

SCS Homecare Ltd

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Inspection report

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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

SCS Homecare Ltd is a domiciliary care agency providing personal care. The service provides support to people who live in their own homes. At the time of our inspection there were six people using the service.

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. All six people currently using the service received personal care.

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

There were appropriate systems in place to help safeguard people from the risk of abuse. Care staff had completed safeguarding training and were confident around how to record and report any concerns. Individual and environmental risks were assessed and managed appropriately at the service. Health and safety certificates were in place as required. The service ensured they complied with all infection control and prevention requirements.

Staff were recruited safely and there were sufficient staff in place to meet people's needs. There was a thorough induction for new staff and training was on-going. Medicines were managed safely and regular checks were completed to ensure any issues were identified and addressed.

People's needs were assessed prior to the service providing care and support. Care plans included all relevant health and personal information. People were supported, where required, with their nutritional and hydration needs. Referrals were made to other professionals and agencies as required.

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 said they were well treated and supported. Care was planned in a person-centred way. People and their relatives where appropriate, were involved in discussions around care and support. People's privacy was respected and independence encouraged.

The service engaged well with people who used the service and their relatives. Staff we spoke with described good support from the management. A number of audits and checks, where issues were identified and addressed informed continuous learning and improvement.

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 17 June 2021 and this is the first inspection.

Why we inspected

This was a planned inspection to look at all five domains and to rate the 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 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.

SCS Homecare Ltd

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 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.

Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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.

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. Inspection activity started on 29 July 2022 and ended on 5 August 2022. We visited the location's office on 2 August 2022.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with 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. We used all this information to plan our inspection.

During the inspection

We spoke with two people who used the service and four relatives. We spoke with four members of staff, including the registered manager, the nominated individual and two care staff. The nominated individual is responsible for supervising the management of the service on behalf of the provider. We contacted two health and social care professionals to ascertain their opinions of the service.

We reviewed a range of records. This included two people's care records and two staff files in relation to recruitment. A variety of records relating to the management of the service, including policies and procedures were reviewed.

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

Systems and processes to safeguard people from the risk of abuse

- There were systems in place to help safeguard people from the risk of abuse.
- An appropriate safeguarding policy was in place and staff were aware of the policy and its contents.
- Care staff we spoke with had completed training and demonstrated a good understanding of safeguarding issues. They were confident to report any issues identified.
- Safeguarding audits were regularly carried out ensure staff training was up to date and staff continued to be aware of when and how to report.
- The management team were aware of the need to regularly audit concerns raised as the agency increases in size.

Assessing risk, safety monitoring and management

- Individual and environmental risks were assessed, monitored and managed appropriately at the service.
- Care plans included people's individual risks, in areas such as falls and mobility, with mitigation to help minimize the risks.
- Risks around safe use of equipment and safe moving and handling were assessed and managed appropriately.
- All required health and safety policies and certificates were in place at the service.

Staffing and recruitment

- Staff were recruited safely at the service and all required documents were in place within staff files.
- We looked at staff rotas and saw sufficient staff were in place to meet people's needs. However, the registered manager covered a number of care shifts currently. We discussed the need to recruit more staff to cover these shifts going forward. This was already in hand and the service was exploring various ways to expand their workforce.

Using medicines safely

- Medicines were managed safely at the service.
- Staff had completed the required training and competence checks were carried out following the training.
- Regular spot checks also included an assessment of competency with regard to administration of medicines.
- There were regular audits of medicines records to ensure issues were identified and addressed promptly. Staff were aware of the procedure to follow in the event of any medicines errors.

Preventing and controlling infection

- Staff had completed training in infection control and prevention and had signed to say they had read the

policy and guidance.

- Personal protective equipment, such as masks, aprons and gloves, was plentiful.
- There were regular infection control audits in place to identify any concerns and follow up with appropriate actions.

Learning lessons when things go wrong

- There were accident and incident books in place which were completed appropriately.
- There was a complaints procedure, which was shared with all the people who used the service. No recent complaints had been received.
- The service was keen to learn lessons from any issues identified via audits.

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 during a home visit prior to the service providing care.
- Care plans included relevant information about people's health and personal circumstances.
- Care and support needs were reviewed and updated on a six-monthly basis, or when anything changed.

Staff support: induction, training, skills and experience

- Staff at the service had a thorough and appropriate induction and were required to shadow an experienced member of staff before working alone.
- Training was on-going for all staff and the training matrix was kept up to date to ensure all staff completed training when it was due.
- A health and social care professional we spoke with said, "[Staff] appeared to be very caring and competent in regards to moving and handling."

