

Sante Care At Home Limited

Sante Care At Home

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

Sante Care At Home is a domiciliary care agency that specialises in providing live in care services. Live in care is where staff live and work with people, in people's homes, providing personal care and support as required. 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. At the time of our inspection there were eight people using the service.

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

People were satisfied with the care and support they received from staff. They received the care and support that had been planned and agreed with them. People's choices for how this was provided were respected and staff delivered this in line with their wishes.

Staff were kind and caring. They supported people in a dignified, respectful way which maintained their privacy and independence. People had a choice about who they received care and support from. The provider made sure this was from the same staff so that this was provided in a consistent way. People were helped follow their interests and to take part in activities that were relevant to them. 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 safe using this service. Staff understood how to protect people from abuse or harm. They were given the information they needed to help reduce risks to people's safety and wellbeing. Staff followed current practice when providing personal care and when preparing and handling food which reduced hygiene risks

The provider made sure there were enough staff available to meet people's needs. They also made sure staff were suitable and fit to support people through their recruitment checks. Staff received relevant training to help them meet people's needs. The provider regularly assessed their competency to make sure they were carrying out their duties appropriately and to a high standard. The provider made sure staff had regular opportunities to review and improve their working practices to help them provide effective support to people.

Staff helped people to eat and drink enough to meet their needs and to take their prescribed medicines. Records maintained by staff helped keep others involved in people's care well informed about their health and wellbeing. Staff understood people's healthcare needs and how they should be supported with these in a timely and appropriate way.

The provider had systems in place to monitor and review the quality of service that people experienced. They checked with people at regular intervals that the care and support provided was meeting their needs and sought their views about how the service could improve. There were arrangements in place to make

sure any accidents, incidents and complaints would be fully investigated and people would be involved and informed of the outcome. The provider worked with others to develop and improve the care and support provided to people.

The provider was continually looking at ways to improve the quality and safety of the service for people. A new electronic records system had been implemented at the service since our last inspection to help staff deliver more responsive and timely care to people. The provider was also able to more effectively monitor that people were getting the right care and support at the right time. Further improvements were planned. The provider was making more information about the service available in a variety of formats to help make these easier for people and staff to read and understand.

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

Rating at last inspection

The last rating for this service was good (published 27 July 2017).

Why we inspected

This inspection was planned based on the previous rating of 'Good'.

Follow up

We will continue to monitor the service to ensure that people receive safe, compassionate, high quality care. Further inspections will be planned in line with our inspection schedule or in response to concerns.

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.
Details are in our Safe findings below.

Good ●

Is the service effective?

The service was effective.
Details are in our Effective findings below.

Good ●

Is the service caring?

The service was caring.
Details are in our Caring findings below.

Good ●

Is the service responsive?

The service was responsive.
Details are in our Responsive findings below.

Good ●

Is the service well-led?

The service was well-led.
Details are in our Well-Led findings below.

Good ●

Sante Care At Home

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 undertaken 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.

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 4 days' notice of the inspection. This was because it is a small service and we needed to be sure that the registered manager would be in the office to support the inspection.

What we did before the inspection

Before the inspection we reviewed the information we held about this service including notifications the provider is required by law to send us about events and incidents involving people. 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 spoke to the registered manager and the director. We reviewed a range of records. This included the care records of two people using the service, medicines administration record (MAR) for two people using the service, two staff files and other records relating to the management of the service.

After the inspection

We spoke to two people's relatives and asked them to give us feedback about their experiences 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.

At the last inspection this key question was rated as good. At this inspection this key question remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- Relatives told us their family members were safe when being supported by staff. One relative said, "[Family members] are safe with [staff]. What makes me believe that is we were first down there every weekend when we started to use them. Now we go bi-weekly and that's because we feel more confident about [staff]." Another told us, "[Family member] is happy and safe."
- The provider routinely checked with people that they felt safe using the service and with the support they received from staff. When a concern was raised by a person the provider dealt with this quickly and in an appropriate way.
- Staff received training in how to safeguard people from abuse. There was a well communicated procedure for people and staff to follow about how to report a safety concern about a person to the appropriate agency to investigate.
- At the time of this inspection, there were no safeguarding concerns about people using the service. The registered manager was aware of their responsibility to liaise with the local authority if a safeguarding concern about a person was reported to them.

