

Haivering Care Services Ltd

# Haivering Care Services Ltd

## Inspection report

Hub 1-77a, London East-uk  
Yewtree Avenue  
Dagenham  
RM10 7FN

Date of inspection visit:  
24 September 2021

Date of publication:  
15 October 2021

### 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

Havering Care Service is a domiciliary care service that provides care and support to people living in a supported living setting, so that they can live as independently as possible. 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. Four people were living at the supported living site who needed support with personal care.

### People's experience of using this service

Risks were identified and were assessed to ensure people received safe care. Medicines were being managed safely. Pre-employment checks had been carried out to ensure staff were suitable to support people. People told us they felt safe when receiving support from staff and staff were aware of how to safeguard people from abuse. There were appropriate numbers of staff to support people when required. Systems were in place to prevent and minimise the spread of infections at the supported living service.

Staff had completed essential training to perform their roles effectively and felt supported in their roles. 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 had choices during mealtimes and were supported to access healthcare services.

People received care from staff who were caring and had a good relationship with them. Staff respected people's privacy and dignity. People were encouraged to be independent and to carry out tasks without support.

People received person-centred care. Care plans had been reviewed regularly to ensure they were accurate. Staff supported people with activities. Systems were in place to manage complaints and people's communication needs were met.

Quality assurance systems were in place to identify shortfalls to ensure there was a culture of continuous improvement. Feedback was sought from people and staff and this was used to make improvements to the service.

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

### Rating at last inspection

This service was registered with us on 27 April 2020 and this was the first inspection.

### Why we inspected

This was a planned inspection based on when the service registered with us.

### 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.

# Havering Care Services 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 one inspector.

#### Service and service type

This service provides care and support to people living in a supported living setting, so that they can live as independently as possible. 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.

The service had a registered manager who was a director of the provider organisation. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

#### Notice of inspection

We announced the inspection 72 hours prior to the inspection. This was because we wanted to make sure someone would be available to support us with the inspection.

#### What we did before the inspection

We reviewed the information we already held about the service. This included their registration report and notifications. A notification is information about important events, which the provider is required to tell us about by law. We used all of this information to plan our inspection.

During the inspection.

During the inspection, we visited the providers head office and also the supported living site. We spoke with two people who used the service, the registered manager, quality assurance manager and two care staff. We reviewed documents and records that related to people's care and the management of the service. We reviewed two care plans, which included risk assessments and four staff files, which included pre-employment checks. We looked at other documents such as medicine management and quality assurance records

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at policies and audit records. We also sought feedback from professionals and two relatives of people that used the service.

# 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.

### Assessing risk, safety monitoring and management

- Sufficient risk assessments were in place to ensure people received safe care.
- Risk assessments had been completed in relation to people's circumstances and health conditions. The assessments included the nature of the risk and control measures to minimise the risk. There were risk assessments in place for skin complications, falls and when being supported in the community.
- We observed the risk assessments were being complied with to ensure people were safe and in good health. Staff had a good degree of understanding of people's needs and were aware of risks to people.

### Using medicines safely

- Medicines were being managed safely.
- Medicine Administration Records (MAR) showed that medicines were administered as prescribed.
- Medicines when needed were administered when required and protocols were in place to ensure this was administered safely.
- Staff had been trained in medicines management and had received a competency assessment to check their understanding of medicine.
- Shortfalls were identified as part of medicine audits and action was taken to ensure risks were minimised.

### Learning lessons when things go wrong

- There was a system to learn lessons following incidents. Records had been kept of incidents and relevant action was taken to ensure people were safe.
- The registered manager was aware of how to manage accidents and incidents and told us these would always be investigated and analysed to learn from lessons to minimise the risk of re-occurrence.

### Systems and processes to safeguard people from the risk of abuse

- People were protected from the risk of abuse. A person told us, "Yes, I do feel safe with staff." A relative commented, "[Person] is very happy, has settled well. [Person] has been well supported."
- We observed that people were comfortable at the supported living site and had a good relationship with staff and the registered manager.
- There were processes in place to minimise the risk of abuse. Staff had been trained in safeguarding and understood how to safeguard people from harm. A safeguarding and whistleblowing policy was in place.

### Staffing and recruitment

- There were enough staff to support people safely at the supported living site. A staff member told us, "There is enough staff to support people." We observed staff were available when people wanted them and

they responded to people's requests promptly. Staff spent time with people engaging in personal conversations and activities and knew people well.

- Records showed relevant pre-employment checks, such as criminal record checks, employment references and proof of the person's identity had been carried out. However, we found character references had not been sought in accordance to the provider's recruitment policy instead two employment references were sought. We fed this back to the registered manager who informed she would ensure character reference were sought at all times.

