

Eclipse HomeCare Limited

# Eclipse HomeCare (Teme Valley Office)

## Inspection report

21 Teme Street  
Tenbury Wells  
Worcestershire  
WR15 8BB

Tel: 01584812594  
Website: [www.eclipsehomecare.co.uk](http://www.eclipsehomecare.co.uk)

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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

Eclipse Healthcare is a domiciliary care agency providing personal care and support to people in their homes. At the time of the inspection, 50 people were using the service.

Not everyone using the service received personal care; this helps with tasks related to personal hygiene and eating. It 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

Risks to people's safety and well-being were assessed. Staff had information to enable them to support people safely. Care plans were detailed with people's medical conditions, and all teams had completed training to allow them to help people safely.

Staff supported people in the least restrictive way possible and their best interest. The policies and systems in the service helped this practice.

The provider's recruitment policy was followed, and recruitment practices were safe. All staff had completed training and had a probation period to ensure suitability. This meant the provider only employed staff that were suitable, skilled, and competent.

Staff were knowledgeable about infection prevention and control. Personal protective equipment was available.

Staff supported people using the service with their medication after completing a risk assessment. This meant people were supported safely.

People and their relatives were involved in the assessment process to ensure that people's views and preferences were included in their care.

People were satisfied with their care, and support and told us they had no complaints and that 'staff and management were very nice'.

Staff supported people in preparing meals and eating and drinking.

People received support in keeping with the principles of the Mental Capacity Act 2005 (MCA)

Where people expressed any concerns, the management ensured that action was taken.

People's privacy and dignity were respected, and they could express their views.

The provider had procedures to monitor and improve the service, including managing incidents, accidents, safeguarding, and complaints.

For more details, please see the full report, which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

Rating at the last inspection

The last rating for the service was rated good (published 03 October 2017).

Why we inspected

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

Follow up

We will continue to monitor information about the service until we return to visit as per our re-inspection 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?

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 section below

Good ●

### Is the service responsive?

The 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 section below

Good ●

# Eclipse HomeCare (Teme Valley Office)

## **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 met the legal requirements and regulations associated with the act. We looked at the overall quality of the service to provide a rating for the service under the Health and Social Care Act 2008.

#### Inspection team

The inspection was completed by one inspector who visited the provider's office on 11 September 2023.

#### Service and service type

This service is a domiciliary care agency; it provides personal care to people in their homes. At the time of the inspection, 50 people were using the service.

#### Registered manager

This provider must 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, the quality and safety of the care provided, and compliance with regulations. At the time of our inspection, a registered manager was in the post.

#### Notice of inspection

This inspection was announced. We gave the provider notice of the inspection on 9 September 2023 to ensure they would be available to support the inspection process. Inspection activity started on 9 September. We visited the provider's office on 11 September 2023.

Rating at our last inspection, the service was rated as Good. Published 3rd October 03/10/17.

#### What we did before the inspection

We reviewed the information we had received about the service since registration with CQC. We sought feedback from the local authority.

The provider was not asked to complete a Provider Information Return (PIR) before this inspection. A PIR is information the provider sends to us to give some key information about the service, what the service does well and improvements they plan to make.

What we did before the inspection We reviewed the information we had received about the service since it registered with CQC.

#### During the inspection

Following our visit to the office, we spoke with people using the service and their relatives to gain their views about the service. We spoke with 6 staff members, the area manager and the registered manager. We also spoke with 2 people using the service and 8 relatives of people using the service. We reviewed a range of records. We looked at various records relating to the management of the service, including policies and procedures. The inspection was completed on 18 September 2023.

# 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, we rated this question as good. At this inspection, the rating has remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- The provider had clear safeguarding policies and procedures to protect people from avoidable harm.
- Staff knew the different types of abuse and the signs to look for.
- A staff member said, "There are different types of abuse. For example, it does not have to be physical; it could be depriving or neglecting someone of their rights. I would report any concerns to management." Staff were aware of the whistle-blowing policy. Staff said they would also make a referral if the manager did not take appropriate action
- We saw where required; referrals had been made to the local authority safeguarding team.

Assessing risk, safety monitoring and management

- All people using the service had their care needs assessed to enable staff to support people safely.
- Risk assessments had been completed to identify people's risks.
- Care plans were available to instruct staff on what support people needed and how to keep people safe.
- Staff told us, "We know the risk with the people we look after. This is written in their care records."
- Relatives told us their family members were safe. A relative told us, "I feel my relative is well cared for, and the communication is good. Another relative said, "I have no worries about [person name]. The service provided is safe."
- Systems were in place to review accidents and incidents and identify areas for improvement. We saw reviews took place, and information was shared with the staff team and area managers.

