

Ozumba Training and Consultancy Services Limited

Eminent Domiciliary Care Agency

Inspection report

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05 April 2023
06 April 2023
12 April 2023

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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

Eminent Domiciliary Care Agency provides people with support 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 75 people were receiving support from the service, 40 of whom were receiving support with their personal care. The service supported adults with a range of needs including physical health, mental health, learning disabilities and/or autism, and dementia.

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

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

Right Support: 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 were aware of people's needs and provided them with the level of support they required, taking account of any action required to minimise risks to their safety and welfare.

Right Care: Staff understood how to protect people from poor care and abuse. The service worked well with other agencies to do so. Staff had training on how to recognise and report abuse and they knew how to apply it. The service had enough appropriately skilled staff to meet people's needs and keep them safe. Staff provided people with any support they required with medicines management in a safe way. Staff adhered to infection prevention and control best practice guidance.

Right Culture: The service enabled people and those important to them to work with staff to develop the service. Staff valued and acted upon people's views. There were systems in place to engage with people, staff and their relatives to gather their views and feedback about service delivery. People's quality of life was enhanced by the service's culture of improvement and inclusivity. There was a programme of spot checks and audits to ensure good quality care was provided that met people's needs. Where improvements were identified, action was taken to address this.

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 rated good (published 12 December 2017).

Why we inspected

This inspection was prompted by a review of the information we held about this service.

We undertook a focused inspection to review the key questions of safe and well-led only. For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

The overall rating for the service has remained good based on the findings of this inspection.

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 well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

Eminent Domiciliary Care Agency

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 undertaken by one inspector and an 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 homes.

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

We gave a short period notice of the inspection because we needed to be sure that the provider or registered manager would be in the office to support the inspection.

Inspection activity started on 5 April and ended on 12 April 2023. We visited the location's office on 6 April

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 4 people, 6 relatives and 7 staff, including care workers, a care coordinator and the registered manager. We reviewed 5 people's care records and records relating to the management of the service and staffing.

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

- People were kept safe from avoidable harm because staff knew them well and understood how to protect them from abuse. The service worked well with other agencies to do so. One person told us, "Yes, I do feel safe with them."
- Staff had training on how to recognise and report abuse and they knew how to apply it.
- Staff told us they protected people's privacy and dignity. They were respectful of their individual differences and protected them from discrimination. One staff member said, "Everyone is unique."

Assessing risk, safety monitoring and management

- People received safe care and support. A relative told us, "The care workers supporting [their family member] are really good, [name] is exceptional. The care workers they provide go above and beyond."
- Staff spoke with the field care supervisor prior to supporting a person to get information about their needs and how they wished to be supported, in line with their initial assessment or any continuing assessments as people's needs changed. A staff member said, "We ensure we are assessing their needs and how best we can provide their care. We identify what their preferences are and do not generalise their needs."
- Staff confirmed, and we saw, that comprehensive records were in place which outlined risks to people's safety and how to support them to minimise and mitigate those risks. This included information about their health needs and signs for staff to look for that may indicate a person's health was declining.

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 Mental Capacity Act (MCA). In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS)

- We found the service was working within the principles of the MCA.

Staffing and recruitment

- Safe recruitment practices were in place to ensure appropriate staff were employed. This included obtaining references, checking people's identity and eligibility to work in the UK and undertaking criminal record checks.

- People received support from regular staff who knew them well and knew how they liked to be supported. A person told us, "We have the same care workers often and from time to time we have different ones. There's about 6 that alternate, more often than not they are the same. They are all very nice."
- Systems were in place to monitor staff's attendance at calls, to ensure staff arrived on time and stayed the required length of time to support people.

Using medicines safely

- People were supported by staff who followed systems and processes to administer, record and store medicines safely.
- Staff were aware of what level of support people required with their medicines and records showed people received their medicines as prescribed. One person told us, "Yes, they get it ready for me and I take it. No concerns."

Preventing and controlling infection

- We were assured the provider was supporting people to minimise the spread of infection.
- We were assured the provider was using PPE effectively and safely. One person said, "They have their uniform and they put apron, gloves and masks on."
- We were assured the provider was responding effectively to risks and signs of infection.
- We were assured the provider was supporting people to maintain good hygiene standards.
- We were assured the provider regularly reviewed infection control procedures through their spot checking processes.

Learning lessons when things go wrong

- The service managed incidents affecting people's safety well. Staff recognised incidents and reported them appropriately. Managers investigated incidents and shared lessons learned.
- When things went wrong, staff apologised and gave people honest information and suitable 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.

At our last inspection we rated this key question good. At this inspection the rating 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

- Staff felt respected, supported and valued by senior staff which supported a positive and improvement-driven culture. One staff member said, "The management team have helped me improve and taught me how to prioritise tasks and time management."

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

- People, and those important to them, worked with managers and staff to develop and improve the service. There were structured systems in place to obtain people, relatives and staff's views and feedback about the service. This information was analysed and used to make service improvements. Staff were aware of people's communication needs to ensure they were able to interact with them. A relative said, "The registered manager came to ask if we were all right with the care."
- A staff member told us, "I have a good relationship with the management team. They are always open to hear my views, both personally and professionally." Another staff member said, "It's been a great experience working with them... I can call any of the management team and they always give us time." A third staff member told us, "The management team are so wonderful... If we have any difficulties they are always around to support."

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

- The registered manager had the skills, knowledge and experience to perform their role and a clear understanding of people's needs.
- Governance processes were effective and helped to hold staff to account, keep people safe, protect people's rights and provide good quality care and support. There was a regular programme of checks and audits to review the quality of care provision and action was taken should improvements be required. These processes also ensured that care was provided that took account of people's individual needs and any additional requirements they had in line with protected characteristics in line with the Equality Act 2010.
- Senior staff understood and demonstrated compliance with regulatory and legislative 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

- The service apologised to people, and those important to them, when things went wrong. A relative said,

"We have had a couple of hiccups with their system but they apologised. It has made a big difference to us as a family with the care workers there. It has made a world of difference and for my relative more importantly."

- Staff gave honest information and suitable support and applied duty of candour where appropriate.

Continuous learning and improving care

- The registered manager was focusing on improving and developing the service. They were in the process of moving from paper to electronic systems. They were doing this in a well planned manor and when people and relatives were ready to do so. The registered manager told us some relatives had requested to still have paper records maintained at their family member's home and this was respected.

Working in partnership with others

- The provider engaged in local forums to work with other organisations to improve care and support for people using the service.