

Enabled Health Ltd

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Inspection report

Biz Space, Unit 4, Addington Business Centre
Vulcan Way, New Addington
Croydon
CR0 9UG

Tel: 01689846216

Website: www.enabledhealth.org

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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:

Enabled Healthcare Ltd is a domiciliary care agency. It provides personal care to people living in their own houses and flats. At the present time it provides a service for two people. The Care Quality Commission (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:

People and their relatives told us they felt safe and were protected from the risk of abuse. The service had safeguarding procedures in place that staff were well aware of. Staff received regular training on safeguarding people. Risk assessments and risk management strategies were in place as part of the assessment and support planning process. This meant risks to people and to staff were minimised.

There were robust recruitment practices in place and sufficient staff levels to meet people's needs.

The registered manager told us at the time of this inspection staff did not administer medicines to anybody. People's relatives undertook the responsibility for this. However, the registered manager said all staff received appropriate training. This together with appropriate supervision and monitoring meant when required people would receive their medicines safely and staff had clear guidance to follow.

The provider ensured that all their staff received appropriate training and support to understand and to manage COVID-19. This included best practice for infection control and the use of PPE. The provider made appropriate support services available to staff in order to support their mental wellbeing through the pandemic and if they became unwell and when they returned to work.

There were systems in place to ensure that accidents, incidents and risks were appropriately recorded and included details of preventive strategies used by the service to reduce the likelihood of events occurring in the future.

Assessments were thorough and expected outcomes were identified. Support plans were reviewed and updated as people's needs changed. People were supported by staff who knew them well and were able to identify people's likes and dislikes. They were supported to eat and drink according to their dietary requirements taking into consideration people's preferences.

Staff received comprehensive training in all the necessary areas of their work. Staff had regular supervision and they told us they felt supported.

People told us they were treated with dignity and respect. This was echoed by people's relatives. They told us staff had the right skills to deliver appropriate care and support. Staff were able to communicate with people well. Information was provided in various formats where required.

People and their relatives were confident that any feedback whether this was positive or negative would be addressed appropriately and resolved by the registered manager. They told us the registered manager welcomed feedback and they said complaints were dealt with swiftly and professionally.

People told us they thought the service was well led and that they were very happy with the support they received.

There were effective systems in place to monitor the quality of the service provided to people which ensured good governance. Technology was used effectively by the provider to ensure people were informed promptly about potentially missed or late calls. The service had systems in place to notify the appropriate authorities where concerns were identified. The culture of the service was positive, open and person centred.

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

Rating at last inspection and update:

This service was registered with us on the 4th October 2019 and this was the first inspection.

Why we inspected:

This inspection was prompted because the service had not received a comprehensive inspection since they registered with us October 2019.

Follow up:

We will continue to monitor information we receive about the service using our monitoring systems and we will re-inspect when indicated.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe? The service was safe.	Good ●
Is the service effective? The service was effective.	Good ●
Is the service caring? The service was caring.	Good ●
Is the service responsive? The service was responsive.	Good ●
Is the service well-led? The service was well-led.	Good ●

Enabled Health Limited

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

This inspection was completed by one inspector.

Service and service type

This service is a domiciliary care agency. It provides personal care to people living in their own houses and flats. At the time of this inspection two people were receiving support from this provider. 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

This inspection was announced. 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

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. We used this information to plan our inspection.

During the inspection

We visited the offices of this service. We spoke with the registered manager. We inspected two care files and four staff files. We also reviewed a variety of records relating to the management of the service.

After the inspection

We spoke with two people who used the service and two relatives on the telephone about their experience of the care provided. We also spoke with a community nurse on the telephone. We asked the local authority for feedback but we did not receive any. We continued to seek clarification from the provider to validate evidence found.

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

- People's needs were assessed together with any potential risks in the provision of their care. Risk assessments contained information and guidance for staff to follow to reduce the risks identified such as with personal care and moving and handling.

Preventing and controlling infection

- People and their relatives told us staff followed appropriate infection control procedures in order to help keep them safe. The registered manager confirmed that there were rigorous infection control procedures in place that staff had followed.
- We were assured that the provider was accessing testing for staff.
- The registered manager carried out regular checks of infection control practices to ensure staff followed current guidance and had access to a regular supply of PPE.

Systems and processes to safeguard people from the risk of abuse

- People and their relatives said they felt safe with staff. People told us staff supported them well and were careful to meet their needs. One person said, "I am supported by regular staff. They do everything I need them to do and they do it well."
- Appropriate safeguarding policies and procedures were in place to protect people from the potential risk of abuse. The registered manager and staff were able to describe their responsibilities in this respect.
- Staff received training for safeguarding adults that they told us helped keep them up to speed with current best practice and legislation.

Staffing and recruitment

- There were comprehensive recruitment checks carried out before staff started working for the agency that helped to ensure people were supported by suitably skilled and experienced staff. These checks included references from previous employers, appropriate identity checks and Disclosure and Barring Service [DBS] checks.
- There were enough staff to support people safely and the registered manager also worked as a care worker when necessary.
- People told us that staff maintained good timekeeping and stayed for the agreed length of time. One person said, "Staff are always on time. I have the same staff and they do everything that's been agreed in my care plan. If I ask for something else they can usually help me with it."

Using medicines safely

- The registered manager told us that at the time of this inspection staff were not required to administer medicines to anyone as people's families or relatives did this for them. We were told however that staff had received training with the safe administration of medicines. This meant that when necessary people would receive their medicines safely.

