

Excel to Excellence Limited

ETE Home Care Services

Inspection report

34 High Street
Sutton Coldfield
West Midlands
B72 1UP

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03 February 2020

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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

ETE Home Care Services is a domiciliary care agency which provides assistance with personal care to people living in their own homes.

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

People were supported by staff that were caring, compassionate and treated them with dignity and respect. Any concerns or worries were listened to and responded to and used as opportunities to improve.

People received person centred care and support based on their individual needs and preferences. Staff were aware of people's life histories and individual preferences. They used this information to develop positive, meaningful relationships with people.

People told us they felt well cared for by staff who treated them with respect and dignity and encouraged them to maintain relationships and keep their independence.

People were supported by staff who had the skills and knowledge to meet their needs. Staff understood and felt confident in their role.

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 liaised with other health care professionals to ensure people's safety and meet their health needs.

Staff spoke positively about working for the provider. They felt well supported and that they could talk to the registered manager at any time, feeling confident any concerns would be acted on promptly. They felt valued and happy in their role.

Audits were completed by management to check the quality and safety of the service.

The registered manager worked well to lead the staff team in their roles and ensure people received a good service.

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

This service was registered with us on 25/02/2019 and this is the first inspection.

Follow up

We will continue to monitor intelligence we receive about the service until we return to visit as per our re-

inspection programme. If any concerning information is received, 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?

Good ●

The service was Safe.

Is the service effective?

Good ●

The service was Effective.

Is the service caring?

Good ●

The service was caring.

Is the service responsive?

Good ●

The service was Responsive.

Is the service well-led?

Good ●

The service was Well Led.

ETE Home Care Services

Detailed findings

Background to this inspection

The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Care Act 2014.

Inspection team

This inspection was carried out by one inspector.

Service and service type

This service is a domiciliary care agency. It provides personal care to people living in their own homes.

The service had a manager registered with the Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

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.

Inspection activity started on 3 February and ended on 4 February 2020.

What we did before the inspection

We reviewed information we held about the service. The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report.

During the inspection

We spoke with the registered manager and one care staff member. We reviewed a range of records which included two people's care records. We looked at two staff files in relation to recruitment and staff

supervision. A variety of records relating to the management of the service were also reviewed.

After the inspection

We spoke with one person and one advocate about their experience of the care provided. An advocate is an independent person who assists people to understand their rights and express their views and wishes. We also telephoned and spoke with a care staff member.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

This is the first inspection for this newly registered service. This key question has been rated Good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were protected from potential abuse and avoidable harm by staff that had regular safeguarding training and knew about the different types of abuse.
- The provider had effective safeguarding systems in place and all staff had a good understanding of what to do to make sure people were protected from avoidable harm or abuse. One staff member told us, "Abuse can happen in different ways such as physical, financial and even emotional". Another staff member told us, "If I saw or became aware of any kind of abuse I would report this to the manager. If the manager was unavailable I would contact the police and local authority."
- People and their relatives explained to us how the staff maintained their safety. One person told us, "They keep me safe, they look after me, I feel comfortable around them". An advocate told us, "[Name] is well looked after and they [staff] appear to be very well trained."

Assessing risk, safety monitoring and management

- Individual emergency plans were in place to ensure people were supported in the event of a fire.
- Risks to people's safety and wellbeing were assessed and managed. Each person's care records included risk assessments considering risks associated with the person's environment, care and treatment, medicines and any other factors. People's equipment was regularly checked by staff to ensure it remained safe and well-maintained.
- The registered manager had a process in place to check actions taken following accidents and incidents to make sure that actions were effective.

Staffing and recruitment

- There were sufficient numbers of staff to meet people's needs. The provider ensured people had a consistent staff team.
- People told us staff had never missed a visit and they arrived on time and stayed for the allocated time.
- Each person's staffing needs were pre-assessed on an individual basis, which were reviewed and updated regularly as people's individual needs changed.
- Staff had been recruited safely. All pre-employment checks had been carried out including reference checks from previous employers and Disclosure and Barring Service (DBS) checks.

Using medicines safely

- People were supported to take their medicines by staff who were trained and competent to carry out the task.
- Administration of medication records indicated people received their medicines regularly. This was

confirmed by the people we spoke with.

Preventing and controlling infection

- People were protected from the risks associated with the spread of infection.
- Staff were trained and had access to sufficient supplies of person protective equipment (PPE) which they wore when assisting people.

Learning lessons when things go wrong

- Records of accidents or incidents were maintained and reviewed when they occurred. This helped to identify any trends.
- Where things went wrong, the management team were keen to explore the reasons and to take steps to reduce the risk of it happening again.
- Accidents and incidents were reported and monitored by the registered manager to identify any trends. The registered manager discussed accidents/incidents with staff as a learning opportunity.

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

- People's needs were assessed before the service began to provide support and people and their relatives confirmed this.
- Assessments of people's diverse needs were discussed prior to using the service. These included religion and sexuality.
- Care was planned, reviewed and delivered in line with people's individual assessments.

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

- Where required, people received support to eat and drink at the times that suited them.
- Staff ensured people received food and drinks which met their needs and preferences.

