help the person maintain a healthy oral care regimen.
- Staff were observant to changes in people's needs and sought the advice and support of health care professionals when needed. A relative told us, "[The registered manager] is very knowledgeable and seems to know when to get healthcare professionals involved as [family member's] needs become more complex...she is proactive about getting the professionals to make things better for [family member]."

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.

- Staff empowered people to make their own decisions about their care and support.
- The service demonstrated best practice around assessing mental capacity, supporting decision-making and best interest decision-making.

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

- People were looked after well by staff. A relative told us, "[Registered manager] just gets on with it. She just focuses on [family member] when she's there and makes sure [family member] is well. [Registered manager] has a lot of respect for older people and that shows. That is really important to us, that her focus is on making sure older people are looked after well and with care." Another relative said, "[Registered manager] is a great person to work with...the care she provides has been amazing...the staff are definitely good with [family member] and very kind to him." An advocate for one person told us, "One staff member is fabulous and feeds back any concerns and does a lot to make sure [person using the service] is happy and content at all times."
- Staff spoke about people in a kind and caring way. The registered manager told us, "I want to help people have a good day and be independent. I try and make sure I check how people are, how people have been and any issues they might have. I ask about plans for the day...I feel I know people really well and what is important to them."
- On the whole people received support, wherever possible, from the same staff so that the care they received was consistent.
- People's wishes in relation to how their social, cultural and spiritual needs should be met were recorded so that staff had access to information about how people should be supported with these.
- Staff received equality and diversity training as part of their role. This helped staff understand what discriminatory behaviours and practices might look like to help them make sure people were always treated fairly.

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

- People, and those important to them, took part in making decisions and planning their care and risk assessments.
- The service obtained people's feedback at regular intervals to make sure the care and support they received was continuing to meet their needs.

Respecting and promoting people's privacy, dignity and independence

- People were supported to be as independent as they could be. People's records prompted staff to support people to undertake as much of the tasks of daily living as they could.
- Staff respected people's privacy and dignity and sought people's consent before providing any care. A relative told us, "[Family member] is visually impaired so the carers have to be more observant and aware of his right to dignity and independence and they explain what they are doing before they start." The registered manager said, "I make sure that people have privacy and dignity when providing personal care and explain

everything as I'm about to do it so they know."

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; support to follow interests and to take part in activities that are socially and culturally relevant to people; supporting them to develop and maintain relationships to avoid social isolation

- People had choice and control over how their care and support was provided. People's records reflected their preferences and choices for how and when they received support, taking account of their specific needs. This helped to ensure people received support that was personalised and tailored to their needs.
- Staff understood people's needs and how these should be met. The registered manager told us how they provided care and support to people in the way people preferred.
- Staff recorded the care and support they provided to people. The registered manager reviewed these records regularly to make sure people were receiving the care and support planned and agreed with them.
- People's records contained information about their life history and interests to help staff get to know people and meet their needs. For example, one person liked to watch television and staff were prompted to make sure they could do this whenever they wanted.
- People's records contained information for staff about the important relationships in people's lives and how people should be supported to maintain these.

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- People's communication needs had been identified, recorded and highlighted so that staff had access to relevant information about how they should be supported with these.

Improving care quality in response to complaints or concerns

- The service had systems in place to deal with concerns and complaints, investigate them, learn lessons from the results and to share learning with the whole staff team.
- The registered manager told us no formal complaints had been made about the service in the last twelve months.

End of life care and support

- The service had a system in place to obtain and record people's wishes for the support they wanted to receive at the end of their life. This would help ensure staff would know what to do to make sure people's wishes and choices were respected at the appropriate time.

- None of the people using the service at the time of this inspection were in receipt of end of life care and support.

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

- People spoke positively about the management of the service. A relative told us, "[Registered manager] has been very reliable and very flexible with us and really very good." Another relative said, "Communication is very good with [registered manager]...I feel very well supported by them." An advocate for one person told us, "I like the manager very much."
- The service had clear expectations about the quality of care and support people should receive. These were communicated to people and others involved in their care when they first started using the service. The registered manager used spot checks on staff to make sure the support being provided was to the standard expected.
- People were provided opportunities to have their say about the service and how it could improve, through surveys, spot checks and reviews of their care and support needs. Staff were encouraged to give ideas and feedback at supervision meetings about how care and support could continually be improved for people.

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 registered manager had the skills, knowledge and experience to perform their role and a clear understanding of people's needs and oversight of the service they managed.
- Staff delivered good quality support consistently. A relative told us, "[Family member] gets a good service from them. It's a life saver as none of us siblings live close by...we are very happy at the moment." Another relative said, "Well, in terms of Opal Carers they are brilliant...they are trying hard to make sure [family member] can have a good quality of life at home, as long as possible."
- The registered manager undertook audits and checks to monitor and review the quality and safety of the service. Issues identified through these checks were acted on promptly including supporting and encouraging staff to learn and improve their working practices.
- The registered manager understood and demonstrated compliance with regulatory and legislative requirements.
- The registered manager gave honest information and suitable support, and applied duty of candour where appropriate.
- The service had systems in place to apologise to people, and those important to them, when things went

wrong.

Working in partnership with others

- The registered manager worked proactively with healthcare professionals involved in people's care. They made sure recommendations and advice from healthcare professionals was used to design the care and support provided to people. This helped to ensure that care and support was up to date with current best practice in relation to people's specific needs.