

Eternal Homecare Reading Limited

Eternal Homecare Reading

Inspection report

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Reading
Berkshire
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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

Eternal Homecare Reading is a domiciliary care agency providing personal care to people. The service provides support to older people and younger adults who may also have dementia or a physical disability. At the time of our inspection there were 9 people using the service.

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.

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

We made a recommendation regarding recording of audits of care plans. The registered manager ensured the Care Quality Commission (CQC) was informed of notifiable incidents in a timely manner.

Medicines were safely managed. Incidents and accidents were reviewed on a regular basis.

People received care and support that was personalised to meet their individual needs. People's diverse needs were identified and their right to confidentiality was protected. There were contingency plans in place to respond to emergencies. The provider had sought feedback from people and families.

Staff felt they could visit people on time and stay the required time. The visits were scheduled using an online system and overseen by the care coordinator. People reported to be involved in their care plans and were supported to remain independent.

People and relatives reported they felt safe with the staff providing their support and care. Staff understood their responsibilities to raise concerns and report incidents or allegations of abuse. The staff team followed procedures and practices to control the spread of infection using personal protective equipment. People and their relatives who provided feedback said people were treated with care, respect, and kindness by the staff visiting them.

People felt safe in the care of staff and were protected from the risk of getting an infection. People had caring relationships with staff who promoted their privacy, dignity and independence. People's views were sought by the provider.

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's needs and choices were assessed and documented

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

Rating at last inspection

This service was registered with us on 9 December 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.

Recommendations

We made a recommendation regarding recording of audits.

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 ●

Eternal Homecare Reading

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 was carried out by 1 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 houses and flats.

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 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 looked at all the information we held about the service including notifications. A notification is information about events that the registered persons are required, by law, to tell us about. We checked information held by Companies House and we looked at online reviews. We contacted the local authority to

gain feedback regarding 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.

During the inspection

We spoke with 6 people who use the service and 3 relatives about their experience of the care provided. We spoke with 9 members of staff including the registered manager and care staff. We reviewed a range of records including 3 people's care records and 3 medicines records. We looked at 4 staff files in relation to recruitment and supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed. 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.

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 good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People told us they felt safe. When asked if they felt safe using the service, people and relatives told us, "100% safe when they are here. Never had a bad one (carer)." and, "I feel she is safe with them; they know what they are doing."
- Policies and systems were in place to protect people from the risk of abuse and keep them safe.
- The registered manager demonstrated a good understanding of their responsibilities in protecting people from the risk of abuse.
- Staff received training in safeguarding and understood their responsibilities to identify and report concerns.

Assessing risk, safety monitoring and management

- Risks to people were managed in a way that protected them from avoidable harm.
- People's care plans contained detailed and comprehensive risk assessments with clear and consistent guidance for staff to follow in order to mitigate risks.
- People were supported by staff who were familiar to them, who understood their needs and could respond quickly when people's risks and needs changed.

Staffing and recruitment

- We looked to see if safe recruitment procedures were used to ensure people were supported by staff who were of good character, suitable for their role and had appropriate experience.
- All staff files reviewed contained all the necessary evidence including employment history and relevant qualifications and were in line with legal requirements.
- There were enough staff deployed to support people. Rotas showed and people confirmed that, when possible, people were supported by the same staff enabling continuity of care.
- People told us there were enough staff to meet their needs and were mostly on time, "On the whole very good with their timings as it is around my medication. Carers always apologetic even if a few minutes late".

Using medicines safely

- We found where people had been administered medicines, staff had signed the associated MARs to say these had been given.
- Staff who had completed medicines management training were responsible for the administration of medicines. Training records indicated that all current support staff had completed medicine management training and their competency had been reviewed annually by the registered manager.
- The service had systems and procedures in place to ensure people received their medicines safely and as

prescribed.

Preventing and controlling infection

- The provider had infection control policies which were in line with current practice.
- All staff had received training in infection prevention and control training.
- Staff infection prevention and control practice was closely monitored during observational checks by the registered manager on a quarterly basis.
- The registered manager ensured staff received adequate supplies of personal protective equipment (PPE) as required to minimise risk of spreading infections.

Learning lessons when things go wrong

- Systems were in place to record and investigate incidents and accidents.
- Incidents and accidents were appropriately monitored by the management team to ensure suitable action was taken to prevent reoccurrences.

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

- Care plans were person centred and contained information including, 'Who am I', 'People in my life' and 'What is important to me'.
- Plans were based on assessment of people's needs and choices. Plans indicated that people were supported to access healthcare services and professionals. For example; a person received professional support and advice for their diabetes management and for their mental health.

Staff support: induction, training, skills and experience

- Training was delivered either by a training agency or the local authority and covered mandatory topics including safeguarding adults, communication and moving and handling.
- A person using the service said, "They (carers) have the knowledge and the skills to use the hoist. I hear them talking about their training. Someone came and assessed a new member of staff using the hoist."
- Training records indicated that all support staff had received mandatory training.
- A staff member confirmed they had received mandatory training during induction. They said they felt they had received good support from staff during their initial shifts.
- Staff supervision records were reviewed. The registered manager said that she tried to ensure that staff received supervision every three months and an appraisal annually. We saw where there were some delays. This was due to known reasons.