Learning lessons when things go wrong

- No accidents or incidents had occurred over the last year. The registered manager told us that there was a review system in place where discussions were held with staff so if there were to be an incident, lessons could be learnt to prevent similar incidents wherever possible.

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.

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

- An initial assessment of people's needs was carried out together with the people and their relatives before agreeing a package of care. The information obtained through the assessment process helped the provider plan and deliver support to people, taking into consideration their health needs and the goals they wished to achieve.
- The registered manager regularly reviewed people's changing needs with people and their relatives and updated care plans and risk assessments accordingly.

Staff support: induction, training, skills and experience

- Staff understood their roles and felt confident with the training they received. One member of staff said, "It helps me to do my job better and with more confidence."
- Training covered topics such as first aid, medication, COVID-19, food safety, manual handling, dementia, infection control, NVQ and the Care Certificate, mental capacity and safeguarding.
- Staff also completed the Care Certificate and National Vocational Qualification [NVQ] training if they had not already gained these qualifications. This meant people were being supported by staff who were trained in nationally recognised care standards.
- The registered manager carried out regular supervision with staff. Staff told us they felt supported in their work.

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

- Staff had the necessary training to support people to maintain a balanced diet. One member of staff said, "Where people have specific dietary needs, I follow the guidance provided by the GP and the Speech and Language Team."
- A relative told us, "My [family member's] care plan details their food preferences and they are very happy with their meals."

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

- Staff told us people's care plans were helpful in providing all the information staff needed about people's healthcare needs and how best to meet them. The care plans we reviewed evidenced the expected outcomes which were agreed with people. This meant staff were able to support people to lead healthier lives.
- Staff worked closely with external health professionals to ensure people's needs and wishes were met.

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.

- The registered manager followed the MCA process during the initial assessment to ensure people were able to make decisions about their health and welfare. Staff received training in the MCA. None of the people being supported at the time of this inspection lacked capacity to make decisions.
- Staff understood their responsibilities 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. 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 and their relatives said staff were kind, sensitive to their needs and looked after them well. They said staff were well informed, trained in the necessary work areas to support them effectively and went the extra mile to ensure people were well treated and supported to meet their needs.
- One relative said, "They really are very good. We are very happy with the way they care for [family member]".
- Staff received training in equality and diversity and understood people's needs.

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

- Staff provided care in line with people's preferences, including how they liked to receive their personal care and their food and drink. Staff told us, "Information in the care plans is detailed and clear so we know exactly what to do when we arrive. We always ask people if they need anything else or if they have any particular preferences on the day."
- The registered manager told us they made telephone calls each month and carried out monitoring visits to speak with people and their relatives to find out their views on the quality of their care and if any changes were required, they were made.

Respecting and promoting people's privacy, dignity and independence

- People told us staff supported them to maintain their independence as far as possible. They said staff provided personal care support sensitively and always asked them how they would like to receive their support.
- A relative told us, "Staff are very respectful and they go out of their way to support [family member], they are always ready to go the extra mile".
- Our discussions with staff showed they understood how to maintain people's confidentiality. Staff received training to understand their responsibilities in relation to this.

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 and their relatives said they were involved in the initial assessment and care planning and in any care plan reviews when they took place.
- Staff knew people's individual needs and preferences well as they worked closely with them and understood their risk assessments and care plans.
- Care plans were personalised, detailing health needs, backgrounds and people who were important to them. Care plans were kept up to date so they remained reliable for staff to follow.
- People and their relatives all complimented this provider in being very responsive to their needs.

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 provider met the AIS and key information was provided to people in alternative formats if necessary.
- The registered manager regularly spoke to staff about AIS and implemented appropriate methods of communication with people where required.
- Care plans detailed people's individual communication needs.

Improving care quality in response to complaints or concerns

- There was an appropriate complaints policy and procedure in place that people and staff were aware of. People said they knew how to raise any concerns or complaints they might have and they said they were confident issues were dealt with quickly and swiftly.
- Where there were complaints, the registered manager was able to demonstrate what action was taken, in a timely way and resolved for all involved.
- Relatives told us that they knew how to raise concerns and were confident that they would be dealt with appropriately.

End of life care and support

- At the time of our inspection no one was receiving end of life care. However, the registered manager told us they would work closely with the person, their relatives, the local hospice and others involved in their care.

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

- The registered manager understood their role and responsibilities, as did the staff. The registered manager kept themselves up to date by attending regular courses on key topics.
- The quality assurance systems in place helped to ensure areas for improvement were identified and action taken to continuously improve the quality of the service provided.
- Staff were well supported with good training and one to one supervision.
- Regular monitoring visits of staff practice were undertaken by the registered manager. This enabled the registered manager to monitor how staff were working practically with the person as well as checking time keeping and monitoring their performance. In this way they were able to ensure improvements were made where necessary.
- There were systems in place to review incidents and accidents which helped to ensure action was taken to prevent a recurrence.

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

- People and their relatives spoke positively about the service they received. They said staff were committed to providing good, high quality care. Comments we received reflected this, "We are very happy with the care, no problems at all," and "No problems with this service, it's worked out really well." People said they felt listened too and were able to discuss any concerns they may have. They said there was an open and transparent culture at the service that met the needs of the people they supported.
- The registered manager understood their duty of candour responsibility to notify CQC appropriately of significant incidents including allegations of abuse and serious injuries.

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

- People told us they were fully involved in making key decisions about their care. They said any special requests or needs were taken seriously and where appropriate integrated into their care plans.
- People said the agency communicated very well with them but also said they were able to contribute suggestions as how the service could be improved. They told us they felt listened to.
- Staff told us they regularly spoke with people to ensure they were happy with the service they received.