

Exceptional Care At Home Limited

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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

Exceptional Care At Home Ltd is a domiciliary care service providing personal care to people living in their own homes. At the time of the inspection, the service was supporting six people with personal care.

Not everyone supported by this type of service receives 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

The provider had quality monitoring processes, but these did not always identify date and typographical errors in records. However, the registered manager assured us that they will improve their processes.

The registered manager was passionate about providing good care to people. There was collaborative working with people, relatives, staff and health professionals so that people received the right support.

People felt safe and well supported by staff and the registered manager. One person said, "I feel safe with [registered manager] because [they] care about what goes on." Risks to people had been managed well. Medicines were managed safely by trained staff. Staff followed infection prevention and control guidance to reduce the risk of the spread of infections. There were reviews of incidents and accidents, and preventative actions had been taken when needed.

Information in people's care plans helped staff to provide safe and effective care. Staff were appropriately trained for their roles. They felt supported by the registered manager. When required, staff supported people well to eat and drink.

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 and their relatives said staff were kind, caring and friendly. Staff had good relationships with people they supported, and they said they enjoyed working at the service. People were involved in decisions about their care and support. Staff supported people in a way that promoted their privacy, dignity and independence.

People said their care was planned and provided in a way that met their individual needs. People's complaints and concerns were dealt with. Where required, appropriate action taken to improve the service. Staff supported people at the end of their lives if this support was required.

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

Rating at last inspection

This is the first inspection for this service.

Why we inspected

This was a planned inspection based on the provider's registration date and our monitoring of the service.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information, 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.

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.

Exceptional Care At Home 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 Care Act 2014.

Inspection team

The inspection was carried out by two inspectors.

Service and service type

Exceptional Care At Home Ltd 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 a short period notice of the inspection. This was because we wanted to ensure the registered manager would be available to support the inspection during the visit to the office location.

Inspection activity started on 17 August 2021 and ended on 02 September 2021. We visited the office location on 02 September 2021.

What we did before the 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. 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. This information helps support our inspections. We used all of this information to plan our inspection.

During the inspection

We spoke with one person who used the service, relatives of three other people and three staff by telephone. We spoke with the registered manager during the visit to the office location.

We asked the provider to send us various records and documents that we reviewed before the visit to the office location. This included care plans and risk assessments for two people, and staff recruitment and training records. We also looked at records relating to the management of the service, including quality monitoring audits.

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 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; Assessing risk, safety monitoring and management

- People said they felt safe with staff who supported them and they had never been concerned about abuse. This was also supported by relatives we spoke with. One person said, "Sometimes you worry when you do not yet know the staff, but I have two regular ones now."
- Staff were trained in how to keep people safe and they knew how to report concerns. They said the registered manager dealt appropriately with any concerns they reported to them.
- People had risk assessments to help staff manage any identified risks. For one person, these included risks associated with support to move, not eating well or drinking enough fluids, and developing pressure ulcers. There was guidance for staff to support the person in a way that reduced these risks.
- Staff said they reported to the registered manager when people's needs changed so that risk assessments could be updated.

Staffing and recruitment

- Staff were recruited safely. The registered manager checked that staff were suitable to work at the service. This included obtaining references from previous employers and criminal record checks.
- There were enough staff to support people safely. One staff member said, "We have enough staff and we have no problems with care schedules at the moment."
- People and their relatives were happy with the timeliness of the care visits because staff normally arrived at agreed times. They had no concerns about staffing levels because they had never had any missed care visits. They were also happy about having consistent staff who had got to know people well.

Using medicines safely

- Not everyone was supported by staff to take their medicines. Where this support had been provided, one person told us it had been managed well.
- Staff had been trained and their competence to manage people's medicines safely had been checked.
- The registered manager acted properly to deal with a dispensing error by a pharmacy. Their quick action ensured the person received their medicines as prescribed by their doctor.

Preventing and controlling infection

- Staff said they had appropriate personal protective equipment (PPE) to prevent the spread of infections.
- The provider had policies and guidance to help staff to work in accordance with current guidance on infection prevention and control. These included guidance in relation to the COVID-19 pandemic.

Learning lessons when things go wrong

- There were systems to record, review and learn from incidents and accidents that may occur at the service.
- Following a medicine error where one of the person's medicines was missed by staff, the registered manager worked closely with the person's GP to put systems to prevent this happening again. The person's medicines were now in a dosette box, which reduced the risk of medicines being missed.
- Staff told us the registered manager shared learning from incidents with them so that they could prevent recurrence.

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 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 had their needs assessed and they had care plans that gave staff information they needed to support them well. When required, the registered manager also worked closely with other professionals to review people's care needs.
- People and their relatives were happy with how staff supported people with their individual needs. One person said, "[Staff] are very good to do what they do for me."
- Everyone said people received good care because they were supported by consistent staff who knew their needs very well. One relative said, "I made it clear from the beginning that I needed one consistent [staff] and they have done that. I am happy with the care."
- The registered manager reviewed and updated people's care plans when their needs changed. This helped staff to always have up to date information about people's needs.

Staff support: induction, training, skills and experience

- People and their relatives told us staff were skilled and they knew how to support people well. Everyone we spoke with had no concerns about the quality of care provided by staff.
- Staff said they had very good training to help them to develop their skills and knowledge. One staff member said, "I had never worked in care before, but the outstanding training and support really helped me." They said this gave them confidence to support people the right way.
- Staff had regular supervision and annual appraisals. They said they were supported well by the registered manager and they could contact them anytime they needed advice. One staff member said, "Any queries I have, the supervisor and registered manager with support me."

