

Eagles Recruitment and Healthcare Limited

Eagles Recruitment and Healthcare

Inspection report

Cavell House Stannard Place, Saint Crispins Road Norwich Norfolk NR3 1YE

Tel: 01603514202

Website: www.eaglesrh.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

Eagles Recruitment and Healthcare is a domiciliary care agency providing care and support to people living in their own homes. The service provides support to older adults some of whom may be living with dementia.

Not everyone who used the service received personal care. The Care Quality Commission (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

Everyone who provided feedback as part of this performance review and assessment spoke positively about the service and no one raised any concerns. People told us the service met, and often exceeded, their expectations and needs. They told us they received person-centred care from dedicated staff who consistently demonstrated respect, compassion and kindness. 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 and people told us this.

The culture of the service was one of openness, engagement and empowerment. The people who used the service told us staff enabled them to remain independent and be in control of the care and support they received. Staff told us the support, training and attention they received improved their confidence and allowed them to provide good quality care. The provider invested in their staff and the support and training they received benefitted those who used the service.

People had been involved in formulating their care plans and subsequent reviews and they supported a person-centred approach. People told us they had no concerns but would feel comfortable in discussing any they may have with the management team who they described as approachable and dedicated with the ability to listen and respond.

People told us the quality of the service was good and the records we viewed supported this. We saw they were robust and thorough in regard to all aspects of the service except medication administration where improvements could be made to ensure complete adherence to best practice. However, people received their medicines as prescribed and we had no concerns in relation to safety.

People told us they would recommend the service for the quality and consistency of care they received, the punctuality of the service, the abilities of the staff and the management team who consistently ran an effective, responsive, compassionate and quality service.

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 30 November 2015 and this is the first performance review and assessment. The service has not consistently delivered the regulated activity since its registration and has been dormant. CQC does not inspect dormant services.

Why we inspected

This performance review and assessment was prompted by a review of the information we held about the service.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

This was an 'inspection using remote technology'. This means we did not visit the office location and instead used technology such as electronic file sharing to gather information, and video and phone calls to engage with people using the service as part of this performance review and assessment.

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.	



Eagles Recruitment and Healthcare

Detailed findings

Background to this inspection

The inspection

We carried out this performance review and assessment under Section 46 of the Health and Social Care Act 2008 (the Act). We checked whether the provider was meeting the legal requirements of the regulations associated with the Act and looked at the quality of the service to provide a rating.

Unlike our standard approach to assessing performance, we did not physically visit the office of the location. This is a new approach we have introduced to reviewing and assessing performance of some care at home providers. Instead of visiting the office location we use technology such as electronic file sharing and video or phone calls to engage with people using the service and staff.

Inspection team

The performance review and assessment was completed by 1 inspector and 1 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 performance review and assessment there was a registered manager in post.

Notice of performance review and assessment

We gave the service 72 hours' notice of the performance review and assessment. This was because it is a small service and we needed to be sure that the provider or registered manager would be available to support the process.

Performance review and assessment activity started on 14 February 2023 and ended on 21 February 2023.

What we did before the performance review and assessment

We reviewed information we had received about the service since registration and this was used to plan our performance review and assessment. The provider was not asked to complete a Provider Information Return (PIR) prior to this performance review and assessment. 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.

During the performance review and assessment

This performance review and assessment was carried out without a visit to the location's office. We used technology such as telephone calls, emails and the 'Give feedback on care' facility on our website to enable us to engage with people using the service, their relatives and staff, and electronic file sharing to enable us to review documentation. The performance review and assessment commenced on 14 February 2023 with feedback being provided to the registered manager on 21 February 2023.

During the performance review and assessment, we spoke with 2 people who used the service and 2 relatives. We spoke with the registered manager and 2 care staff. A further 8 care staff provided written feedback.

We assessed the care records for 2 people who used the service. Several governance records were also assessed including the staff recruitment files for 2 staff members, training, induction and competency assessment records for staff, policies and procedures, quality assurance records, complaints and compliments and service improvement plans.



