

Home Sweet Home Caring Services Ltd

Home Sweet Home Reablement Services

Inspection report

82 Parkanaur Avenue
Southend-on-sea
SS1 3JB

Date of inspection visit:
15 June 2022

Date of publication:
13 July 2022

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

Home Sweet Home Reablement Services is a domiciliary care service providing care and support to people within their own homes. 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.

At the time of the inspection the service was providing support to 15 older people, only four of those were receiving support with personal care.

The aim of the service was to enable people to remain living in their own homes for as long as possible and to access the local community.

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

Staff had an in-depth knowledge of people's needs which they achieved through extended induction every time they started supporting a new person. The same small group of care staff supported each person. This helped to develop a trusting and friendly relationship between people and staff.

People told us they felt safe in the company of care staff. Care visits were completed timely, with people informed if staff were running late. Staff remained for the full duration of visits, often staying longer than their specified time to chat and provide companionship to people.

Staff had received training in safeguarding and knew how to identify and report concerns. People had been provided with the complaints process but had not needed to use this.

The registered manager promptly sought support and liaised with other health and social care professionals when needed. As a result, staff safely and effectively met people's needs.

The registered manager regularly consulted with people about their views of the service. People and family members confirmed that they were fully involved in planning people's care and that staff promptly acted on any changes to the support needs. This gave people and relatives additional comfort and reassurance that the service could meet people's needs.

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.

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

Rating at the last inspection

The last rating for the service under the previous office address was Outstanding, published on 18 April 2019.

Why we inspected

This was a planned inspection as part of our quality assurance process.

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.

Home Sweet Home Reablement 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 Health and Social Care Act 2008.

Inspection team

The service was inspected by two inspectors.

Service and service type

This service is a domiciliary care service. 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, who is also the provider.

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 registered manager would be in the office to support the inspection.

Inspection activity started on 13 June 2022 and ended on 22 June 2022. We visited the location's office on 15 June 2022 and telephone calls to people, staff and relatives took place on 16,17, 20 and 22 June 2022.

What we did before the inspection

We reviewed the information we had received about the service since the last inspection. 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 one person who used the service and two relatives about their experience of the care provided. We spoke with the registered manager, and two care staff.

We reviewed a range of records, including two people's care records and related risk assessments. We looked at three staff files in relation to recruitment and staff supervision. 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.

At our last inspection we rated this key question Outstanding. At this inspection the rating has changed to Good: This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- Systems were in place to ensure people were safeguarded from the risk of abuse.
- Staff had received training in safeguarding people and knew how to report concerns. They told us they felt confident to raise concerns about poor standards of care.
- The service was aware of their responsibility to report safeguarding concerns to the local authority and CQC. At the time of the inspection no safeguarding concerns had been raised.
- People told us they felt safe. One person told us, "I have been with Home Sweet Home for two years, I feel safe with them, not like before when I had different people turning up all the time. I feel happy now, we have a chat."

Assessing risk, safety monitoring and management

- Risks to people were identified and individual risk assessments were in place for people which included personal care. Risk assessments outlined measures to help reduce the likelihood of people being harmed and care plans contained guidance for staff to follow to keep people safe.
- Environmental risk assessments were in place for people.
- Care staff were trained to support people safely, for example they received training in moving and handling people and first aid.

Staffing and recruitment

- Recruitment and selection processes had been carried out to ensure suitable staff were employed to care for people. A range of checks were completed. These included obtaining references and undertaking Disclosure and Barring Service (DBS) checks. DBS checks, provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.
- There were enough care staff to ensure people received consistent care at a time that suited them.
- Feedback indicated people thought there was enough staff to ensure they did not feel rushed. One person said, "I have a 45-minute visit, they [staff] are always on time, no missed visits and they take time to have a chat."

Using medicines safely

- At the time of our visit staff were not administering medicines to people using the service.
- Staff had undertaken medicines training. The registered manager did have a medication administration record (MAR) in place for one person, whereby staff signed to record they had seen the person take their medicines when prompted for monitoring purposes.

Preventing and controlling infection

- Staff had completed training in infection prevention and control and were provided with the personal protective equipment (PPE) they needed. One staff member told us, "We get all the PPE we need from the office."
- The provider had relevant policies in place to support effective infection prevention and control and was following current Covid-19 infection control guidelines.

Learning lessons when things go wrong

- The provider had systems in place to help ensure learning from events, incidents or accidents that may occur.
- The learning from these events would be shared with staff during training and meetings. One staff member said, "[Registered manager] is very supportive, always in touch and, keeping me updated."