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

- Not everyone was supported by staff with their food. One person who received this support said staff supported them well with eating and drinking.
- Staff told us they had no concerns about people not eating and drinking enough. They said they would report any concerns to the registered manager so that the person was referred to and assessed by health professionals.

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

- People and their relatives told us staff supported people with their health needs. One person told us staff supported them to attend health appointments.
- Staff knew they needed to contact the registered manager or emergency services when people became

unwell so that they could get timely treatment.

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 and we found these were being met.

- Staff said they always asked for people's permission and consent before providing any care and support. They said they were always respectful of people's decisions and choices.
- Most people were able to consent to being supported by staff. Where people lacked mental capacity to do so, decisions to accept care had been made on their behalf by relatives with a Lasting Power of Attorney for care welfare. This is a legal document that lets people appoint someone to help them make decisions on their behalf when they lack mental capacity to do so.
- Staff said they found MCA training helpful in getting them to understand how to support people in a way that protected their rights.

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 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 and their relatives told us staff were kind, caring and very friendly. One person said, "[Staff] are very friendly and supportive. They are like my family now and I can't live without them."
- A person told us they had also had a very good relationship with the registered manager who visited often to check that they were happy with everything. They also said, "[Registered manager] is a wonderful person, very good and interested in people. I'm very happy to have her and she's like family. She sometimes brings me my favourite takeaway meal and we eat together."
- Staff said they had developed good relationships with people they supported, and they enjoyed spending time with people." One staff member said, "It is a rewarding job because I can see the difference I make to people's lives."

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

- People and their relatives told us they were involved in making decisions about people's care. They said they contributed to developing the care plans so that people received the support they needed and wanted.
- People's care plans included information about what was important to them. This included information about their routines, habits, important places or events, significant people, religion, social activities or hobbies, support needs, and concerns.
- Staff said they always considered people's preferences when supporting them so that they did not do anything people did not want.

Respecting and promoting people's privacy, dignity and independence

- People said staff supported them in a way that promoted their privacy and dignity, especially when providing personal care.
- People and their relatives said staff helped people to maintain their independence as much as possible. One person told us they could do some things without support, but they needed staff support with personal care, to cook their meals, to go out for walks and to attend health appointments.

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 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

- People and their relatives said staff supported people well to meet their needs. They said people received timely care and in the way they wanted. One person said, "[Staff] are very good and they work really hard to support me."
- Care plans contained detailed information about the support people needed. This helped staff to have the information they required to provide personalised care.
- One person told us they knew they had care plans in a file kept in their home, but they had never looked at them. They said they had no concerns because staff knew what to do.

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.

- People's communication methods were recorded in their care plans. For example, a care plan for a person who sometimes had challenges speaking showed that they also used hand gestures, or they wrote down what they wanted to tell staff. Knowing this helped staff to provide person-centred care to the person.

Improving care quality in response to complaints or concerns

- People and their relatives said they knew how to complain if they were not happy with any aspects of the service. They were all happy with the care provided and they said the registered manager dealt with any issues they raised. One relative said, "It is easy to talk to the [registered manager] and get things sorted."
- There was a system to manage people's concerns and complaints. The registered manager investigated people's complaints, and they took action to improve.

End of life care and support

- Staff did not routinely support people at the end of their lives, but they did so if this support was required.
- People's care and support preferences had been recorded in their care plans.

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 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.

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

- The provider had quality monitoring systems and they completed regular audits. However, we identified date and typographical errors in some records. These included a person's risk assessment, two incident reports and meeting minutes. This had a potential to have significant impact on the accuracy of the information that staff may rely on to provide safe and effective care. However, there was no evidence people were put at risk because of this. The registered manager was also responsive to our feedback and they assured us that they will improve their processes.
- People and their relatives said the service was well managed. They said the registered manager regularly visited people to check if they were happy with their care and made timely improvements where required. One person said, "[Registered manager] has high standards and wants to make sure everything goes well."
- The registered manager was very passionate about their job and they told us they had worked hard to manage a service that provided good care to people. They said they had worked closely with experienced managers to achieve this. This was supported by a member of staff who said, "It is a small service for now, but they have done a lot of things really well."

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

- People and their relatives said people received good support from staff, and their needs were being met.
- Staff said the service was very good and they had never had concerns about the quality of care people received. They told us they were well supported in their roles and this helped them to provide good care to people. One staff member told us, "The service is good, and people are happy. That is the important thing."
- People and their relatives told us they were involved in making decisions about people's care and support. They were also asked for feedback about the service including through telephone calls, visits from the registered manager and surveys.
- Compliments the provider received showed people were happy with the support they received. They were also positive reviews about the provider on a website provided by a third party. Comments from people, relatives and staff included, "The company is indeed Exceptional! The management is outstanding, sensitive and caring. I am happy with [staff], they are always on time and respectful. [Provider] is an amazing company, thank you."; "The service is client specific and first class."
- Staff felt involved in how the service operated and their views were valued. The registered manager sent them weekly notes and updates, including a topic of the week to discuss.

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 understood their responsibilities to be open and honest when things go wrong. They knew what they needed to report to CQC and other relevant agencies.
- Staff knew they could report concerns to the registered manager and other external agencies. They were confident the registered manager would listen to their views and where required, take appropriate action to improve.

Working in partnership with others

- The registered manager worked closely with other professionals when necessary to ensure people received the right care and support. They had been a review of one person's needs that included other health professionals. This was essential to plan how to help the person to further gain their independence.
- The service was not currently commissioned by a local authority, but they had been an agreement to start this soon. Feedback from a local authority representative said interactions with the registered manager showed they were professional and knowledgeable.