

Fircroft Services Limited

Carlene Home Care Services

Inspection report

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Carlene Home Care Services is domiciliary care service providing personal care to people living in their own homes and in a supported living service at one house in Wallington with shared facilities and staff available at all times. At the time of the inspection, there were 2 people receiving personal care at the supported living service who were adults with a learning disability and/or autism. 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

Right Support: Model of Care and setting that maximises people's choice, control and independence

People were supported to have maximum choice and control of their lives. Staff supported people in the least restrictive way possible and in their best interests. The policies and systems in the service supported this practice.

Right Care: Care is person-centred and promotes people's dignity, privacy and human rights

There were enough staff to support people safely and at the agreed times. The provider checked staff were suitable to work with people through recruitment checks. Staff received training in infection control practices, including the safe use of personal protective equipment (PPE) to reduce the risk of infections. People received the right support in relation to their medicines.

Right Culture: The ethos, values, attitudes and behaviours of leaders and care staff ensure people using services lead confident, inclusive and empowered lives.

The registered manager and staff team understood their role and responsibilities. The registered manager engaged and consulted well with people using the service and staff. Staff were supported by the registered manager. The registered manager understood their responsibility to notify CQC of significant events as required by law although none had been required.

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

Rating at last inspection

At our last inspection we rated the service good (report published September 2018).

Why we inspected

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

Follow up

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

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Good ●

The service was safe.

Details are in our safe findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

Carlene 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

Our inspection was completed by one inspector.

Service and service type

This service is a domiciliary care agency. It provides personal care to people living in their own houses and flats. This service also provides care and support to people living in 1 'supported living' setting, so that they can live as independently as possible. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for supported living; this inspection looked at people's personal care and support.

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 was in post.

Notice of inspection

This inspection was announced. We gave the service 48 hours' notice of the inspection. This was because we needed to be sure the registered manager would be available to support the inspection.

Inspection activity took place on 8 June when we visited the registered office in Purley then visited the supported living service in Wallington.

What we did before the inspection

We reviewed the information we had received about the service, including any statutory notifications received. The provider completed a provider information return. This is information providers are required to send us with key information about their service, what they do well and improvements they plan to make. We used all of this information to plan our inspection

During the inspection

We spoke with 2 people using the service, the registered manager and 2 support workers. We reviewed a range of records including care and staff records and records relating to the management of the service. continued to seek clarification from the provider to validate evidence found.

Is the service safe?

Our findings

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

At our last inspection we rated this key question good. The rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

Using medicines safely

- People's medicines were managed safely. Risks were assessed and managed well and staff had reliable guidance to follow. People were satisfied with the way their medicines were managed.
- Only staff who had received suitable training administered medicines to people.
- Medicines were administered by trained staff as prescribed and the provider audited medicines records to check people received them as prescribed.

Staffing and recruitment

- There were enough staff to support people safely.
- Staff had enough time to interact with people in a meaningful way and staff did not feel rushed at the supported living service.
- The provider carried out recruitment checks including those relating to criminal records, references, fitness to work and identification. The provider did not always explore any gaps in people's employment records and the registered manager told us they would improve in relation to this.

Preventing and controlling infection

- People received care from staff who followed safe infection control practices. Staff received training in infection control and the safe use of personal protective equipment (PPE) to reduce the risk of infections.
- The provider carried out checks of infection control practices to ensure staff followed current guidance.

Systems and processes to safeguard people from the risk of abuse

- People felt safe with staff and were encouraged to raise concerns with the service or social services if necessary. People were informed about how to stay safe in house meetings and individual meetings.
- Systems were in place to protect people from the risk of abuse such as training for staff on how to recognise abuse and take the right action.
- Although there had been no allegations of abuse, the registered manager understood their responsibilities to report to the local authority safeguarding team, follow their guidance and to notify CQC.

Assessing risk, safety monitoring and management; learning lessons when things go wrong

- The provider identified and assessed risks to people, such as those relating to their learning disabilities and/ or autism and the home environment.
- Guidance was in place for staff to follow to reduce the risks while supporting people to live the lives they wanted. Staff were informed of key details before providing care and shadowed other staff to be sure they understood how to care for people safely.

- Staff understood how to respond to accidents and incidents. The registered manager told us there had been no accidents or incidents relating to people receiving personal care, but we saw systems were in place to record, review and improve where necessary.

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.

- The provider assessed people's capacity in relation to their care and kept records under review, so they remained reliable and current. Meetings involving the person's relatives and health and social care professionals were held to decide what would be in the person's best interests when they lacked capacity, and the actions were included in care plans. However, these meetings were not always recorded, in line with the MCA. The registered manager told us they would improve this.
- Care workers understood their responsibilities in relation to the MCA and received training in this. Staff sought consent from people before providing personal care.

Is the service well-led?

Our findings

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

At our last inspection we rated this key question good. The rating for this key question has remained good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- The registered manager had been in post for several years and was experienced in adults social care services. They understood their role and responsibilities, as did staff.
- The registered manager was supported by the directors, a business support manager, an administrator and a team of senior support workers and support workers. There was a clear hierarchy in place.
- The provider had a range of audits to check if people received a good standard of care. These included checks of all care records and staff support by the registered manager, director and operations manager.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; engaging and involving people using the service, the public and staff, fully considering their equality characteristics; working in partnership with others; 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 communicated openly and clearly and worked closely with staff and people at the supported living service often to check they were happy with their care. A person told us they liked living at the supported living scheme and especially liked the staff who always talked and listened to them. They said there was nothing they would change about the support they received.
- The provider took note of any equality characteristics and recorded them in people's care plans with guidance for staff on how to meet them. Staff were kept informed of service developments and learning and knowledge was shared in formal and informal ways such as during staff meetings and supervision.
- People received person-centred care. A person told us their favourite foods and said staff supported them to buy and cook them. People were encouraged to do activities they were interested in and to live the lives they wanted to.
- The registered manager understood the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong. Staff told us the registered manager was open and transparent.
- The registered manager understood their responsibility to send us notifications in relation to significant events that had occurred in the service such as any allegation of abuse, although none had been required.
- The provider was available to communicate with external health and social care professionals such as social workers, district nurses, GPs and occupational therapists to ensure people received the care they needed.

