

Elite Home Care Service Limited

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Inspection report

Unit 3, Sunderland Road
Horden
Peterlee
SR8 4PH

Tel: 01919335833

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19 August 2022

22 August 2022

24 August 2022

26 August 2022

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23 September 2022

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

Elite Home Care Service Limited is a service registered to provide personal care to individuals living in their own homes and they primarily offer services to older people. At the time of our inspection there were 27 people using the service.

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 reported they were very happy with the service. People and relatives said staff were good at their jobs and always went above and beyond in delivering care.

Staff were passionate about providing good care outcomes and took ownership of their practice. Staff found they were empowered by the registered manager to be compassionate, give people all the time they needed and treat each person as an individual.

The management team had created a robust governance system, which rapidly identified the smallest of issue, which were then quickly addressed.

There were enough staff on duty to cover the care packages. Staff reported the rotas were very well organised and they had enough time to properly support people. Staff said when people needed extra support the care packages were readily extended.

Medicine management was effective and closely monitored. Staff who administered medicines had the appropriate training.

Staff adhered to COVID regulations and procedures. The registered manager ensured staff had access to ample supplies of PPE and they completed regular spot checks to make sure staff complied with the guidance and best practice.

The staff used the assessments as the basis for the care records and ensured these fully captured people's need. When necessary, external professionals were involved in individual people's care.

Staff had received mandatory and condition-specific training. Staff supervision sessions were regularly completed, as well as spot checks and competency assessments.

Staff had received training around the Mental Capacity Act 2005 and associated code of practice and felt confident applying this in their practice. 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.

Staff took steps to safeguard people and promote their human rights. The management team confirmed they took all concerns seriously and determined what lessons could be learnt. Since started no one had needed to make a formal complaint.

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

Rating at last inspection

This service was registered with us on 3 August 2021 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?

The service was safe.

Details are in our safe findings below.

Good ●

Is the service effective?

The service was effective.

Details are in our effective findings below.

Good ●

Is the service caring?

The service was caring.

Details are in our caring findings below.

Good ●

Is the service responsive?

The service was responsive.

Details are in our responsive findings below.

Good ●

Is the service well-led?

The service was well-led.

Details are in our well-led findings below.

Good ●

Elite Home Care Service Limited

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 was carried out by one inspector.

Service and service type

Elite Home Care Service Limited is a domiciliary care agency. It provides personal care to people living in their own houses and flats.

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

This inspection was announced. We gave a short period of notice of the inspection because we needed to ensure the registered manager was available and to contact people to gather their feedback.

Inspection activity started on 19 August and ended on 26 August 2022. We visited the office location on 26 August 2022.

What we did before the inspection

We reviewed information we had received about the service. We also sought feedback from partner agencies and healthcare professionals. These included the local authority's contracts and commissioning services. 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 received feedback from seven people using the service and four relatives. We spoke with registered manager and two administrators. We also received feedback from eight care staff.

We looked at three people's care records and three staff recruitment files. A variety of records relating to the management of the service, including audits and action plans, were reviewed.

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 for this newly registered service. This key question has been rated good. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management; Systems and processes to safeguard people from the risk of abuse; Learning lessons when things go wrong

- Staff understood when people required support to reduce the risk of avoidable harm, and risk assessments were in place. The risk assessments were very detail and effectively assisted staff to safely mitigate risks.
- The provider had a range of policies and procedures to manage risk and monitor the safety of both people and staff.
- The provider had safeguarding systems in place. Staff said they had training and a good understanding of what to do to make sure people were protected from harm or abuse.
- People confirmed they felt safe using the service. One person told us, "The standard of care I receive is really good." A relative said, "The staff are very competent and always turn up promptly. We have absolutely no concerns about the care my relative receives."
- The management team critically reviewed the operation of the service and actively made changes as and when these were needed.

Staffing and recruitment

- The provider operated safe recruitment systems to ensure suitable staff were employed.
- There were enough staff to safely care for people. The minimum time staff spent with people was 50 minutes, which people reported they found extremely beneficial as staff had time to deliver very person-centred care.