Assessing risk, safety monitoring and management

- The provider had received recent positive feedback from people and their representatives about arrangements put in place to keep people safe at home. One relative had said, "Whilst my [family member's] house is wholly unsuitable for a person of their age every effort has been made to make things as safe as possible."
- The provider carried out assessments to identify risks posed to people from their specific health and medical conditions and by their home environment. This information was used to develop detailed plans for staff about how to manage these risks. For example, we saw one person had issues with their mobility and needed to use walking aids to reduce the risk of them falling and getting hurt. Staff were instructed to make sure these aids were within easy reach and to prompt the person to use them to help keep them safe when moving around their home.
- The provider used spot checks and regular supervision (one to one meetings) to check staff understood risks posed to people and how they should help people to stay safe. Staff had been trained to deal with emergency situations and events if these should arise in people's homes or when supporting people out in the community.

Staffing and recruitment

- Relatives we spoke to indicated they had no concerns about the availability of staff to meet the needs of their family members. The provider made sure when planning rotas staff were available to meet people's needs at all times.

- The provider undertook appropriate checks on staff that applied to work at the service. Staff also completed health questionnaires prior to starting work. These checks helped the provider make sure staff were suitable and fit to support people.

Using medicines safely

- All staff had been trained to administer medicines. They had access to information about people and their prescribed medicines and how they should be supported with these via an electronic records system which they could view securely on a tablet.
- Staff recorded the medicines people were given and when on the electronic records system. Our checks of these records indicated people received their prescribed medicines when they needed these.
- The registered manager had real time access to the electronic records system which enabled them to check on a daily basis that people received the right medicine, at the stated dose and at the appropriate time.

Preventing and controlling infection

- Staff had received training in infection control and had access to supplies of personal protective equipment (PPE) to help them reduce infection risks associated with poor cleanliness and hygiene.
- Staff were also trained in basic food hygiene so that they were aware of the procedures that needed to be followed to prepare and store food safely.
- Senior staff carried out competency checks on all staff of their working practice in relation to infection control and food hygiene. This helped the provider check that staff were working in a consistently safe way, in line with current practice, to help reduce infection risks.

Learning lessons when things go wrong

- Accidents and incidents involving people were fully investigated and the provider took appropriate action when needed to address any safety issues.
- The provider analysed accidents and incidents to check for any trends or themes to help them reduce the risk of these happening again. Learning from investigations was shared with staff to help them improve the quality and safety of the support provided.

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.

At the last inspection this key question was rated as good. At this inspection this key question remained the same. 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

- The provider involved people and their relatives in assessments of people's needs prior to them using the service. The provider asked people for detailed information about their care needs and how and when they would like support to be provided.
- The provider obtained guidance from healthcare professionals involved in people's care to make sure any support would be provided in line with their recommendations. We saw for one person with a long standing health issue, information was obtained from the relevant professionals involved about how staff could effectively support the person with this.
- The provider used the information from these assessments to develop an individualised care plan for people which set out their choices for how, when and from whom they received their support. This helped to make sure staff provided support in line with people's wishes and needs.

Staff support: induction, training, skills and experience

- Staff received relevant training to help them meet the range of people's needs. They had refresher training at appropriate intervals to help keep them up to date with current practice.
- Staff had supervision meetings and yearly appraisals with senior staff. This provided them opportunities to discuss their role and any further training or learning they needed to help them provide effective support to people.
- The registered manager was in regular contact with staff, often on a daily basis, providing support and advice when this was needed.

