

Favour Health Ltd

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Inspection report

23 Rose Close
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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

Favour Health Ltd is a domiciliary care service. The service provides personal care to people living in their own homes. At the time of the inspection one person was receiving personal care.

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

The person's care and support needs were met by staff who knew them well and enjoyed working with them. Staff had been safely recruited and had received training in safeguarding – protecting people from abuse. Staff knew how to recognise abuse and report concerns. The person's privacy and dignity were respected.

The person was supported to have maximum choice and control of their life. Staff supported them in the least restrictive way possible and in their best interests and the policies and systems in the service supported this practice.

The person had been involved in developing their care plan which was person centred. This provided guidance for staff to enable them to provide the care and support the person had agreed was appropriate to them. The plan was reviewed regularly, and the person could change their plan whenever they chose.

The registered manager sought feedback about the person's care experience to ensure continued personalised care was provided. The person spoke highly of the registered manager, stating they felt happy to contact them by telephone, and received visits at their home to check on their wellbeing.

The registered manager carried out regular checks on the quality and safety of the service and understood their regulatory responsibilities. No complaints or concerns had been reported before the inspection. Staff were positive, stating the registered manager was kind and caring.

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

Why we inspected

This service was registered with us on 24th November 2017 and this is the first inspection.

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.

Favour Health 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

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

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 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.

What we did before the inspection

This was the first comprehensive inspection. We sought feedback from the local authority, commissioners and Healthwatch. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England.

The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report. We used all this information to plan our inspection.

During the inspection

We spoke to the person receiving personal care. We spoke with the registered manager and two members of care staff.

We reviewed a range of records. This included the person's care records. We looked at two 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.

This is the first inspection for 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

- Systems and processes were in place to protect the person from the risk of abuse. Staff we spoke with had received training and knew how to recognise signs of abuse and how to report safeguarding concerns.
- The registered manager was aware of their responsibilities for reporting concerns to CQC. Staff said they were confident the registered manager would address concerns and make the required safeguarding referrals to the local authority.
- Staff were aware of the whistle blowing process and had access to the policy and procedures.

Assessing risk, safety monitoring and management

- An in-depth health and safety assessment of the person's living environment was completed when they were referred to the service, to identify any potential risks such as trip hazards.
- Detailed risk assessments were in place, and regularly reviewed with the person. For example; mobility monitored when providing personal care.

Staffing and recruitment

- The person was supported by a consistent team of staff. The person told us, the staff knew their likes and dislikes. Planned staffing levels were achieved and the person received personalised care at the time they needed it.
- A safe recruitment process was in place. Disclosure and Barring Service (DBS) checks were completed prior to staff commencing employment. The Disclosure and Barring Service carry out a criminal record and barring check on individuals who intend to work with children and vulnerable adults, to help employers make safer recruitment decisions.

Using medicines safely

- Staff had received training in safely administering medicines. Staff told us their competence to administer medicines was checked by the registered manager, who completed unannounced competency checks.
- The registered manager told us they completed monthly medicines audits. Records were up to date and no mistakes had been identified.

Preventing and controlling infection

- Staff had received infection control training. Staff told us how they prevent the spread of infection when providing personal care.
- The person told us, "Carers always use gloves and aprons when they visit me."
- Systems and processes were in place to ensure infections were prevented and controlled. The provider

ensured personal protective equipment (PPE), such as disposable aprons and gloves, were available and used by staff when supporting people with personal care.

Learning lessons when things go wrong

- Staff were aware of the relevant policies and guidance and knew how to report incidents and accidents.

The registered manager told us there had been no incidents or accidents to report.

- No external or internal investigations had been carried out by the provider, or local authority at the time of the inspection.

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 the person's outcomes were consistently good, and the person's feedback confirmed this.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- The registered manager had met with the person, where their wellbeing, health, mobility, and daily living care needs had been assessed, before receiving care from the service. This ensured people's choices, needs, goals, values and daily preferences were met in line with legislation and best practice.
- The person-centred care plan had been reviewed with the person on a regular basis.

Staff support: induction, training, skills and experience

- The person received care and support from staff who had the skills, knowledge and expertise to meet their needs. Staff received mandatory training during their induction. The registered manager encouraged and motivated staff to attain the Care Certificate. The Care Certificate covers an identified set of standards, which health and social care workers are expected to follow, to enable them to provide safe and effective care.
- Staff told us they were supported by the registered manager and had access to regular formal and informal supervision. A staff member said, "The registered manager is always available."