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

Using medicines safely

- The service was only responsible for the administration of medicines for one person at the time of this performance review and assessment and they had received their medicines as prescribed.
- However, the service needs to ensure best practice and local policy is followed in relation to medicines administration. For example, whilst medicines administration was being recorded, this did not adhere to local policy or best practice guidance.
- Staff had received training in medicines administration and had their competency assessed.

Systems and processes to safeguard people from the risk of abuse

- People told us they felt safe whilst receiving the service and the provider had processes in place to help protect, identify and report any safeguarding concerns.
- People told us staff made them feel safe due to their competence and kindness. One person who used the service and experienced falls said, "Staff seem to manage the risks as they arise and just deal with it and record it so others know what to look for and it helps me see that as well."
- Staff had received training in safeguarding and were able to demonstrate a good knowledge of this through discussion. They understood their associated responsibilities, how to record concerns and who to report them to both inside and outside of their organisation.
- The provider had a safeguarding policy in place that reflected local policy that staff were aware of.

Assessing risk, safety monitoring and management

- The risks to people who used the service, and staff, had been identified, recorded, mitigated and regularly reviewed.
- Risk assessments were in place that identified and mitigated individual risks to people such as falls, poor skin integrity and choking. These provided staff with information on what support was required to mitigate the risk and had been regularly reviewed.
- The provider completed environmental risk assessments on the homes of people who used the service to protect staff whilst they were at work. These assessed such areas as flooring, lighting, safety regarding the location and parking and the risk of fire.
- A business continuity plan was in place to address and manage adverse incidents such as staff shortages, adverse weather and the impact loss of utilities and IT would have on the service provision.

Staffing and recruitment

• People told us they had continuity of care because they saw the same small number of staff members, knew who would be supporting them and when, staff were punctual and stayed for the allocated amount of

time.

- People, and staff, told us they had been introduced to each other prior to the commencement of service and we saw that consideration had been given to matching people with staff who shared their interests.
- No one we spoke with raised concerns about staffing. Staff, people who used the service and their relatives told us enough time was given to meet people's needs in a person-centred, patient and considerate manner.
- Staff had been appropriately and safely recruited. This included completing an interview, checking identification and completing a Disclosure and Barring Service (DBS) check as well as Right to Work status for overseas workers. DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.

Preventing and controlling infection

- The provider had effective processes in place to prevent and control infections.
- People told us staff considered infection prevention and control when supporting them. One person told us staff always washed their hands as required and a relative told us, "They were amazing throughout COVID-19 and did everything and more and the manager is very responsive and addresses any issues or concerns straightaway so no issues with safety or cleanliness."
- Staff told us they had access to as much appropriate personal protective equipment (PPE) as they needed and were able to explain how this was used.
- Appropriate policies and procedures were in place for infection prevention and control including a pandemic contingency plan and a COVID-19 risk assessment.

Learning lessons when things go wrong

- The service was small and had not experienced any adverse incidents however processes were in place should this occur.
- The provider took a proactive and preventative approach to service quality. For example, they invested in ensuring staff were well trained, skilled and competent. One staff member told us of the management team, "They are always reaching out to employees to detect any issues that may lead to poor care."



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 performance review and assessment 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

- People's needs had been holistically assessed and the care they received had achieved positive outcomes for them.
- One person who used the service told us, "Its crucial staff are on time to meet our [family's] needs. They have never been late or missed a call so the impact for us is good as it works for us as a family and not just me."
- The care plans we assessed showed people's holistic needs had been considered and planned for.

Staff support: induction, training, skills and experience

- People who used the service benefitted from receiving care from staff who had been robustly inducted, well-trained and showed the skills needed to support people in a safe and compassionate manner.
- All the people we spoke with talked positively about the skills of staff. One person who used the service described staff as 'excellent' whilst another told us staff were 'consistently' well-trained at meeting their individual needs. The relatives we spoke with agreed.
- Through discussions, staff demonstrated they had the skills and knowledge to meet people's needs. For example, they understood the importance of working to policies and procedures and were able to tell us how they kept people safe.
- Staff gave consistently positive feedback on the induction, training and support they received. One staff member told us, "My induction was good. I got to understand the people I supported, what I needed to do, and I could ask questions. I am confident now because of my induction."
- Records confirmed staff had received robust inductions, probation periods, training, supervisions and support. All except one staff member had completed the Care Certificate which is an agreed set of standards that define the knowledge, skills and behaviours expected of specific job roles in the health and social care sectors. It is made up of the 15 minimum standards that should form part of a robust induction programme.

