

The Flame Lily Healthcare Ltd

House of the Flame Lily

Inspection report

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

House of the Flame Lily provides personal care to people living in their own homes, some people are supported in supported living environments. Support is provided to a variety of people including older and younger people and people who have a learning disability and or who are autistic. There were 19 people using the service at the time of our inspection.

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.

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

We expect health and social care providers to guarantee autistic people and people with a learning disability the choices, dignity, independence and good access to local communities that most people take for granted. Right support, right care, right culture is the statutory guidance which supports CQC to make assessments and judgements about services providing support to people with a learning disability and/or autistic people.

Right Support

People had individual care plans and risk assessments in place that were specific to their needs and they were supported in line with these.

Right care

There were enough staff who were safely recruited to support people. People were protected from potential abuse as there were procedures in place and these were followed. There were procedures in place to ensure people received medicines when needed and infection control procedures were followed.

Right culture

People and their relatives were happy with the care and support they received. Audits were completed so improvements to care could be made when needed. The provider was ensuring lessons were learnt. Staff felt supported by the management team and were listened to.

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

Rating at last inspection

The last rating for this service was good (Published 12 July 2019).

Why we inspected

We received concerns in relation to people's nursing care needs. As a result, we undertook a focused inspection to review the key questions of safe, effective and well-led only.

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

We found no evidence during this inspection that people were at risk of harm from this concern. Please see the safe, effective and well-led sections of this full report.

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.

<p>Is the service safe?</p> <p>The service was safe. Details are in our safe findings below.</p>	<p>Good ●</p>
<p>Is the service well-led?</p> <p>The service was well-led. Details are in our well-led findings below.</p>	<p>Good ●</p>

House of the Flame Lily

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 1 inspector and an Expert by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service. The Expert by Experience made telephone calls to people and relatives.

Service and service type

This service is a domiciliary care agency. It provides personal care to people living in their own houses and flats. It also provides support to people in supported living services. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for supported living; this inspection looked at people's personal care and support.

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 48 hours' notice of the inspection. This was because we needed to be sure that the provider or registered manager would be in the office to support the inspection.

Inspection activity started on 12 December 2023 and finished on 20 December 2023. We visited the

location's office on 14 December 2023.

What we did before the inspection

We reviewed information we had received about the service since our last inspection, including notifications the provider had sent to us, information we had received from the public and the local authority. 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 of this information to plan our inspection.

During the inspection

We spoke with 1 person and 7 relatives. We also spoke with the registered manager and 2 care staff. We looked at the care records for 6 people. We checked the care people received matched the information in their records. We looked at records relating to the management of the service, including audits carried out within the service.

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 good. At this inspection the rating has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People told us they felt safe being supported by staff. One person told us their relation was, "Always safe, they care and are really nice girls." A relative confirmed, "The carers keep my relation safe; they are compassionate people."
- There were procedures in place to identify and report safeguarding concerns. These procedures were followed when needed.
- Staff had received training and understood when people may be at risk of abuse.

Assessing risk, safety monitoring and management

- Individual risks to people were assessed, monitored and reviewed. This included how people, mobilised, support they need with their emotions and any health needs they may have. When people's needs changed, plans were updated to reflect this.
- Environmental risks within people's homes had been considered to ensure staff had the relevant information to keep themselves and people safe.

Staffing and recruitment

- There were enough staff available to support people. People and relatives raised no concerns about staffing levels, some people felt they may benefit from the same care team. However, they were not concerned by this. We spoke with the registered manager who acknowledged this and was working towards ensuring people had a consistent team.
- There was a system in place that ensured the correct number of staff were available for people.
- Staff told us, and we saw they had received the relevant pre-employment checks before they could start working in people's homes, to ensure they were safe to work with people.

Using medicines safely

- People received their medicines when they needed them. Records we reviewed confirmed this. Some people and relatives we spoke with raised concerns about how medicines had been managed previously, they told us this was improving, and we spoke with the registered manager about how they had resolved these concerns.
- Staff administering medicines to people had completed training and their competency was regularly checked to ensure they were safe to do so.

Preventing and controlling infection

- People and relatives raised no concerns around staff practices in relation to infection control. They told us

staff wore personal protective equipment (PPE) in their homes. One relative confirmed it was worn, "For the personal care and around the house." Staff confirmed PPE was available for them.

- Staff had received training and there were infection control procedures in place.

Learning lessons when things go wrong

- The registered manager was able to demonstrate lessons had been learnt when things went wrong. They showed us how they had made changes to medicines when concerns had arisen, this included safer storage for this.

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. At this inspection the rating 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.

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

- Quality checks and audits were completed in the service and were effective in identifying where improvements were needed. These covered areas such as medicines management, care planning and monitoring of call times. When areas of improvement had been identified there was evidence to show what action had been taken.
- Staff understood their roles and responsibilities and there were clear lines of delegation.
- Staff felt supported to by the registered manager. They told us they had the opportunity to attend staff meetings and supervisions.
- The registered manager had notified us about events that had happened within the service when they had identified these.

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

- People and relatives spoke positively about the company and the care they received. One person said, "Helpful and easy to contact." A relative told us, "I am very happy with this company, yes they are well managed."
- Staff worked closely with people to ensure they received good outcomes.

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

- People felt listened to. Feedback was sought from people who used the service. One relative told us, "We have many meetings, so I have the chance to feedback regularly because there have been issues to resolve and I have had a form to complete about my feedback of the care." This information was used to make improvements. The feedback we reviewed was positive.

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

- Duty of candour requirements were understood and met by the registered manager. When needed they worked openly with people and their families to ensure information was shared.

Working in partnership with others

- The service worked closely with other agencies to ensure people received the care they needed. This

included community nurses, physiotherapists and speech and language therapists.