#### Preventing and controlling infection

- Systems were in place to reduce the risk and spread of infection.
- Risk assessments had been completed for people and staff to minimise the risks associated with COVID19.
- Personal Protective Equipment's was available and we observed staff used them when needed.
- A cleaning schedule was in place to ensure the supported living premises was regularly cleaned and disinfected. Our observations confirmed the premises were clean and tidy. A staff member told us, "The home is always clean and tidy. We have a cleaning schedule we stick to. The people like it clean as well, they help us."



# 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 people's outcomes were consistently good, and people's feedback confirmed this.

Staff support: induction, training, skills and experience

- Staff had been trained and supported to perform their roles effectively.
- Staff had completed essential training and refresher courses to perform their roles effectively. A training matrix was in place, which ensured the registered manager had oversight of training and when refreshers were due. A staff member told us, "I got a really good induction and really good training."
- Regular supervisions and appraisals had not been carried out for most staff. The registered manager told us that this was due to opening the service during the COVID19 pandemic and ensuring people were settled at the site therefore it was difficult to carry out supervisions. We were shown a supervision matrix, which showed that supervision had been booked and this was due to be carried out imminently.
- Staff told us they felt supported. A staff member said, "[Registered manager] is really good, really nice. She supports me with anything. She is here when I need it."

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

- Systems were in place to assess people's needs and choices.
- Pre-assessments had been carried out in detail to ensure the service was able to provide person-centred support to people.
- Regular reviews had been carried out with people to ensure people received support in accordance with their current circumstances. People were included as part of these reviews and decisions to ensure they received the care they wanted. A person told us, "Yes, I get to do what I want." This meant that people's needs, and choices were being assessed comprehensively to achieve effective outcomes for their care.

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

- People were supported to eat and drink and supported to maintain a balanced diet.
- People were involved in choosing their food and planning their meals. A person told us, "We have choices, I can eat what I want really." A staff member told us, "People get choices on what they would like to have, we try to encourage them to eat something healthy and they like it."
- Care plans included the level of support people required with meals or drinks and their likes and dislikes. People's weights were monitored to ensure they were in good health.
- We observed people were supported in the kitchen when required. Assessments had also been completed to ensure people can cook safely in the supported living premises.

Supporting people to live healthier lives, access healthcare services and support

- People had access to health services to ensure they were in the best of health.

- Care records included the contact details of people's GP, so staff could contact them if they had concerns about a person's health. Staff knew when people were not well and what action to take. A compliment from a professional included, "All appointments are kept to and managed well and there is a proactivity surrounding the patients care that isn't common place in this setting."
- Records showed that people had been supported to access a number of health of services. A relative told us, "[Person] health and wellbeing has improved since [person] has moved there. [Person] has a complex medical condition; [they] have achieved everything [they] need too."
- An oral health care plan was in place on how to support people with oral health.

#### 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. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS). We checked whether the service was working within the principles of the MCA.

- Systems were in place to obtain consent from people to provide care and support.
- Staff had received training on the MCA and were aware of the principles of the act. DoLS applications had been made for people whose liberty was being deprived to ensure their safety.
- Staff told us that they always requested people's consent before doing any tasks. We observed that staff asked for people's consent before supporting them, such as with activities. A staff member told us, "We always ask them for consent, and tell them we will do something with them."

#### Adapting service, design, decoration to meet people's needs

- The supported living premises was adapted and designed to meet people's needs.
- People had their own rooms. We observed people's rooms were decorated with their preferences. This meant that people's preferences were taken into account and their needs were being met.
- There was a communal and dining area for people to spend time with each other and staff. There was also a big garden, which a person told us they maintained. We saw that people felt at home and had a good rapport with each other and staff.

# 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 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 were treated with kindness and respect. A person told us, "I like the staff here." Another person commented, "The staff are all kind and nice." A relative told us, "I met few members of staff. They are caring and kind. There are no alarm bells at all." We observed that there was a friendly and positive atmosphere at the supported living site and staff were kind to people.
- People were protected from discrimination within the service. Staff understood that racism, homophobia, transphobia or ageism were forms of abuse. They told us people should not be discriminated against because of their race, gender, age and sexual orientation and all people were treated equally.

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

- People were involved in decisions about their care. Care plans were signed by people to ensure they agreed with the support they will receive.
- Staff told us they always encouraged people to make decisions for themselves while being supported, such as with dressing and personal care.
- We observed that people were able to make decisions by themselves such as with activities. This was reflected in their care plans, which included their preferences and how they wanted to be supported. Reviews took place with people to ensure people were happy with their care and if they wanted further support.

