

## Falcon Care Agency Ltd

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### **Inspection report**

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### Ratings

Overall rating for this service	Inadequate •
Is the service safe?	Inspected but not rated
Is the service well-led?	Inspected but not rated

## Summary of findings

## Overall summary

About the service

Falcon Care Agency Ltd is a domiciliary care agency, providing personal care to people in their own homes. At the time of inspection, no one was receiving 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.

There was a system to include information of how to reduce risks to people's safety in people's care plans.

Quality assurance systems had been put into place to measure whether people were provided with a 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 and update

The last rating for this service was inadequate. (Report published June 2023).

The provider completed an action plan after the last inspection to show what they would do and by when to improve.

As this inspection was a targeted inspection we did not review in full the breaches in regulation. We will review full information about the breaches at our next inspection.

This service has been in Special Measures since March 2023. During this inspection the provider demonstrated that improvements have been made.

Why we inspected.

The overall rating for the service has not changed following this targeted inspection and remains inadequate. We use targeted inspections to follow up on the Suspension of a service or to check concerns. They do not look at an entire key questions, only the part of the key questions we are specifically concerned about. Targeted inspections do not change the rating from the previous inspection. This is because they do not assess all areas of a key question.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

Please see the safe and well led sections of this report.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Falcon Care Agency Ltd on our website at www.cqc.org.uk.

#### Follow up

The overall rating for this service is 'Inadequate' and the service is therefore in 'special measures'. This means we will keep the service under review and, if we do not propose to cancel the provider's registration, we will re-inspect within 6 months to check for significant improvements.

If the provider has not made enough improvement within this timeframe and there is still a rating of inadequate for any key question or overall rating, we will take action in line with our enforcement procedures. This will mean we will begin the process of preventing the provider from operating this service. This will usually lead to cancellation of their registration or to varying the conditions the registration.

For adult social care services, the maximum time for being in special measures will usually be no more than 12 months. If the service has demonstrated improvements when we inspect it, and it is no longer rated as inadequate for any of the five key questions it will no longer be in special measures.

## The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?	Inspected but not rated
The service was not always safe.	
Details are in our safe findings below.	
Is the service well-led?	Inspected but not rated
Is the service well-led?  The service was not always well led.	Inspected but not rated



## Falcon Care Agency Ltd

**Detailed findings** 

## Background to this 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.

This was a targeted inspection to check whether the provider had met the requirements of the Suspension Notice in relation to Regulation 12 (Safe care and treatment), Regulation 13 (Safeguarding service users from abuse and improper treatment) and Regulation 17, (1) (2) (a) (b), Good governance, of The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 on concerns we had about we found a lack of the service providing safe care to people using the service and a lack of auditing of the quality of care and safety provided.

#### Inspection team

This inspection was carried out by 1 inspector.

#### Service and service type

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

#### 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 in post.

#### Notice of inspection

We gave the service 2 days' notice of the inspection. This was because it is a small service and we needed to be sure that the registered manager would be in the office to support the inspection. We also gave time for the registered manager to send us information to support our inspection, so we did not have to spend an extended amount of time in the office of the service.

Inspection activity started on 19 May and ended 22 May 2023. We visited the office location on 22 May 2023.

#### What we did before the inspection

We reviewed information we had received about the service since registration and we sought feedback from the local authority. The provider was not asked to complete a Provider Information Return (PIR) prior to this inspection. 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 inspection

At the time of the inspection the service was under a suspension of their registration from CQC and therefore had no people using the service. We spoke with the registered manager, a senior care worker and a care staff member. We reviewed a range of records relating to the management of the service. Policies and procedures were also reviewed.

#### **Inspected but not rated**

## Is the service safe?

## Our findings

At our last inspection we rated this key question inadequate. We have not reviewed the rating as we have not looked at all of the key questions at this inspection.

The purpose of this inspection was to check if the provider had met the requirements of the suspension notice we had previously served.

#### Assessing risk, safety monitoring and management

At our last inspection we found that the provider failed to identify and mitigate serious risks to people's health, safety and wellbeing. This was a breach of Regulation 12 (Safe care and treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. At this inspection we were not able to review this breach of regulation in full as there were no people being supported by the service. We will review this breach in full at our next inspection.

- Systems introduced since the suspension notice meant that people could be protected from risks associated with their care and support.
- Risk assessments were in place for a range of issues including managing distressed behaviour and supporting people to eat safely.
- Assessments included the environmental risk assessments which identified and managed risks in people's homes, such as identifying tripping risks to prevent people from falls.

#### Staffing and recruitment

At our last inspection we found that there had been a failure to ensure staff were safely recruited which was a breach if Regulation 19 (Fit and proper persons) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. At this inspection we were not able to review this breach of regulation in full as there were no people being supported by the service. We will review this breach in full at our next inspection.

- Recruitment systems for staff to be re-employed following the suspension notice showed evidence of good character, references and criminal records checks had been completed for staff. These checks help prevent unsuitable people from working with people who use the service.
- References from some previous health and social care settings had not been in place. The registered manager said these employers had been contacted but had not supplied the references. They said this would be followed up again and provided evidence of this further contact.

#### Using medicines safely

At our last inspection we found that the provider failed to ensure the proper and safe management of medicines. At this inspection we were not able to review this breach of regulation in full as there were no people being supported by the service. We will review this breach in full at our next inspection.

- Systems had been implemented to ensure, when providing support for people with their medicines, these were administered safely and as prescribed. We will check these systems are effective at our next inspection.
- Staff were trained to administer medicines.

Systems and processes to safeguard people from the risk of abuse:

At our last inspection we found that the provider's systems and processes placed people at increased risk of avoidable abuse and improper treatment. This was a breach of Regulation 13 (Safeguarding) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. At this inspection we were not able to review this breach of regulation in full as there were no people being supported by the service. We will review this breach in full at our next inspection.

- Staff demonstrated they understood how to safeguard people and were aware of reporting to the registered manager if abuse was suspected or alleged. They were confident the management would act if they had any concerns about people's safety.
- The registered manager was aware of the duty to report any safeguarding concerns to the local authority safeguarding team.

#### Inspected but not rated

## 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 inadequate. We have not reviewed the rating as we have not looked at all of the key questions at this inspection.

The purpose of this inspection was to check if the provider had met the requirements of the suspension notice we had previously served.

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

At our last inspection we found that sufficient leadership and contingency planning was not in place within the service on the day of inspection. Systems and processes had not been established or operated effectively to ensure a quality service.

This was a breach of Regulation 17, (1) (2) (a) (b)(Good governance) of The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. The purpose of this inspection was to check if the provider had met the requirements of the suspension notice. We were therefore not able to review this breach of regulation in full as there were no people being supported by the service. We will review this breach in full at our next inspection.

- Audits and checks were now in place to check the service could meet people's needs in the future, such as checking that the care provided was meeting the assessed needs of people. We will check the effectiveness of these processes at our next inspection.
- The registered manager understood their role and the needs of their staff team. Processes were now in place to measure quality performance. Staff understood their responsibilities, and who to report to if they had concerns and needed help.
- There was a system in place to ensure spot checks on staff took place to measure whether staff were providing appropriate care and a positive approach to people.

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 was aware of the duty of candour, that if mistakes were made, they had a duty to be open and honest, issue an apology and take any necessary action. They also understood information sharing requirements, and knew that when concerns had been identified, appropriate statutory notifications required to be submitted to CQC as required by law, and to the local authority.