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

- People were supported, where required, with their nutritional and hydration needs.
- People's needs in this area were clearly recorded.
- An up to date policy and procedure around nutrition was in place.

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

- Care plans included details of other health professionals involved with each individual.
- Referrals were made to other professionals and agencies as required.
- Any advice given by other professionals was followed.

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.

- Mental capacity assessments were in place and consent forms signed as required.
- Staff had completed MCA training and those we spoke with were aware of the principles and application of the Act.

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 they were well treated and supported. One person told us, "They [staff] are polite and friendly and have good skills." A relative said, "Very good carers, I look forward to them coming. They are very trustworthy and calm."
- Care plans included information about people's diverse needs. The service's 'Intimate care' policy included good practice guidelines and was used as part of the induction and training.
- People told us staff were respectful. One relative said, "I like the way they speak to [person]." Another relative said, "They have time to put [relative] at ease and make him laugh."

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

- People were supported to express their views. One relative told us, "They take into account our wishes and run everything by us." A person who used the service said, "They [staff] are respectful, I couldn't manage without them."
- People felt they were involved in all aspects of their care and support. One person said, "I talked to them about what I needed and was involved with everything."
- CQC had received positive feedback via a 'Share Your Experience' form, which said, '[Staff] attend the care user with civility and cheerfulness, competent attention to needs and consultation with next of kin regarding any decisions.'

Respecting and promoting people's privacy, dignity and independence

- People's privacy was respected. A relative told us, "They [staff] ensure [person's] privacy. They close the curtains, blinds and doors."
- People were encouraged to be as independent as possible. People's goals, such as achieving more independence, were recorded within their care plans and staff encouraged them with achieving these.

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 was planned in a person-centred way. One person told us, "They [staff] listened to me and I like that. I got to know them properly."
- Staff told us they had enough time on calls to ensure people had the care they required. One person told us, "They [staff] are punctual and look after [person] and have a laugh and a joke with them."
- People's choices were noted. For example, people's preferred names were recorded and used by staff.

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.

- The service was aware of people's different needs and methods of communication.
- Staff ensured people understood information given to them.
- The provider was looking into producing information in different formats as and when the need arose.

Improving care quality in response to complaints or concerns

- Everyone who used the service had a copy of the complaints procedure in their own home. A person who used the service told us, "I know how to complaint, but have no complaints."
- The registered manager assured us they would use any complaints as learning to aid improvement to service delivery.

End of life care and support

- There was a policy in place with regard to looking after people nearing the end of their life.
- Advance care plans were completed with people who wanted their wishes recorded.
- End of life training was completed by staff.

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

- Discussions with the management team evidenced a positive, inclusive and empowering culture within the service.
- Care files included information around people's desired objectives from receiving care and support.
- There was evidence of people and their relatives contributing to discussions around care provision. One relative said, "I am happy with the carers. It is a very good company, I have recommended them to 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 provider understood the duty of candour. They ensured all the people who used the service were able to contact them at any time to discuss care and support.
- Regular checks were made with people who used the service to help identify and address any issues.

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

- The management team demonstrated a clear understanding of their roles and responsibilities.
- There was a clear business continuity policy in place, to respond to any events or emergencies that may affect the running of the service.
- Notifications around issues such as serious injuries, deaths and allegations of abuse, were submitted to CQC as required.
- Staff we spoke with were able to describe their duties and felt the provider was a good employer.

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

- The service engaged well with people who used the service and their relatives. People we spoke with told us, "Communication is good", and, "Communication is fine." One relative said, "I had some problems at the beginning but was able to talk to the manager, who sorted everything out."
- Staff meetings were held regularly and gave staff the opportunity to raise concerns, make suggestions and discuss any issues.
- Regular staff supervision sessions gave staff and managers the opportunity to discuss work issues and look at training and development needs.
- Staff we spoke with described good support. One staff member told us, "I feel well supported, they support

me in my work." Another staff member said, "The management are very supportive and will help you even with personal situations. They are good with well-being generally."

Continuous learning and improving care

- We saw evidence of continuous learning and improvement via a wide range of audits, in areas such as medicines management, first aid, fire safety, PPE, accidents, safeguarding and records, Any issues were addressed with appropriate actions.
- Service user satisfaction surveys were completed quarterly, with issues identified and actions recorded and completed where necessary. A recent survey evidenced a high level of satisfaction. One comment read, '[Name of care staff] and the girls were wonderful with my [relative]. Very compassionate and genuine care team.'

Working in partnership with others

- Care files evidenced good working relationships with other agencies and professionals.
- Referrals, where required, were made in a timely way.