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

- Care plans documented the person's likes and dislikes and how they preferred their food and drink to be prepared and served.
- Staff had knowledge of the person's preferences and wishes in relation to their dietary requirements. The person told us, " [Staff] cook my porridge just how I like it."

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

- Health care needs were recorded in the care plan. This included a fact sheet and information as to managing diagnosed health conditions.
- The provider had systems in place to ensure the person was supported to access healthcare services when required.

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 make specific 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 had systems in place to ensure the service was working within the principals of the MCA.
- The person receiving care was supported to have maximum choice and control of their lives and staff supported them in the least restrictive way.

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 the person was 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

- Staff received equality and diversity training. This meant they knew how to support people whose needs and characteristics were protected under the Equality Act 2010, such as race, sexuality, religion and cultural needs.
- We received positive feedback about the care and support provided. The person told us, "Staff turn up on time, they are excellent, I have nothing to complain about."
- Individual needs, preferences and religious beliefs were recorded, along with the person's likes and dislikes.

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

- The service understood when people needed the support of an advocate. This is someone that can help a person speak up to ensure their voice is heard on issues important to them. The registered manager told us they would refer people to the appropriate advocacy service when needed.
- The person was involved in the development of their care plan and made day to day decisions about their care needs. Feedback received from the person during telephone monitoring stated "I am happy with the care [staff] give me. They have given me a good bath and a good shave."

Respecting and promoting people's privacy, dignity and independence

- The person's dignity and privacy were recognised and recorded. Staff told us how they promoted the person's dignity when supporting with personal care and dressing.
- Staff rotas developed by the registered manager ensured the person received consistent care by regular staff, who knew the person well.
- Signed consent recorded and acknowledged the person's understanding of how information would be stored and shared in line with the General Data Protection Regulation (GDPR).

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 the person'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

- The person had been fully involved in writing their personalised care plan. They were in control of how the support was provided, and any changes to the care plan. The care plan had been signed by the person, which showed their agreement with it.
- The person's care plan included specific guidance for staff on the support required during each visit. The plan reflected the person's preferences and cultural needs, for example, the person preferred a male carer to support with personal care.
- The person and staff had built positive relationships. Staff told us they took time to listen to [person], learning about their background and what was important to them.

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.

- The person's preferred language and methods of communication had been recorded in their care plan. For example, the person preferred to speak to staff face to face or via the telephone.

Improving care quality in response to complaints or concerns

- The service had a policy and procedure in place to manage complaints. At the time of the inspection the registered manager told us there had been no complaints recorded, only compliments. The person told us, "If I was not happy about anything, I would telephone [registered manager], I have nothing to complain about."

End of life care and support

- The person's end of life wishes had been discussed and recorded in their care plan. No end of life care was being delivered at the time of the inspection.

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

- The registered manager ensured the person was involved with their care and staff understood the need to treat the person as an individual and respect their wishes. The registered manager was committed to ensuring the person received person centred care.
- Staff spoke positively of the support they received from the registered manager. They told us they were available by telephone, if they had any concerns, and were available to speak with when they went to the office.

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 their responsibility to keep people informed of actions taken following incidents in line with duty of candour. The duty of candour is a set of specific legal requirements that providers of services must follow when things go wrong with care and treatment.
- There were no incidents recorded at the time of the inspection. The registered manager told us no incidents or accidents had taken place.

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

- Staff supervisions and meetings were used to discuss updates in policies, ongoing support provided to the person and refresh knowledge.
- The registered manager was responsive to feedback given during the inspection and was keen to improve the service.
- There were effective systems in place to monitor the quality and standard of the service. The registered manager was aware of the need for these to develop further as and when the number of people receiving care increased.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- The registered manager undertook quality audits with regards to seeking the person's views via regular telephone monitoring. We saw feedback recorded which said, "Carers are helpful, caring and do what they are supposed to do to ensure I am comfortable in my home."
- Staff told us they felt valued and were encouraged to have their say during meetings and regular

supervision sessions. Staff told us, "[registered manager] listens to our views and provides prompt feedback."

- The registered manager told us they were building links with local authorities and health care professionals to ensure the person's continued needs were met.