

## Solutions Embassy Limited

# Solutions Embassy Limited

### Inspection report

Thames Innovation Centre  
2 Veridion Way  
Erith  
Kent  
DA18 4AL

Tel: 02083201008

Website: [www.solutionsembassy.co.uk](http://www.solutionsembassy.co.uk)

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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

Solutions Embassy Limited is a domiciliary care agency located within the Borough of Bexley. It provides personal care and support to adults living within their own homes. Not everyone using Solutions Embassy Limited may receive a regulated activity. CQC only inspects the service being received by people provided with personal care; that 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 our inspection the service was providing support to four people.

### People's experience of using this service

Relatives spoke positively about the registered manager, staff and the service they received. There were safeguarding and whistle blowing policies and procedures in place and staff had a clear understanding of them. Recruitment checks took place before staff started work and there were enough staff to meet people's needs appropriately. Risks to people were assessed to ensure their needs were safely met. Systems were in place that ensured medicines were managed and administered safely. Procedures were in place to reduce the risk of infections and staff had enough personal protective equipment.

Assessments of people's needs and wishes were conducted before they started using the service. People received support to maintain good health and access services where required. People were supported to maintain a healthy diet where this was part of their plan of care. People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service supported this practice. People were supported by staff who were kind and respectful. Staff understood people's diverse needs and supported them appropriately. People's communication needs were assessed and met. People knew how to make a complaint if they were unhappy with the service.

There were systems in place that enabled good oversight of the management of the service and to monitor the quality of care that people received. The service worked in partnership with health and social care professionals. The provider took people's views into account and used their feedback to help drive service improvements.

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 was the first inspection of the service since the provider registered with the CQC.

### Why we inspected

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

### Follow up

We will continue to monitor intelligence we receive about the service until we return to visit as per our re-inspection programme. If any concerning information is received, 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.

# Solutions Embassy Limited

## **Detailed findings**

### Background to this 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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

#### Inspection team

The inspection was carried out by one inspector.

#### Service and service type

Solutions Embassy Limited is a domiciliary care agency. It provides personal care and support to people with varying needs living within their own homes. At the time of our inspection there was a registered manager in place. 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

This inspection was announced. We gave the service 48 hours' notice of the inspection to ensure the registered manager would be present and available to speak with.

#### What we did before the inspection

We checked the information we had about the service including notifications they had sent since registering with us. A notification is information about incidents or events that providers are required to inform us about. We asked the local authority commissioning and safeguarding teams for any information they had about the service. 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.

#### During the inspection

We met and spoke with the registered manager. Following the office visit we spoke with two care staff by telephone and two relatives of people using the service to seek their feedback on the service provided. We

reviewed a range of records including two care plans and care records and two staff recruitment and training records. We also reviewed records used in managing the service for example, policies and procedures, monitoring tools and audits.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at records related to the management of 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 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

- There were systems in place to protect people from the risk of abuse or harm.
- Relatives spoke positively about staff and the support they provided. Comments included, "They [staff] are very caring", and, "The carers are very kind, we have no concerns about being safe."
- There were safeguarding policies and procedures in place to help keep people safe. Staff had received safeguarding training and were aware of their responsibilities to report and respond to concerns. Staff were aware of the whistleblowing policy and how to report issues of poor practice.
- There were systems in place to oversee any learning from safeguarding and accidents and incidents.

Assessing risk, safety monitoring and management

- People were kept safe from the risk of avoidable harm.
- Risks associated with the care people received were assessed robustly. Staff had good information and guidance documented within people's care plan's to help them mitigate identified risks when supporting people.
- Risks to people were reviewed to ensure any changes to their needs were safely managed and met.
- Staff knew people well and understood their needs and risks. One member of staff commented, "We get time to spend with people. We get to know them well and how best to help them."

Learning lessons when things go wrong

- There were systems in place to monitor and support learning from accidents, incidents and safeguarding.
- Staff understood the importance of reporting and recording accidents and incidents and how best to respond.

Staffing and recruitment

- There were enough staff employed and effectively deployed to meet people's needs in a timely manner.
- Staff told us they had enough time to travel to people's homes and enough time to support people how they wished and needed.
- There were systems in place to identify if staff were late or there were problems, this allowed for issues to be remedied. These systems included spot checks and telephone monitoring. The registered manager told us they had also purchased an Electronic Call Monitoring system (ECM) which was hoped to be operational soon. An ECM system enables office staff to monitor care staff working within the community effectively ensuring people receive their care safely and when required.
- Staff were safely recruited and pre-employment checks were completed before new staff started work.

Checks included employment history, identification, references, right to work in the United Kingdom and criminal records checks through the Disclosure and Barring Service (DBS). The DBS helps employers make safe recruitment decisions and helps prevent unsuitable people from working with people who use care services.

#### Using medicines safely

- At the time of our inspection there was no one using the service that required support with administering their medicines. However, we saw there were systems in place that would ensure people's medicines would be managed safely if required.
- We saw staff had completed up to date medicines training to ensure medicines were managed safely.

#### Preventing and controlling infection

- People were protected from the risk of infection.
- Personal protective equipment (PPE) such as facemasks, aprons and gloves were made available to staff.
- Staff had completed training on infection control and COVID-19.
- Staff supported people to understand how to reduce the risk of infection and helped them to maintain good personal hygiene and their home environment where required.



# 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 service. This key question has been rated 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 before they began to use the service. This ensured the service could meet their needs. One relative told us, "They [staff] came and assessed [relatives] needs and regularly check to make sure we are happy with everything."
- People's diverse needs were assessed and supported. Assessments included people's needs relating to any protected characteristics in line with the Equality Act. This included age, gender, disability, sexual orientation and race.

