

IANIS Domiciliary Care Ltd

# IANIS- domicilliary care

## 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

IANS- domiciliary care is a domiciliary care agency providing personal care to people living in their own homes. At the time of inspection, 79 people were using the service.

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

People told us people they were happy with the care and support they received because they felt safe and all their needs were met by kind and caring staff.

Risks to people were assessed and regularly reviewed. Staff understood the actions needed to minimise the risk of avoidable harm including the prevention of avoidable infection. Staff had completed safeguarding training and understood their role in identifying and reporting any concerns of potential abuse or poor practice.

People and staff praised the registered manager of the service and agreed that they were approachable, knowledgeable, fair and did their job well. The staff worked well together and supported the registered manager.

Staff were committed to providing a high-quality service. They had undertaken training so that they were skilled and knowledgeable to effectively meet people's needs.

Staff encouraged people to be as independent as possible and respected people's privacy and dignity. Staff knew people well.

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 were given choices about the way in which they were cared for. Staff listened to them and knew their needs well. Care plans contained information about the person's individual support needs and preferences in relation to their care and we found evidence of good outcomes.

Recruitment practices were safe and relevant checks had been completed before staff worked at the service.

People told us that staff were able to meet their needs and were respectful of their individual preferences. People confirmed the service did not miss any care calls and that staff were always on time.

People received care and support from a small group of staff, which provided consistency .

People confirmed they had their medicines administered safely by suitably trained staff.

The registered manager of the service actively sought the views of people and their relatives about the running of the service and they dealt promptly with any concerns that people raised.

The provider had systems in place to monitor and improve the quality and safety of the service provided.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

#### Why we inspected

This inspection was prompted by a review of the information we held about this service.

#### Rating at last inspection

This service was registered with us in July 2018 and this is the first inspection.

#### 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.

# IANS- domicilliary care

## 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 undertaken by one adult social care inspector and an expert by experience. An expert by experience is a person who has experience of using or caring for someone who uses this type of service.

#### Service and service type

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

#### 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.□

#### Notice of inspection

We carried out the inspection visit on 26 April 2022. It was announced. We told the provider two days before our visit that we would be coming. We did this because the registered manager is sometimes out of the office supporting staff or visiting people who use the service. We needed to be sure that they would be available at their office.

#### What we did before inspection

we reviewed the information we held about the home which included statutory notifications and safeguarding alerts The agency was not asked to complete the Provider Information Return (PIR). The PIR is

a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make.

#### During the inspection

We went to the service's office and spoke with the nominated individual and the registered manager. We looked at four care records and three staff records; we also looked at various documents relating to the management of the service. After the inspection visit, we spoke with six people person who used the service and eight relatives. We also spoke to three care workers.

# 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.

People were safe and protected from avoidable harm. Legal requirements were met.

Systems and processes to safeguard people from the risk of abuse; Assessing risk, safety monitoring and management.

- The agency had systems in place to protect people from abuse and avoidable harm. Staff knew what to do and to whom to report if they had any concerns about people's safety.
- People we spoke with, told us they felt safe using the service. Comments included "I definitely feel safe, they are absolutely fantastic, "and "The service is brilliant. The carers do exactly what she needs them to do to keep her safe and they are very well trained."
- A member of staff told us, "We make sure everything is safe especially all the equipment, we get to know people well so we know when something is wrong."
- The staff assessed all potential risks to people and put guidance in place so that the risks were minimised. Risk assessments were developed that maximised people's independence and ability to remain in control of their life.
- Environmental risks and potential hazards within people's homes had been identified and were managed appropriately.

### Staffing and recruitment

- The service followed a recruitment policy so that they were as sure as possible that people were suitable to work at this service. They carried out checks, such as criminal record checks and references.
- People were supported by enough staff to meet their needs. Staffing arrangements provided the flexibility to meet people's changing needs whilst ensuring consistent care.
- People described the staff as reliable and confirmed that they stayed for the agreed length of the visit and only left earlier if asked to do so.
- People told us they knew the staff well and had built good working relationships with them. "We have regular carers three times a day and we know when they are coming "and "They never seem to be rushed, I always feel the carers have the time to spend with me."
- Staff told us their rota was planned and there was enough travel time included between each visit. Staff confirmed if they were running late, the office was contacted so they could let people know. One member of staff told us, "There is always enough staff to cover shifts. If I am running late, I call the office so they can let people know."