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.

At our last inspection we rated this key question Good. At this inspection the rating for this key question has remained 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 thoroughly prior to commencing the service.
- Care plans evidenced clear information around how care and support should be delivered.
- People's support needs were reviewed regularly to ensure care continued to be delivered as required. We saw evidence that care plan review meetings were being held with people and involved relatives input.

Staff support: induction, training, skills and experience

- Staff members confirmed they had received an induction and on-going training. They said they felt they had received good support from the registered manager and colleagues when they joined and had the opportunity to have a 'getting to know you' chat with the people before the start of their care package.
- The registered manager provided ongoing mandatory training, such as moving and handling people, safeguarding adults and first aid.
- Staff received supervision and an annual appraisal and told us they felt well supported. Staff had the support needed to enable them to develop into their role with the skills and confidence required to support people well.
- One staff member said, "Being in touch regularly with your colleagues you learn from each other."

Supporting people to eat and drink enough to maintain a balanced diet; Supporting people to live healthier lives, access healthcare services and support

- People were supported to eat and drink in line with their care plan. A relative said, "Staff know exactly what my relative likes to eat and exactly how they like it."
- Staff monitored people if they were at risk of poor nutrition and involved healthcare professionals where required. We saw evidence of one person who had been referred to the dietician due to poor appetite.

Staff working with other agencies to provide consistent, effective, timely care

- The service worked effectively with other professionals. For example, when people's needs changed, they made referrals to health and social care professionals to ensure people received the support they needed.

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

- We saw documented evidence where people and relatives were consulted and asked for their or their family members' consent before providing care and support.
- Where we identified people who lacked capacity, the registered manager had taken steps to obtain Lasting Power of Attorney (LPA) details from their relative .This allows an individual(s) to make best interests decisions for and on behalf of a person who lacks capacity to make their own decisions.
- Staff completed MCA training and encouraged and supported people to make their own decisions. One staff member told us, "I always speak to the person first to determine what choices they are able to make for themselves."

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.

At our last inspection we rated this key question Outstanding. The rating for this key question has changed to 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

- We heard of instances where the overall caring and compassionate nature of the service excelled. One relative told us, "I was planning to visit my relative the next day and called ahead. My relative was very distressed on the telephone, I immediately called [registered manager] and explained, she contacted my relative's regular staff member, [name of staff]. They were there within 20 minutes and attended to my relative, providing reassurance. This is just one example, they have a can do, nothing is too much trouble approach."
- People, family members and health care professionals consistently gave exceptionally positive feedback about the supportive nature of the service. "A family member said, " [Name] is hugely fond of the staff, they see one like a daughter. [Staff name] is very flexible, there is genuine warmth and care there for my relative."
- External health and social care professionals told us about their very positive experiences with the service. Feedback included, "I know, that the person at the heart of this care and their staff will be fully supported in the way they need to be. Staff do not take over removing independence, but seem able to support with the right things at the right time and in the right way."
- Staff had training in equality and diversity. The provider's values are centred around helping people to achieve optimum state of health and well-being which was validated by staff feedback. One member of staff said, "I support and actively encourage people to be as independent as possible , help them in their day to day decision making, it is all about the person's needs and wishes."

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

- The registered manager paid particular attention to ensuring the most suitable staff supported each person. They matched people and staff on a range of criteria and provided staff with assistance to ensure they knew what people wanted. A relative told us, "[Staff name] has built up a close professional relationship with my relative, [relative name] calls staff member my rock."
- Questionnaires were completed by people, and these confirmed people were happy with their support. We saw comments such as, "The staff always treat me with respect and are kind." And, "The staff have no hesitation in staying longer if I need them." And, "I am happy with the service and consider my staff member to be family."
- People and their family members always felt fully involved in making decisions about people's care. They described care plans as precisely reflecting what support people needed. Equally, the care itself reflected guidelines from the care plans meaning people received the support they wanted.
- When a new staff member started working, they meet people in their homes with their next of kin or named person and had a 'getting to know you' chat with the registered manager in attendance. This

ensured, a comprehensive care plan was tailored to the individual and reflective of their whole holistic care and support needs.

Respecting and promoting people's privacy, dignity and independence

- Staff showed an understanding of the importance of maintaining a person's independence. One staff member said, "I recognised [name] was struggling to get dressed due to pain, I discussed with [name] relative and made a referral for physiotherapy input. I carry out daily exercises with [name] to help maintain their independence."
- Staff respected people's privacy and dignity. People told us, "I like to remain independent. Staff stay while I shower, just in case I fall." And, "I am treated with respect and dignity, which is important, I am a private person, they are kind and caring people."