Using medicines safely

- People's medicines were managed in a safe manner. Staff were trained in medicines management and were assessed as competent to administer people's medicines.
- Regular checks were carried out of people's medicines to ensure records were accurate.
- Staff were given clear guidance on when to administer medicines.

Preventing and controlling infection

- The provider had systems in place to mitigate the risks of people and staff from catching and spreading infections. Staff were tested on a regular basis for COVID-19.

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

- Comprehensive assessments were produced, and these fully captured people's needs. The staff used assessments as the basis for developing the detailed risk assessments and care plans.
- People's records included contact details for GPs and immediate family members, and information about healthcare conditions. This helped staff recognise any deterioration in health so they could contact people's relatives and health and social care professionals.
- Staff effectively supported people with eating and drinking where they had needs in this area.

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 Act 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 and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- At the time of the inspection nobody using the service was subject to restrictions of their liberty under the Court of Protection, in line with MCA legislation.
- People told us they were involved in decisions about their care.

Staff support: induction, training, skills and experience

- Staff had the skills and knowledge to carry out their role effectively. Staff completed training in relevant areas to ensure they could carry out their role safely and competently.
- People told us they were happy with the support they received and felt staff were competent. One person told us, "All the staff are very professional and very caring."

- Staff supervisions were being completed in line with the company policies and expectations.

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; Respecting and promoting people's privacy, dignity and independence

- People received kind, respectful and compassionate care from staff who used positive, respectful language which people understood and responded well to. One person said, "The staff are really kind, caring and really treat me well."
- People felt valued by staff who showed genuine interest in their well-being and quality of life.
- Staff supported people to regain skills and gain more independence. One person said, "Staff have really helped me to get back to my old self."

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

- People were given time to listen, process information and respond. Staff took the time to understand people's individual communication styles and develop a rapport with them.
- People were enabled to make choices for themselves and staff ensured they had the information they needed.

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

- The service delivered person-centred care with people having choice and control regarding how staff met their needs. The registered manager ensured care plans contained pertinent information about people's needs and preferences to enable staff to provide appropriate care.
- One staff member said, "You can always see people's care plans, risk assessments and previous visit notes which really helps us deliver a good service."
- People and relatives also described a person-centred service. One person said, "All the staff are very good and treat me like a person who really matters."
- Staff had the opportunity to socially interact with people and attempted to find ways to keep people stimulated.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- The provider understood the AIS requirements and had made sure appropriate communication tools, such as large print documents were, in place to meet people's needs.

Improving care quality in response to complaints or concerns

- People and relatives said they had no complaints and were happy to raise any concerns with the management team.
- The management team used all feedback to assist them improve the quality of care. No complaints had been received but they monitored and responded to even minor concerns. Relatives said, "We have had very few queries but if they arise they are swiftly dealt with."

End of life care and support

- At the time of the inspection no one was receiving end of life care, but staff had received training in this area of care.

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; Continuous learning and improving care

- The registered manager promoted a positive, person-centred culture. The registered manager and staff put people's needs and wishes at the heart of everything they did. One person said, "The manager is really good and so helpful."
- People told us the registered manager was approachable and acted swiftly to address any issues. They ensured people and their families were involved in discussions about their care and support needs. People told us they were confident staff had the skills they needed to provide them with the right care.

Managers and staff are clear about their roles, and understand quality performance, risks and regulatory requirements; 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

- The registered manager regularly reviewed the systems and processes in the service to determine if improvements could be made. Action plans were used to identify and monitor where changes were required and how these could improve the service.
- Reports had been sent to alert the CQC and local authorities when incidents occurred. The registered manager closely reviewed all incidents. They ensured all relevant parties were involved in this process and outcomes were discussed.
- Staff we contacted were passionate about providing good care outcomes and took ownership of their practice. They understood their roles, responsibilities and their accountability.
- The service had good links with the local community and worked in partnership with other agencies to improve people's opportunities and wellbeing.