

Safion Care Ltd

Howse Garden

Inspection report

16 Howse Garden
Swindon
Wiltshire
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Tel: 07881693141

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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

Howse Garden is a domiciliary care agency providing personal care to one older person and a second person, who was in hospital at the time of the inspection.

Not everyone who used the service received personal care. 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 could give us limited feedback on their views about the service. They did confirm they were happy with the support they received and liked the staff who visited them. A relative gave us their experiences of the service and were complimentary on how staff dealt with situations and confirmed they provided good consistent care.

Medicines were managed safely. There were safe infection and prevention and control practices (IPC) being followed.

People were supported in line with their support plans which meant risks to people were effectively managed. People's independence was optimised and their privacy respected. 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.

Staff felt supported by the registered manager (who was also the provider). The registered manager had arranged training to enhance staff skills and knowledge. People were supported to shop and prepare their meals; individual dietary preferences were clearly recorded, and people were encouraged to eat healthily. People were supported to access health and social care professionals when needed.

The registered manager had an understanding of their responsibilities and a sound overview of the service. Regular auditing took place to inform where improvements may be required.

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

Rating at last inspection This service was registered with us on 22 November 2017 and this is the first inspection.

Why we inspected This was a planned inspection.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our reinspection 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?

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 ●

Howse Garden

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 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 two working day's notice of the inspection. This was because it is a small service and we needed to be sure that the provider/registered manager would be available to support the inspection.

Inspection activity started on 18 May 2021 and ended on 24 May 2021. We visited the location on 18 May 2021.

What we did before the inspection

We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all of this information to plan our inspection.

During the inspection

We spoke with the registered manager and the following day spoke with one person who used the service. We received feedback from one relative about their experience of the care provided and from one staff member.

We reviewed a range of records. This included one person's care records and their medication records. We looked at one staff member's file in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at training data, policies and procedures and quality assurance records. We received feedback from two social care professionals.

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.

Systems and processes to safeguard people from the risk of abuse

- Staff knew how to keep people safe and a relative described how a staff member had responded quickly and appropriately when the person using the service required medical intervention.
- The provider had a safeguarding policy in place and the registered manager and staff were aware how to report safeguarding concerns to the local authority. One staff member told us, "If I reported suspected abuse and I felt like it wasn't followed up properly I would contact CQC or the council to follow up."
- Staff completed safeguarding training, and this was talked about during meetings with the registered manager.

Assessing risk, safety monitoring and management

- People's care records included individual risk assessments where people could be at risk. Examples of risk assessments we viewed included; the person's environment, keeping out of date food in the house and medicine support.
- Presenting risks were regularly reviewed to ensure people were safely supported. People were supported by regular staff who understood their needs and could respond swiftly as and when the person's needs and risks changed.

Staffing and recruitment

- The registered manager followed safe recruitment practices and the staff recruitment file that we viewed contained the necessary checks and references.
- There was enough staff, and the records showed people experienced continuity of care. One relative said, "They [staff] have attended on time and helped [person using the service] with their daily requirements."

Using medicines safely

- People's medicines were safely managed. Staff supported people to collect their medicines safely.
- Records showed people had been appropriately assisted with their medicines.
- Staff had received training in the safe management of medicines, and their competency had been assessed. Staff could describe clearly how they supported people to safely receive their medicines, including observing people to ensure they had swallowed their medicines.

Preventing and controlling infection

- The registered manager had ensured there was sufficient stock of personal protective equipment (PPE).
- Staff completed infection control training and the registered manager carried out regular observations on staff practice to ensure they were following policies and procedures.

- There were appropriate policies and procedures in relation to infection control and COVID 19 to inform and guide staff.

Learning lessons when things go wrong

- The registered manager had a system to have an overview of any accidents, incidents or near misses. These were being monitored for trends and patterns to prevent reoccurrence or to learn from events.
- The registered manager confirmed following certain events, reflective practice took place with staff to talk through feelings, review how staff responded and where possible consider if improvements could be made.
- One staff confirmed they met as a team and said, "We would always discuss what we could do to improve and what we do well."