Respecting and promoting people's privacy, dignity and independence

- People's privacy and dignity was respected.
- We observed that people were able to spend time in their room without being disturbed. We did not see anything that would have impacted on a person's dignity negatively.
- Staff gave us examples of how they maintained people's dignity and privacy, not just in relation to personal care but also in relation to sharing personal information. Staff understood that personal information should not be shared with others and that maintaining people's privacy when supporting with personal care was vital in protecting their dignity.
- Staff encouraged people to be independent. Care plans included information on tasks people completed independently. We observed people carried out tasks independently such as getting their shopping out and completing activities.

# 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 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 received personalised support, which was in accordance with their preferences and choices.
- Care plans were person-centred and included information on how to support people. People were involved with planning their care and this was reviewed regularly to ensure people received personalised support. A staff member told us, "The care plans are really helpful, they tell us what we need to know about the client." A compliment from a professional to the registered manager included, "Your person-centred approach is not just a buzz phrase, you are living this in the work you do."
- Care plans included information on people's background history such as their upbringing and family. People's daily routines were also included to ensure staff were aware of how people liked to live their life.

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 with activities. When we visited the supported living premises, people had been out and came back from a fun day out bowling. They told us in excitement how much fun they had and the person who won. A staff member told us, "Activities, they love activities. Everyday we do something new, they really love it."
- People were supported to develop and maintain relationships. People had partners and care plans reflected this and included information how they could be supported.
- Care plans included people's interests and what they enjoyed doing. The service ensured that people preferences was catered for and also supported people to go to college.

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 ability to communicate was recorded in their communication care plan, to help ensure their communication needs were met. The plan included information on how to communicate with people effectively. We observed that staff knew people well and communicated with them in a way that was respectful and met their communication needs. Communication aids were available to support communication with people and staff had been trained in Makaton to communicate with people effectively.

Improving care quality in response to complaints or concerns

- The service had a complaints procedure. We were told by the registered manager that no complaints had been received since the service registered with the CQC.
- The registered manager told us people were made aware of the complaints process and were aware of how to make complaints. Staff were able to tell us how to manage complaints.

#### End of Life care and support

- The service did not support people with end of life care. However, people preferences with end of life care and funeral were recorded in their care plans to ensure their needs could be met.

# 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

- Quality assurance systems were in place to ensure there was a culture of continuous improvement.
- Quarterly audits were carried out on all aspects of the services, which included care plans, risk assessments and staff files. Monthly audits were carried out on medicines to ensure medicine was being managed safely.
- Staff had the information they needed to provide safe and effective care. We saw staff had access to detailed person-centred care plans to facilitate them in providing care to people the way they preferred.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Continuous learning and improving care

- Staff meetings were held to share information. The meetings kept staff updated with any changes in the service and allowed them to discuss any issues or areas for improvement as a team.
- People's beliefs and background were recorded and staff were aware of how to support people considering their equality characteristics.
- The management team told us they obtained feedback from staff and people about the service through surveys. Records confirmed this and the results of the surveys were positive.
- Meetings were also held with people and records of minutes showed people cleanliness, privacy and preferences with meals.

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 that it was their legal responsibility to notify the Care Quality Commission of any allegations of abuse, serious injuries or any serious events that may stop the running of the service and be open and transparent to people should something go wrong.

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

- The registered manager was clear about their role and understood risks and regulatory requirements. They told us once staff were employed, training and induction would ensure staff were clear about their roles and regulatory requirements to deliver quality in their performance.
- Staff were clear about their roles and were positive about the management of the service. One staff member told us, "I absolutely love it here. I like it here because I am supported well and I love the clients.

[Registered manager] is brilliant."

- People, relatives and professionals were positive about the service. A person told us, "I like it a lot here." A relative commented, "They have excelled in looking after them [people]. They are very hard-working staff." A professional told us, "Found (Registered manager) personally to be very proactive and accommodating to work with. She was also really client focused and got to know the (people) quickly."

Working in partnership with others:

- The service worked in partnership with professionals to ensure people were in good health.
- The registered manager told us they worked with a number of professionals to ensure people were in good health. She gave us an example of good partnership working to support one person whose mobility improved considerably through support and working with professionals.
- There were positive comments from professionals. One professional told us, "I have no concerns, provision is appropriate, staff and manager are well trained for the care and support they are providing so I will recommend the provision that as good." Another professional commented, "When reviewing the clients after their move, I found the staff at large to be really engaging with the clients and encouraging them to develop in skills I hadn't seen before, all the clients seem really happy at the time."