Staffing and recruitment

- The manager told us they had enough staff to support those already receiving care. A relative told us, "The staff come on time normally."
- Staff had been recruited safely. Pre-employment checks had been carried out to ensure staff were suitable for the role. This included full Disclosure and Barring Service [DBS] checks, work history analysis and references. Disclosure and barring service check allows providers to obtain information, including details about convictions and caution, on the Police National computer. A decision is then made if the person is suitable.

Using medicines safely

- Staff understood their responsibilities in medicine management. Staff told us, and records confirmed, that they had received medicines training.
- Management assessed staff to ensure they followed safe medication practices.
- The provider's electronic monitoring system would alert the office staff if there was an issue of concern.

For example, a staff member not attending a care call to support or administer medicine. This meant any incidents involving medicines were quickly identified and reviewed.

#### Preventing and controlling infection

- The provider had an infection and control policy; staff would refer to this if needed.
- Staff had received training in infection control.
- Staff told us personal protective equipment [PPE] was available.
- Relatives confirmed that staff wore PPE. One staff member said, "I would never go into any person's house without wearing PPE; it would not be safe for them or me."

#### Learning lessons when things go wrong

- Staff understood their responsibilities to raise concerns. They told us the management team would listen to them and felt any problems would be handled appropriately. The manager was aware of their responsibility to report any problems to the relevant people, including CQC



# Is the service effective?

## Our findings

At the last inspection, we rated this question as good. At this inspection, the rating has remained the same. This meant the service was effective.

Assessing people's needs and choices; delivering care in line with standards, guidance, and the law.

- People's care needs were assessed and reviewed to ensure the provider could support them. People using the service were involved in developing their care plan, so it was person-centred. One person told us, "The staff are friendly and always ask me what I want even though they know what to do."
- People's preferences, likes and dislikes, life histories and background information were recorded in their care plans. This included people's medical conditions, which gave staff an overview of each person's history and care needs. A relative told us, "My relative has more independence now with the staff's help. It is nice to see."

Staff support: induction, training, skills, and experience

- The staff we spoke with confirmed they received a range of training and had updates regularly. A staff member told us, "I think the training is good, and we can always ask for further training if we are not sure." Induction training was in place to support new staff in their role. This included online training, some face-to-face training and shadowing more experienced staff.
- New staff had to complete the Care Certificate, and documents were available to confirm they had completed or were completing the course. The Care Certificate is a nationally recognised standard that care staff must work with to provide appropriate, safe support.
- The manager told us, "Person-centred care is provided so people remain independent. The agency works closely with local authorities and external organisations to meet people's care needs."

Supporting people to eat and drink enough to maintain a balanced diet: Staff working with other agencies to provide consistent, effective, timely care.

- Referrals were made to external organisations when required, and care reviews took place when people's needs changed. We saw that the agency had made a referral to external organisations when they had concerns about a person using the service.
- People were supported when needed with meals. A full assessment took place to ensure people's needs were met. The assessment also involved external support when required. For example, district nurses when required.
- Staff supported people to drink to keep them hydrated. A risk assessment was completed to ensure staff had the correct information to help people.

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

- People were supported by staff who were aware of their care needs. A relative told us, "If staff are worried about them [person], they telephone me."
  - Staff worked closely with health and social care professionals to ensure people's changing needs were addressed and people received the support they needed.

Ensuring consent to care and treatment in line with law and guidance

The Mental Capacity Act 2005 (MCA) provides a legal framework for making decisions for 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 the mental capacity to make 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.

- People's capacity had been considered when their needs had been assessed. People and their relatives confirmed that staff involved them in decision-making when required.
- People and their relatives had been involved, consulted with, and agreed with the level of care and support provided.
- Staff told us how they sought people's consent and offered choices to people during their care. One relative told us, "They [Staff] asked his permission. People's preferences were respected. When people's capacity changed, then the person was reassessed."

# 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.

At the last inspection, we rated this question as good. At this inspection, the rating has remained the same. This meant people were supported, treated with dignity and respect, and involved as partners in their care.

Ensuring people are well treated and supported, respecting equality and diversity

- People and their relatives confirmed the staff were kind and friendly. A relative said, "The staff are polite and always ensure all care is given before leaving; they never rush. They involve (person name) in everything they do."
- All staff members felt they had a good relationship with those they supported.
- Staff told us they ensured that people's care needs were met, and understood people's care needs change daily, depending on what they wanted support with.
- One staff member told us, "that each day is a new day which means that people may want something done differently; it is their choice." This demonstrates understanding of people's care needs and respecting people's choices.
- The service was committed to meeting people's cultural and religious needs. People's completed assessments showed people had been asked about their cultural and religious needs.