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

- Where required staff monitored people's health and worked well with external professionals to ensure people's health care needs were met. This meant the agency could make prompt referrals and seek advice where concerns were identified.
- A person who used the service said, "They [Staff] will call other people involved such as social workers and my GP."
- Care plans were reviewed and updated to reflect any changes or recommendations from healthcare professionals.

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

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The Act requires that, as far as possible, people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA. When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty.

We checked whether the service was working within the principles of the MCA.

- Staff had received training about the MCA and understood the importance of ensuring people's rights were protected.

Staff support: induction, training, skills and experience

- People received effective care and treatment from competent, knowledgeable and skilled staff who had the relevant qualifications to meet their needs. The provider had a good system to monitor all staff had regular refresher training to keep them up to date with best practice. Training methods included online, face to face and competency assessments.
- New staff had completed a comprehensive induction, were well supported and either had health care qualifications or were completing a nationally recognised qualification, The Care Certificate. The Care Certificate is an identified set of standards that health and social care workers adhere to in their daily working life. This covered all the areas considered mandatory for care staff.
- One staff member told us, "The induction I received was fantastic, I completed training and shadowing. I was supported by the manager throughout."

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 received care from staff who developed positive, caring and compassionate relationships with them. Each person had their life history and individual preferences recorded.
- People told us staff knew their preferences and cared for them in the way they liked. Staff we spoke to knew people's life histories and individual preferences.
- One person who was receiving support told us, "I'm really happy with the staff. They are very caring towards me and support me." An advocate told us, "The staff have a good relationship with [Name] they know how to meet their needs."

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

- People confirmed staff involved them in decision making. People and relatives told us they felt listened to.
- Care records included instructions for staff about how to help people make as many decisions for themselves as possible.
- People told us the registered manager was approachable and listened to their views. One person told us, "The manager is very caring and listens to what I have to say."

Respecting and promoting people's privacy, dignity and independence

- Staff showed genuine concern for people and ensured people's rights were upheld.
- People told us staff always respected their privacy and dignity.
- People's confidentiality was respected, and people's care records were kept securely.
- People were encouraged to do as much for themselves as possible. People's care plans showed what aspects of personal care people could manage independently and which they needed staff support with.

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

- Care plans were personalised to the individual and recorded details about each person's specific needs and how they liked to be supported
- One person said, "The staff do not rush through tasks, they talk to me and I do what I want to do."
- A staff member told us, "I get to spend quality time with the people I support. We do fun things as well as the personal care tasks."
- People told us they were involved in developing and reviewing their care and support plans.

Meeting people's communication needs

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

- Care plans contained information about people's communication needs. This meant staff could support people to express their needs and views where the person experienced difficulties.
- Documentation could be produced in accessible formats, such as large print for people who required this.

Improving care quality in response to complaints or concerns

- None of the people we spoke with had any concerns about the care they received.
- One person told us, "There have been no issues, if there was a problem I would speak to the manager."
- The service had not received any complaints.
- Each person had been provided with a copy of the agency's complaints procedure.

Is the service well-led?

Our findings

Well-Led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

This is the first inspection for this newly registered service. This key question has been rated Good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- People spoke highly about the care they received and of the way the service was run.
- One person told us, "The manager is very nice, always makes time for me."
- Staff were actively encouraged by management to raise any concerns in confidence. One staff member told us, "The manager is always available if you need advice, reporting concerns or issues".
- Staff at all levels were committed to providing people with a high standard of care which was tailored to their needs and preferences.

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

- The registered manager and staff understood their roles and responsibilities. Staff also strived to ensure care was delivered in the way people needed and wanted it.
- There was a good communication maintained between the registered manager and staff. There were clear lines of responsibility across the staff team.
- Staff felt respected, valued and supported and that they were fairly treated.
- The registered manager carried out audits to monitor the quality of the service.
- A training matrix monitored that staff were up to date with training and planned future training needs.
- Staff were required to read policies and procedures, we saw recorded evidence that this had occurred.
- The registered manager worked to drive improvement across the service. They engaged with external agencies to develop effective systems to ensure care was delivered safely.
- The registered manager had notified Care Quality Commission (CQC) of events which had occurred in line with their legal responsibilities.

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 provider promoted an ethos of openness and transparency which had been adopted by all staff.
- There was learning where things went wrong and open discussions with people and their relatives.

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

- The registered manager confirmed that annual satisfaction surveys would be sent to people and their relatives to express a view about the quality of the service provided. The registered manager frequently met

with people to gain their views.

- People's views were sought daily when receiving support and through regular care plan reviews.
- There were regular meetings for staff where their views were encouraged. Staff told us they felt valued and their views were respected.

Continuous learning and improving care

- There were effective procedures in place to monitor and improve the quality and safety of the service provided. These included a range of audits, seeking the views of people who used the service and monitoring the skills, training and competence of the staff team.
- The provider's policies and procedures were regularly reviewed to ensure they complied with current best practice and legislation.

Working in partnership with others

- The agency worked in partnership with other professionals and organisations to achieve good outcomes for people, for example healthcare professionals and hospitals.