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

- People's nutrition and hydration needs and preferences were met and supported by staff where this was part of their plan of care.
- Care plans documented individual nutritional needs, meal preparation, known allergies or risks when eating such as choking and any special dietary requirements.
- Staff received training on safe food handling and were aware of people's dietary needs, risks and preferences.

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

- People received support to access services when required to maintain good health and well-being.
- We saw the service worked in partnership with health and social care professionals to ensure people's physical and mental well-being. For example, GP's and local social and community clubs.
- Staff monitored people's well-being and documented any issues or concerns taking appropriate actions where required.

Staff support: induction, training, skills and experience

- Staff had the knowledge and skills to meet people's needs. Relatives told us they felt staff were well trained. One relative said, "We have a regular carer that comes and they are really caring. They totally understand [relatives] needs."
- Staff were supported and trained through an induction programme, regular supervision and support and on-going programme of training.
- Staff were knowledgeable about the people they supported and told us they received training to meet their needs and the needs of the people they supported. Training provided covered areas such as health and safety, moving and handling and equality and diversity.

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. 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.

- People were consulted and supported to make choices and decisions for themselves. Staff promoted people's rights and worked within the principles of the MCA to ensure these were upheld. Staff received training on the MCA and understood the principles and application of these in practice.
- Care plans documented people's choices and decisions made about their care.

# 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 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; respecting equality and diversity

- People were supported by staff who were kind and compassionate. Relatives told us staff treated them and their loved ones with kindness and respect. One relative commented, "Our regular carer is really caring and kind, we couldn't ask for better."
- Staff had built kind and respectful relationships with people and their relatives and understood people's individual and diverse needs. Staff were aware of the importance of working within the principles of the Equality Act. This means supporting people to meet their needs in relation to age, race, disability, sexuality and religion.

Respecting and promoting people's privacy, dignity and independence

- People were supported by staff that promoted their independence and treated them with dignity.
- Staff knew how to support and promote people's privacy and dignity and were aware of the importance of maintaining confidentiality. Staff provided examples of where individuals dignity and independence was promoted, for example, supporting people to access community services and social clubs.

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

- People and their relatives where appropriate, were involved in making decisions and choices about their care and support. Relatives we spoke with told us they were provided with information about the service and decisions made were respected by staff.
- People's views and choices were sought and documented within their plan of care. Care plans were reviewed on a regular basis to ensure individual needs and wishes were met and respected.

# 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 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; end of life care and support

- People's individual care needs were holistically planned, documented and delivered to meet their wishes.
- Care plans were robust and person centred, documenting individuals physical, emotional and mental health needs and things and people that are important to them. Social, cultural and religious preferences were documented, respected and supported by staff where required. Staff were knowledgeable about people's diverse needs and how best to support them. Staff reviewed and maintained care records on a regular basis to ensure people received responsive care and support as agreed and planned for.
- At the time of our inspection no one required end of life care and support. However, care plans allowed for people to document their end of life care wishes if they chose. The registered manager told us that if required, they would work in partnership with health and social care professionals to ensure people's end of life care needs and wishes were met.

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 and sensory needs were identified, assessed and documented in their plan of care to ensure staff had up to date relevant information on how best to communicate and support them.
- Staff understood the importance of effective communication and differing communication methods. The service produced information and care plans in different formats that met people's needs. For example, easy to read, pictorial or large print information and care plan documents.

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 meet their social interests and needs where this formed part of their plan of care.
- Care plans documented individual social needs, interests, hobbies, social networks and any support required from staff to enable them to support people to meet those needs. For example, support in using modes of transport or when attending social activities.

Improving care quality in response to complaints or concerns.

- There were robust systems in place to manage and respond to complaints appropriately in line with the

providers policy.

- Relatives told us they were aware of the complaints procedure and how to contact the manager if required. One relative commented, "We are very happy with the care and have no complaints. I do know how to make a complaint if I needed."
- Systems were in place to monitor and investigate formal complaints. This ensured the service responded to them appropriately and timely.

# 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 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.

Planning and promoting person-centred, high-quality care and support with openness; how the provider understands and acts on the duty of candour responsibility

- People received personalised care from staff who had the knowledge and skills to carry out their roles and responsibilities well. The registered manager was aware of their responsibilities under the Duty of Candour and acted with openness and transparency during our inspection. The Duty of Candour is a regulation that all providers must adhere to.
- The registered manager was actively involved in the day to day running of the service working with people to meet their needs. This promoted a well-led person centred service.
- Staff told us the manager was very supportive and training provided was effective which enabled them to do their job well. One member of staff commented, "I had a good induction and lots of training. The manager is always available when we need her, I feel very supported."
- Relatives spoke positively about the manager, staff and how the service was run. One relative commented, "We are very happy with the care, the carers are very kind. We have had other services but this is the best, its run very well."

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

- There were systems in place to seek the views of people, relatives and staff through accessible means. These included regular reviews of care, staff spot checks, telephone monitoring, satisfaction surveys and staff meetings and supervisions. The registered manager told us they had recently conducted a service user survey and were analysing the results which appeared very positive.
- Staff told us they had opportunities to feedback about the service and to share ideas at staff meetings that were regularly held at the office location.

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

- The service had a registered manager in post. They were aware of their registration requirements with CQC and the legal requirement to display their CQC rating. The registered manager understood the importance of quality monitoring and continuous learning and improvement within the service.
- There were systems in place to monitor the quality and safety of the service on a regular basis. Checks and audits monitored areas such as, staff recruitment and training, care plans and records, safeguarding, medicines management and accidents and incidents.

#### Working in partnership with others

- The service worked effectively with health and social care professionals to ensure people received good holistic care. Records showed that staff worked alongside and communicated with professionals such as, GP's and specialised community services when required to meet people's needs appropriately.