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

- Care plans were developed with input from people and their family members whenever possible.
- Staff demonstrated a good understanding of people's needs and how they encouraged people to make choices about their care.
- A staff member told us, "I always talk to people about their care needs. Just because they want something done in one way, one day, they can change their minds the next day, so I do want the person wants so they have some control."

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

- Staff maintained people's independence wherever possible. A person told us, "I like to do what I can for myself. The staff help me to do what I cannot do myself. They respect my wishes."

# Is the service responsive?

## Our findings

Responsive means we looked for evidence that the service met people's needs.

At our last inspection, we rated this key question good. At this inspection, the rating remains the same. This meant people's needs were consistently met through good organisation and delivery.

Planning personal care to ensure people have choice and control and to meet their needs and preferences

- An initial assessment was completed with the person so that the care provided was personalised. This also took account of people's preferences, likes and dislikes.
- Where possible, the provider made efforts to ensure consistency of the care staff who supported the person.
- All people using the service spoke highly of the staff that supported them. People using the service and their relatives told us the staff were kind and considerate.

Meeting people's communication needs

Since 2016, all organisations funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they must do to help ensure people with a disability or sensory loss. In some circumstances, their carers get information in a way they can understand. It also says that people should contact the support they need about communication. Staff were clear about the support required. The provider had access to other formats if required. One staff member told us that we have other forms of communication, like different languages, if needed. Care plans detailed communication needs and how staff communicated with them.

Supporting people to avoid social isolation and support to follow interests to participate in socially and culturally relevant activities.

- Staff told us they encourage people to do as much as they can for themselves to maintain their independence. Care plans gave information about people's likes and hobbies what they were interested in and liked to do.

Improving care quality in response to complaints or concerns

- The provider had a complaints policy. This was shared with the people using the service. One person told us, "I did make a complaint once, and it was looked into and rectified almost immediately." The provider monitored complaints to identify any developing trends. This enables the provider to make improvements where required.

End-of-life care and support

- There was no one receiving end-of-life care during the inspection
- People were asked to share their wishes for the future, and where this had been provided, it was recorded in their care plans.

# 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 the last inspection, we rated this question as good. At this inspection, the rating has remained the same.

Promoting a positive culture that is person-centred, open, inclusive, and empowering achieves good outcomes for people. Working in partnership with others

- The registered manager recognised when people's needs changed and worked with other professionals to ensure person-centred care was provided.
- People using the service and their relatives gave positive feedback about its staff and managers. One person told us, "Whenever I have spoken with the manager, they have always been helpful."
- Staff told us it was essential that people they supported had a choice. Relatives and people using the service we spoke with confirmed this. People told us they had a choice and were treated with respect.
- A relative told us, "All staff are very polite, and my relative feels that they have a good service."
- People confirmed that they were involved in their care.
- Staff told us they felt supported in their roles. A staff member told us, "I have worked here for a few months, and I feel that both staff and management have supported me. The managers are always on call if we have concerns."
- Staff told us about an issue they had raised with managers about staff rotas so the travel time for staff could be reviewed. Managers were exploring this at the time of the inspection.

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

- Staff and managers were clear about their roles
- The manager maintained a clear audit schedule and evidenced actions taken to develop or change the service to meet people's needs.
- Managers ensured people were supported by staff that had been trained and appropriately recruited.
- Quality assurance work had taken place in relation to care plans and risk assessments. People confirmed they were involved in their care and how this was provided. This meant that people's support needs were updated regularly and, areas for further development were identified.
  
- Care plans contained enough information to ensure safe care was provided by staff with the relevant training.
- The management completed risk assessments to ensure that staff had up-to-date information. Periodic medication audits were completed to identify any areas of concern.
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- Records confirmed that information was shared at staff meetings when things had gone wrong, and changes were introduced when needed.
- The provider understood their obligations to report events that may affect the service or Incidents to the

Care Quality Commission.

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

- Relatives told us they have been able to share their views on the service provided, and action was taken if needed.
- One relative told us, "Management do contact me if there have been any changes with my relative, so I am always kept informed. This gives me peace of mind. It is a good service."
- Staff were involved and informed of changes and developments in the service.
- The staff told us the managers are always available when needed.
- Surveys were completed with staff, and people using the service. The provider then used this information to improve where required.