Supporting people to eat and drink enough to maintain a balanced diet; supporting people to live healthier lives, access healthcare services and support; staff working with other agencies to provide consistent, effective, timely care

- The provider had received recent positive feedback from people and their representatives about the support provided to people to eat and drink. One relative had said, "Mealtimes in particular are brilliant. My [family member] is fully involved in meals...[family member] is now enjoying [their] food again."
- There was information for staff in people's records about their preferences for meals and drinks. This helped make sure staff provided people with food and drink of their choice. Where people had specialist dietary needs this was noted in their records and staff took this into account when planning and preparing meals.
- Staff recorded on the electronic records system what they had prepared and provided at mealtimes. The registered manager had real time access to this information and monitored staff were providing appropriate support and that people were eating and drinking enough to meet their needs.

- Staff were observant and alerted senior staff to any changes in people's health and wellbeing. When people became unwell, they sought prompt support for them.
- Staff shared information with other healthcare professionals such as the GP and district nurses when needed to make sure people experienced a consistent, joined up approach in the support they received.

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.

- Staff had received training in the MCA and associated codes of practice. The registered manager understood their responsibilities under this Act.
- Systems were in place to assess people's capacity to make and consent to decisions about specific aspects of their care and support. There were processes in place where if people lacked capacity to make specific decisions about their care and support the registered manager would involve people's representatives and healthcare professionals to ensure decisions would be made in people's best interests.

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.

At the last inspection this key question was rated as good. At this inspection this key question remained the same. 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

- Relatives told us staff were caring and kind. One relative said, "[Staff member] is very caring and very understanding. [Family member] is a strong individual...but the carer has coped with them brilliantly. She can get [family member] to do more than most of the family can." Another relative told us, "[Staff member] is like a member of the family...very unselfish and devoted. She knows [family member's] habits and moods and goes out of her way for them."
- The provider had also received recent positive feedback about the support provided by staff from people and their representatives. One relative had said, "Both [staff members] have been wonderful with my [family member]. They treat them with respect and empathy and deal with all their needs professionally paying good attention to detail."
- People had a say in who they received their support from and people's wishes about this were respected. The provider made sure people received support from the same staff so the care they received was consistent. A relative told us, "We have asked to stay with this [staff member] and [the registered manager] has managed to facilitate this and [staff member] is there pretty much all the time."
- People's wishes in relation to how their social, cultural and spiritual needs should be met were noted in their records so that staff had access to information about how people should be supported with these. One person was supported to attend church on a regular basis as it was important to them to be able to practise and celebrate their faith.
- Staff received equality and diversity training as part of their role. This helped staff understand what discriminatory behaviours and practices might look like to help them make sure people were always treated fairly.

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

- People records showed they and their representatives were asked for their views and involved in making decisions about their care. People and their representatives had recently confirmed this in feedback they gave to the provider.
- Once people started using the service, they met with senior staff at regular intervals, so that they could continue to express their views and be involved in making decisions. This helped to ensure the support provided to people met their specific preferences and choices.

Respecting and promoting people's privacy, dignity and independence

- People's care plans prompted staff to seek their consent before providing any support. Staff were encouraged to offer people choice, respect their privacy and dignity and give them enough time to do things

at their own pace. This helped to ensure staff would be sensitive to people's needs and discreet when providing care and support.

- People were supported to be as independent as they could be. Staff were encouraged to prompt people to do as much for themselves as they could to help them retain control and independence over their lives. We saw for one person they were encouraged by staff to carry out aspects of their personal care themselves to help them maintain some control and independence with this task.

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs.

At the last inspection this key question was rated as good. At this inspection this key question remained the same. 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; supporting people to follow interests and to take part in activities that are socially and culturally relevant to them

- People and their representatives contributed to the planning of their care and support. People's records contained information about them, their life history, their likes and dislikes, hobbies and interests, their preferred routines and their preferences and choices for how care and support should be provided. This helped to ensure people received personalised care and support from staff, responsive to their needs.
- Staff recorded on the electronic records system the support they provided to people. The registered manager had real time access to this information and checked that the support provided by staff was what had been planned and agreed with people.
- People's care and support needs were reviewed with them and their representatives to make sure this continued to meet their needs. Any changes to people's needs and the support they required was recorded on their care plans which staff had immediate access to via the electronic records system.
- People were helped to undertake activities and attend events with staff's support. These included attending shopping trips, attending church, going out for lunch and to meet friends. One person was helped to attend one of the Queen's garden parties at Buckingham Palace. Another person had gone on holiday abroad at the time of this inspection, with support from staff.