### Using medicines safely

- People's medicines support was safe and information relating to the type of support required was clearly documented within people's care plan. A person told us "They help with all my medication and I have never had a problem."
- Medicines Administration Records [MAR] demonstrated people received their medicines as they should.

- Staff had received appropriate medicines training and had their competency assessed to ensure they were skilled to undertake this task safely.

#### Preventing and controlling infection

- The agency had systems in place to make sure that infection was controlled and prevented as far as possible.
- Staff had undertaken training and were fully aware of their responsibilities to take appropriate measures to protect people from the spread of infection.
- Care staff had access to the required PPE including gloves, aprons and masks. Staff also participated in the organised testing regime to minimise the risk of transmission of COVID-19 to people.
- A relative told us "They always wear the COVID things – masks, gloves and aprons, they bring them with them and put them on."

#### Learning lessons when things go wrong

- The service had a system in place to monitor incidents and understood how to use them as learning opportunities to try and prevent future occurrences.
- The registered manager explained that following any incident or accident, a review would be undertaken so that any learning or improvements could be considered to prevent any future re-occurrences.



# 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.

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 preferences and care needs had been recorded and those who used the service and their families were given the opportunity to be involved in the care planning process.
- A relative told us, "They worked with us from the very first meeting. We met at the house and we all discussed what help she would need, and times and they put it all into place."
- The registered manager considered protected characteristics under the Equality Act. For example, they asked people about any religious or cultural needs they had so that they could plan for those needs to be addressed. Staff were aware of equality and diversity issues.

Staff skills, knowledge and experience

- Staff had undertaken training in a range of topics so that they could do their job well.
- A relative told us "I think they are well trained even in small things. They know that mum lip reads so they work closely with her to make sure she understands."
- Staff received an induction and newly employed staff were given the opportunity to shadow a more experienced member of staff depending on their level of experience, competence and professional qualifications already attained.
- All staff were supported to complete the 'Care Certificate'. The 'Care Certificate' is a set of standards that social care and health workers should adhere to in their daily working life.
- Supervisions were happening to allow staff the time to express their views and reflect on their practice. These comprised of face-to-face meetings and 'spot check visits.' The latter enables the provider's representative to observe the member of staff as they go about their duties and check they are meeting the organisation's standards and expectations
- Staff felt very well supported. One staff told us "We are very well supported the manager is very good and always available to us."

Supporting people to eat and drink enough with choice of a balanced diet

- People were encouraged to get involved in decisions about what they wanted to eat and drink.
- Staff demonstrated a good understanding of how to ensure people had adequate nutrition and dietary preferences were set out in people's care plans.

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

- The service documented people's health conditions in the care plan and carried out observations during

each visit to check for improvement or deterioration.

- People's care plan had details of their GP and any other health professional's involvement.
- People had access to health professionals as required. If staff were concerned about a person's health and wellbeing, they would relay these concerns to the provider and registered manager for escalation and action
- Information available showed people experienced positive outcomes regarding their health and wellbeing.

Ensuring consent to care and treatment in line with law and guidance.

The Mental Capacity Act 2005 (MCA) provides a legal framework for making 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 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 them of their liberty. We checked whether the service was working within the principles of the MCA.

- Staff knew about people's individual capacity to make decisions and understood their responsibilities for supporting people to make their own decisions.
- People told us they were encouraged to make decisions for themselves and felt involved in making choices wherever possible.
- Staff confirmed that they had undertaken training in relation to the MCA.

# 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.

People were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; equality and diversity

- People told us that staff were kind and caring. One person told us, "The carers really do care – he had a (medical procedure) and as soon as they came in, they asked me how he was and how it had all gone "and "The girls are lovely he is really happy with them. He will chat and they listen and engage with him."
- Staff we spoke with were knowledgeable about people's preferences, personalities and things that were important to them. This indicated staff had caring relationships with the people they looked after.
- People told us their individual needs and wishes in respect of their values, culture and religion were respected.