Supporting people to eat and drink enough to maintain a balanced diet

- People told us staff met their hydration and nutritional needs and the records we assessed confirmed this.
- One relative told us how well staff met their family member's cultural and nutritional needs by cooking food that reminded them of the country they grew up in.
- Care plans recorded people's specific nutritional needs including what they liked to eat and drink as well as their preferences. For example, care plans recorded where people liked to eat, how they liked to eat and at what times they preferred to take their meals. Daily care notes showed food and fluid intake was recorded in detail and consistently.

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

- People received consistent care that promoted their health and wellbeing.
- We saw that the service referred people to health and social care professionals as required and in a timely manner
- Where needed, the service supported people to access health appointments by attending with them as required or wished.
- One health and social care professional who provided us with feedback complimented the service on how it supported people who used the service, and their families. They told us the service was able to quickly and compassionately provide care in crisis situations, often within hours. They said, "As our Team only works Monday-Friday, Eagles have been proactive in ensuring safe and efficient care over the weekend and always ensure they contact us during our working hours to discuss any concerns, changes or to seek advice."

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.

- At the time of the performance review and assessment, no applications had been made to the Court of Protection.
- Staff had not received training in the MCA although this had been planned. Staff did, however, understand the need for consent and decision-making processes in their day to day work.



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 performance review and assessment 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

- All the people we spoke with told us staff were consistently kind and compassionate and that they interacted in meaningful ways.
- One service user told us, "Staff respect me and treat me well in my own home, like a human being. They want to listen to me, and my needs, and I feel cared for in a dignified human way."
- Relatives agreed with one telling us, "It's a very kind, caring and responsive service that goes above and beyond their obligations. I understand what it takes to give one-to-one care and that's why [family member] is still at home."
- The people who used the service, and the staff team, were from different social and ethnic backgrounds and this positively contributed to the very person-centred care being delivered. The registered manager had taken time to match staff to those people who used the service resulting in meaningful and individual care that met people's cultural needs and personal histories.

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

- People told us they felt in control of the care they received, and that staff respected their wishes.
- One person who used the service told us staff had spent 2 hours with them discussing their needs, wishes and preferences prior to receiving the service. They told us, "I have a care plan and they helped me formulate it to meet my needs. They are very good at making me feel involved and making sure me and my family's wellbeing is central."
- One relative told us, "I'm involved in reviews and the care plan is right for [relative who uses the service] as they [provider] understands them, their dementia and the food they will eat which they prepare correctly which is important to my family member."
- Staff consistently demonstrated an understanding that the people they supported were in control of the care they received. One staff member said, "We always ask before doing anything with the client to ensure they are comfortable and aware of what is happening and why it needs to be done. The decision always lies with the client."

Respecting and promoting people's privacy, dignity and independence

- People received respectful care that considered their dignity and independence. The people who used the service, and their relatives, told us this and staff spoke of people in a dignified and respectful manner.
- One person who used the service said, "Staff don't take over which can be frustrating, and they are patient." Another person told us, "I've got good carers who treat me very respectfully."
- Relatives agreed with one telling us, "Staff are kind and respect my home and do as I ask. They listen to me

and I couldn't manage without them."

• Staff spoke meaningfully and professionally about the people they supported and understood the need for confidentiality and independence. One staff member said, "The independence of people is supported by allowing them to contribute and use their strengths. Giving autonomy to people promotes their independence. Also, supporting positive relationships and actively involving them in the community and in decisions relating to their care."



Is the service responsive?