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 had been identified, recorded and highlighted so that staff had access to relevant information about how they should be supported with these.
- We saw for one person with hearing loss, there was guidance for staff about how information should be provided to the person in a way that the person could understand.

Improving care quality in response to complaints or concerns

- Feedback from people and their representatives received and seen during this inspection indicated they had no issues or concerns about the quality of care and support provided by staff. A relative told us, "We feel we are lucky we found them... whatever we have asked for they've done it." Another relative said, "I think the care is really excellent. They are a small company but the managers are very involved. Any issues are sorted out by them quickly. The quality of staff is very good now." Another relative had recently fed back to the

provider in a survey, "[Staff members] now know my [family member] very well and therefore able to meet their needs very well."

- Relatives told us they would be comfortable raising a concern or complaint if they needed to. The provider had arrangements in place to deal with concerns and complaints. When a concern or complaint had been received the registered manager dealt with this in an appropriate way.

End of life care and support

- None of the people using the service required end of life care and support at the time of this inspection.
- We noted the provider did not routinely ask people and/or their representatives about people's wishes for the support they wanted to receive at the end of their life. The provider told us they would make sure this information was collected. This would ensure that staff would know what to do to make sure people's wishes and choices were respected at the appropriate time.

Is the service well-led?

Our findings

Well-Led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

At the last inspection this key question was rated as good. At this inspection this key question remained the same. 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; engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- Relatives spoke positively about the registered manager and the support they provided. One relative said about the registered manager, "They deal with any issues immediately and personally."
- The provider had clear expectations about the quality of care and support people should receive from the service. These were communicated to people when they first started using the service. Senior staff then met with people and their representatives at regular intervals to check that the support being provided was meeting their needs and to the standard expected.
- The provider used spot checks and regular supervision to check staff understood people's care and support needs and how these should be met. Staff were encouraged to give ideas and feedback about how care and support could continually be improved for people.
- People and their representatives were provided regular opportunities to have their say about the service and how it could improve. The provider responded positively when suggestions were made. A relative gave us a good example of this which had led to an improvement in the quality of support their family member received from staff.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; 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 and staff had clearly defined roles, responsibilities and duties. The registered manager checked that staff were up to date in their knowledge of the care and support needs of people using the service and informed about any changes to the service's policies and procedures.
- The provider had systems in place to monitor and review the quality of service that people experienced. This included regular reviews of people's care and support once they started to use the service and a rolling programme of unannounced spot checks on staff to review their working practices and competency when undertaking their duties.
- The registered manager understood their legal responsibilities and when to submit statutory notifications about key events that occurred at the service as required. This helped us to check that the provider took appropriate action to ensure people's safety and welfare in these instances.
- The provider had arrangements for investigating any accidents and incidents that happened. This included keeping people and their representatives involved and informed of the outcome of investigations.

Continuous learning and improving care; working in partnership with others

- The provider was proactively looking at ways to improve the service and the care and support people received. Since our last inspection the provider had implemented a new electronic records system. The registered manager told us the new system had helped staff deliver more responsive and timely care to people. This was because staff had access, via tablets, to the most up to date information about people's care and support needs and how these should be met.
- The registered manager told us they had real time access to the electronic records system. They said this helped them to more effectively monitor that people were getting the right care and support at the right time.
- The provider was implementing further improvements at the service. At the time of this inspection they were introducing new software on their computer systems that would make information about the service, including policies and procedures, available in a variety of formats to help make these easier for people and staff to read and understand
- The registered manager worked closely with other agencies including the local authority and healthcare professionals. They made sure recommendations and advice from healthcare professionals was used to design the care and support provided to people. This helped to ensure that care and support was up to date with current best practice in relation to people's specific needs.