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

- People and their relatives confirmed they had been involved in decisions about their care and support and this had been used to develop their support plan.
- People and their relatives had been given the opportunity to provide feedback about the service through the undertaking of reviews and telephone calls.
- Staff told us that they had enough time to engage with people to make sure that each person had everything they needed, and that travel time was kept to a minimum.
- People who used the service confirmed that they usually had their needs met by a small group of regular staff and that they always knew who was going to be visiting them

Respecting and promoting people's privacy, dignity and independence

- Respect for privacy and dignity was at the heart of the service's culture and values.
- People confirmed they were supported by staff to be as independent as possible and were actively encouraged to do as much as they could for themselves according to their individual abilities and strengths..
- One person told us, "They let me do as much as I can myself. If I am trying to do something they will stand back. For example, yesterday I took off my PJ top by myself but he (the carer) would have helped me if I had needed him to."
- A staff member told us "I give people a running commentary about what I am doing so they know what I am doing next and encouraged all my clients to do as much for themselves as possible." Another staff member told us "I always make people aware of what I'm going to do and always ask permission."
- People's personal information was kept secure and staff understood the importance of maintaining secure documents and care records to ensure people's confidentiality was maintained.
- People had no concerns about the way staff treated them. Staff described ways they protected people's privacy and dignity, such as knocking on doors and closing the curtains.

# 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.

People's needs were met through good organisation and delivery.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control

- Care plans detailed clearly how the person wanted their needs and preferences met.
- People told us they were happy with the care and support provided.
- Staff confirmed they checked people were happy and had everything they needed before they left them.
- Each person's plan was regularly reviewed and updated to reflect their changing needs. People confirmed that staff either knew how they liked things to be done or they felt very able to guide staff in how they wanted things.
- When people's needs changed this was quickly identified and prompt, appropriate action was taken to ensure people's wellbeing was protected.

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 needs were assessed, and this was recorded in care plans, so staff knew the preferred way to communicate with people.

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

- Staff explained the importance of developing and maintaining relationships with people they supported to avoid social isolation.

Improving care quality in response to complaints or concerns

- People were given information about the service and how to complain when they first started to receive support from the service.
- People told us they knew how to complain if they needed to and felt confident that they would be listened to.
- The complaints procedure explained how to make a complaint and set out how people could expect any concerns or complaints to be dealt with.
- The service had not received any formal complaints to date.
- A person told us "I have no complaints at all, I would recommend them"

#### End of life care and support

- At the time of the inspection end of life care was not provided. Care plans documented whether people wanted to be resuscitated in the event of an emergency.

# 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;

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; Continuous learning and improving care

- People using the service, relatives and staff were complimentary regarding the registered manager and said the service was well managed. Comments included, "The carers I've got are absolutely brilliant and I would recommend the agency to anyone "and "I think that they are very well organised (carers, timing, PPE) and the managers easy to talk to" and "It's an excellent service, there is nothing to improve."
- The quality assurance arrangements monitored the experience of people being supported and how risks to people using the service and the quality of the service were managed. This information was used to help the registered manager drive improvement, including the monitoring potential trends and lessons learned.

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

- The registered manager understood the importance of their role and responsibilities. They demonstrated a strong commitment to providing good care for people using the service, providing support to staff employed within the service and ensuring compliance with regulatory requirements was achieved.
- Staff were positive about working at the service and told us they were supported by the registered manager. Comments from staff included "I really enjoy working for this company, the work is so rewarding and I feel supported and valued at all times." And "The manager is just perfect, she looks after the staff as well as the clients."

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

- Effective arrangements were in place for gathering people's views of the service they received and those of people acting on their behalf.
- Staff meetings were held to give the management team and staff the opportunity to express their views and opinions on the day-to-day running of the service
- People confirmed the organisation completed 'spot checks' on their staff to ensure they were following their policies and procedures and providing appropriate care and support.

Working in partnership with others

- Information showed the service worked closely with others, for example, the Local Authority and

healthcare professionals and services to support the delivery of care provision.