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs.

At our last inspection we rated this key question Good. The rating for this key question has remained 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's care plans contained detailed information on what personal care staff needed to provide. This included toileting, grooming, instruction on using any equipment or care aids and actions that needed to be taken to ensure the person was comfortable
- Care plans were personalised and detailed how the person wanted their needs and preferences to be met. Care plans were regularly reviewed and updated to reflect people's changing needs and staff were notified of any changes.
- Care plans included information about people's personal history, likes and dislikes, family relationships, routines and recognising and respecting a person's lifestyle choices.

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 identified people's information and communication needs by assessing them and recording this in their care plans.
- Staff were aware of the individual needs of people and felt they had enough information to communicate with people effectively.
- A person had completed The Preferred Priorities of Care (PPC) document which captured how and where a person would like to be supported at the end of their life. This was in an easy read format to enable the person to understand the questions asked and be able to complete the document with support from a relative.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- People were supported to maintain contact with their family and friends.
- The registered manager considered any risk of isolation during the assessment process. The registered manager runs a day care centre three days a week to enable people to access the community if they so wish.

Improving care quality in response to complaints or concerns

- There was a complaints policy and procedures in place. Each person using the service had a copy of the complaints procedure in their care plan to refer to. At the time of our visit there had been no complaints raised within the service.
- People knew how to raise a complaint or concern with the registered manager. One relative said, "I have had no cause to complain, however I am able to raise anything with [registered manager], who I know would listen and take me seriously." A person told us, "We are open, [registered manager] and us, my daughter would speak up for me if there were any concerns."

End of life care and support

- No one was receiving end of life care at the time of our inspection. The registered manager was aware of the importance of people being involved in planning their end of life care. We saw evidence of the PPC document being completed with people, enabling them to discuss how and where they wanted to be cared for at the end of their life.

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.

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

- The registered manager promoted a positive culture across the service. They led by example working alongside the team.
- The registered manager and staff team demonstrated a genuine passion about the people they supported and the quality of care they provided. A member of staff said, "I am impressed by the level of dedication shown by all staff."
- People spoke positively about the service and the support they received. One person said, "I am very happy, I wouldn't change a thing." A professional told us, "I have found [registered manager], very helpful and often goes beyond my expectations to make sure that people have the service that they need quickly."
- Staff felt the registered manager was accessible and approachable and any concerns raised would be dealt with effectively.
- The service had a whistleblowing policy in place. The registered manager told us they had an open and honest culture where they encouraged transparency and learning from mistakes.

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 the duty of candour and their duty to be open and honest about any incident which caused or placed people at harm.
- Systems were in place to investigate and feedback on incidents, accidents and complaints.

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

- Staff and management team were extremely dedicated and passionate about people. Staff had developed warm relationships with people and their families. The registered manager told us, "I wouldn't take on more care packages at the moment as I want to give 110% to people." A relative said, "They provide the whole package, fantastic, first class."
- The registered manager and staff demonstrated an understanding of their roles and responsibilities.
- There were systems in place to identify and manage risks to the quality of the care provided.
- Staff felt supported by the registered manager. They had the opportunity to raise concerns by attending meetings and supervisions.

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

characteristics

- Regular surveys were undertaken to gain feedback from people who used the service.
- We received positive feedback from people, relatives and professionals about their experiences. One health care professional told us, "This service is one of the few I have worked with that truly tailors it's care to the people's needs and doesn't just say they do and then make them fit into what they usually offer."
- Staff told us they enjoyed working at the service, were confident in their roles and responsibilities and found management approachable. Staff could call the registered manager anytime. One, staff member told us, "I speak to [registered manager] daily."

Continuous learning and improving care; Working in partnership with others

- The service was committed to continuous learning and improvement.
- A number of audits and checks provided information which was used to inform improvements to areas of work, such as record keeping and care delivery. The registered manager was in the process of implementing an electronic monitoring system, for call monitoring and people's care plans, to improve and update systems and processes.
- Spot checks were completed regularly with staff to help ensure they continued to provide care as required.
- The service worked in partnership with other agencies to ensure people received care and support which was safe and met their needs. One health care professional told us, "[Registered manager] will contact other professionals if needed, in the same way, I have contacted her for similar advice and ideas, I like the fact that as professionals we are all working together to find the best outcome for the person."