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- The registered manager worked closely with health and social care professionals in response to concerns reported to them.
- People's care records documented when professionals had been contacted or were involved in a person's treatment in order to meet their needs. For example, one person required further support equipment at home to mobilise safely around their home. The service had worked closely with an occupational therapist to ensure the equipment provided met the needs of the person.
- Care plans documented people's goals and support required in order to access healthcare services.

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.

- The service had a MCA policy in place.
- A relative we spoke to felt that staff respected the person's decisions about the support they received.
- People's support plans indicated that a person-centred approach had been taken.
- The registered manager stated all staff have received training in the Mental Capacity Act and this was confirmed when the training records were reviewed.

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 said staff supporting them were kind and caring. Comments included, "I am happy with what I am getting. I live on my own and look forward to them (Carers) coming. If they didn't come in I wouldn't get up.", "Carers always ask if I want anything".
- People's human rights were respected by staff who had a good understanding of people's life histories, needs and preferences.
- The registered manager worked to ensure people received consistency in care by allocating the same staff to the same visits as much as possible.

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

- People and relatives told us they were involved in decisions about people's care and support. They stated, "When [person] feels it needs changing, we have a chat about it".
- The registered manager reviewed people's care plans and risk assessments annually or more often if people's needs changed. This ensured they were accurate and reflected people's current needs and preferences.

Respecting and promoting people's privacy, dignity and independence

- Staff reported they understood promoting people's privacy and dignity.
- People said staff supporting them respected their privacy, dignity and independence. Comments included, "[I am] confident about all three of those things. We have a real good laugh, and they are good company" and, "Carers encourage me to be independent. I sleep downstairs but need to go upstairs to shower, so they support me in getting up the stairs and having a shower."
- The registered manager reported that regular spot checks took place, and this included ensuring that staff were treating people with dignity and supporting people with their independence.
- People's personal and confidential information was protected.

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

- All people and relatives we spoke with were happy with the care and support received and were involved in decisions about their care.
- Care plans were person centred and contained comprehensive background information which included people's occupation, family, likes and dislikes to enable care staff to gain a contextual understanding of people's lives.
- Care files contained information specific to people's daily routines and how they wanted support to be provided.
- Care plans were reviewed by the registered manager in consultation with people, relatives and where necessary, professionals involved in their care, regularly and when people's circumstances changed.

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 (AIS) 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.

- Staff were aware of the individual needs of people and felt they had enough information to support people safely and effectively.
- People's communication needs were recorded in their care plans so staff were aware of how to support the person in the most appropriate way.
- The registered manager understood their requirements in relation to AIS.

Improving care quality in response to complaints or concerns

- At the time of inspection, the service had not received any complaints. There was a clear complaints policy in place and the registered manager was able to explain how complaints would be acted on.
- Staff told us they were aware of how to raise a concern.

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 management and leadership was inconsistent. Leaders and the culture they created did not always support the delivery of high-quality, person-centred care.

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

- The providers audit policy stated that audits of multiple documentation were to be undertaken, including care plans, medicine administration records (MARs), incidents and accidents and infection control were to be undertaken.
- There was evidence MARs and daily records had been reviewed on a monthly basis, and the audits documented if there had been any areas of improvement identified or if any changes had been made.
- However, audits of people's care plans were not always consistently recorded. The registered manager was able to explain in detail how and when they audit people's care plans, but this had not been recorded. This was discussed with the registered manager who advised they are in the process of creating an audit form to document all actions taken during the audit of people's care plans.

We recommend the provider ensures the recording of all audits completed in order to evidence continuous improvement to the service and meeting the needs of people.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- The registered manager was welcoming and demonstrated an open and transparent approach.
- The registered manager advised staff supervision would provide opportunities for staff to raise concerns. Evidence of this was seen during the inspection where areas of development had been identified. The registered manager documented actions taken and how the staff member would continue to be supported to develop their knowledge.
- The registered manager had a whistleblowing policy in place. They stated they had an open and honest culture where they encouraged transparency and learning from mistakes.

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 was aware of their responsibilities and understood the importance of transparency when investigating circumstances where something had gone wrong.
- The registered manager had developed good relationships between people and family members, and actively encouraged constructive feedback from people to help improve the service.
- The registered manager had a policy in place relating to duty of candour and they understood the importance of being open and honest when investigating something that went wrong.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Continuous learning and improving care

- The registered manager gained feedback from people using the service on an annual basis. Records of satisfaction questionnaires completed by people receiving personal care were reviewed. People were asked to rate the support they were given around the information they received, quality of care, how safe they felt with their carers, and how satisfied they were with their care arrangements. There was a section where people could add comments next to their ratings if they wished.
- People were positive about their experience so far and added, "I would recommend them because of the leadership skills of the Manager and consistency of Carers. Really pleased we have them, very lucky that has kept mum in her own home".

Working in partnership with others

- The registered manager worked closely with the local social and health professionals.
- The registered manager was able to explain and provide evidence of collaborative working with professionals to support the needs of people.