Our findings

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

This is the first performance review and assessment 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

- Care was delivered in a person-centred manner that met people's needs and supported them to remain at home and be as independent as possible.
- People spoke consistently positively about the impact the service had on their lives. One person who used the service described it as 'responsive and flexible' in meeting their needs. One relative said, "The personal care and kindness is so good, particularly meeting the cultural and religious needs which are so important to [family member]."
- Care plans had been formulated to meet people's holistic needs and were person-centred. They gave staff information on how people wished to receive care and support and consistently considered people's personal preferences, strengths and wishes; they had been regularly reviewed.

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.

- Care plans contained information on people's communication needs that gave staff information on how they could support people in relation to this.
- One person who used the service told us the provider met their individual communication needs both in the way they communicated with them and how often. They said, "They very much listen and then respond to what I have said."

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 provider understood the need to support people's relationships, interests and community links and was part of the service provided. The outcomes for people were positive.
- The service considered not only the needs of the person who used the service but their wider family and delivered a service that enhanced the wellbeing of all.
- We saw staff supported one person to regularly access the community for their independence and physical and mental wellbeing. This person told us the service contributed positively to the wellbeing of them and their family and understood how important this was.

Improving care quality in response to complaints or concerns

- People we spoke with did not have any concerns or complaints about the service they received. However, they told us they would have confidence in raising concerns should the need arise.
- One person who used the service described the management team as 'brilliant' when we asked them about communication and whether they would feel comfortable raising concerns. A relative told us, "If I had a concern, I would speak to the service as the manager is very responsive and we speak in reviews and via emails."
- The provider had procedures in place to manage complaints and we saw that where people had raised concerns in the past, these had been thoroughly managed. Records showed what action the provider took in response and gave a clear audit trail of what the concerns related to, who was involved and what the outcome was.

End of life care and support

- No one was receiving end of life care at the time of the performance review and assessment.
- However, a healthcare professional gave us positive feedback on this aspect of the service. They said, "Eagles have been able to commence care for our end of life patients within a matter of hours, ensuring they are safe and well cared for." They told us feedback from family members said care was delivered with care and compassion and that the service provided emotional support not only for the person who used the service but their family also.



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 performance review and assessment 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

- Staff delivered care that met the service's aims and values of respecting people's independence, dignity, privacy, fulfilment and beliefs. People told us this and we observed this through speaking with staff and assessing records.
- People told us staff delivered care in a person-centred manner that fulfilled their needs and expectations. One person said, "With this agency I got exactly what I wanted, and it has been such a refreshing and happy experience."
- Staff told us morale was high and teamwork good. They told us the service was open, transparent and supportive. Staff felt valued and appreciated. One staff member said, "There is mutual respect among the staff and there's a lot of encouragement floating around."

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 had not experienced any adverse incidents but understood the importance of transparency and effective communication at all times, not only when an incident occurred.
- People told us the service engaged with then effectively and regularly and that they felt comfortable in speaking with them regarding the service they received, their needs and any concerns.
- Staff agreed that the service's approach was one of openness that encouraged people to speak up and be engaged in the service and the success of it.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

- Everyone we spoke with praised the registered manager and provider for running an effective service that not only met people's needs but often exceeded them.
- When asked why they would recommend the service, people stated the consistency of care and kindness of staff as the overwhelming reason, describing them as 'excellent', 'brilliant' and 'amazing'.
- The health professional we spoke with agreed and told us they had found the service, "incredibly responsive and communicative." They went on to describe the registered manager and provider, "I find them both to be very professional, friendly and passionate about their care agency."
- The provider completed one over-arching audit on the quality of the service. Whilst this worked effectively at the time of this performance review and assessment due to the small size of the service, the provider will need to consider adapting this approach as/if the service grows.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- Everyone we spoke with told us one of the service's strengths was communication and engagement.
- People, and their relatives, told us the service engaged with them on a regular basis and in different formats of their choosing. For example, one person who used the service preferred email and this was accommodated. We also saw that feedback on the service had been sought via surveys, one to one meetings and staff group supervisions.
- All the staff who provided feedback told us they were aware of the whistleblowing and bullying policies but that their experience of the service had only ever been positive and encouraging.
- Staff were provided with regular support and opportunities to contribute their views via supervisions, staff meetings and appraisals.