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

- People's needs had been assessed before they started to receive support. This was to ensure people's needs could be met and the type of support they needed was incorporated into their support plans. A social care professional confirmed this and said, "They [registered manager] supported a client who had a complex history of care agencies withdrawing support. The care and time that they took to understand the client's needs before beginning care ensured that the package had the best possible chance of success."
- The assessment included people's physical, emotional, communication and health needs. It was clear the level of support the person required and what they could do for themselves.
- We saw relevant referrals had been made where further assessment was required to support people's needs, for example, where the registered manager assessed people required more hours of support to lead an enriching life.

Staff support: induction, training, skills and experience

- New staff received an induction and the registered manager employed one staff member and they had completed the Care Certificate. The Care Certificate is a set of modules that care workers are encouraged to complete as a good practice.
- Staff and the registered manager had completed ongoing training, for example, food safety, fire awareness and basic life support. One staff member told us, "I believe the training covers all that I should know, and I know if I felt like I need more training my manager will provide it for me."
- People were supported by staff who received supervision so they could talk through any issues and look at professional development.

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

- People's dietary needs were assessed and outlined in care records. One person's support plan noted the person liked small meals.
- People's nutritional needs were assessed, where relevant and staff recorded the meals and drinks provided to people.
- People were supported to maintain their health and well-being. Where required, staff accompanied people to appointments to ensure their health needs were reviewed.
- The registered manager worked closely with other professionals to ensure people received a good service and any issues could be addressed. One social care professional told us, "They[registered manager] have attended joint meetings with myself and clients in order to ensure that care is set up in the most appropriate

way."

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.

- People's right to make their own decisions was respected, staff were aware of and worked within the MCA. People said they could make decisions about how they wanted to be supported.
- The registered manager was knowledgeable about the process of assessing people's mental capacity for specific decisions. Where people had fluctuating capacity, we saw a capacity assessment was in place and advocates were accessed as and when this was necessary.

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

- A relative was happy with the support their family member received. They spoke highly about a staff member and said, "[Staff] go the extra mile, by encouragement if he feels he does not wish to do things and makes conversation with him."
- Professionals gave us positive feedback, and one commented, "They [registered manager] have provided consistent carers who have been able to build a good rapport with clients."
- People's preferences were adhered to. For example, one person liked to go to church, as they had always done this, and they were helped by staff to attend church as much as possible.
- Staff and the registered manager were passionate about providing people with good quality care. One staff member commented, "As a care worker I feel that it is my job to try and give the clients the best life possible and to help them with what they would like to do."

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

- People were supported to make decisions about their lives. One person told us they could decide how they wanted to be helped each day.
- Staff knew what mattered and what was important to people. One staff member said, "We always encourage them [people using the service] to make choices for themselves and we support them, such as, what they want to wear or eat."

Respecting and promoting people's privacy, dignity and independence

- Staff were able to describe how they respected people. This included, asking to enter the person's home and considering how they like to be supported. One staff member said, "To protect their dignity, ensure you always take their feelings and thoughts into consideration" and "Always make sure the person feels listened to and supported and included in decisions."
- We saw the registered manager had made a request to the local authority for a person to have more community hours support, so they could go out for the day and experience new things.

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

- Staff were clear they needed to follow the person's support plan. They said, "Depending on the client's needs, we will follow the support plan to ensure that the client's needs are met" and "Our manager will always inform us if there are any changes [to the person's needs]."
- People's support plans focused on the person, their likes dislikes and needs. A social care professional told us the service provided, "High quality person centred care that has enabled clients to remain living in their own homes."
- There was regular contact between the registered manager and staff member as they both visited the same person and needed to communicate frequently to ensure the person was supported effectively.

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.

- Support plans detailed people's communication needs and how those needs should be met.
- The registered manager had an accessible communication policy and confirmed should a person require information in another format or language then this could be provided to them.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- Staff had built positive working relationships with people as they had consistently visited them. One person said staff took them out shopping which they enjoyed. A relative said that a care worker, "Goes the extra mile for [person using the service], by encouragement if he feels he does not wish to do things and makes conversation with him."
- The registered manager was aware of people's preferences and tried to help people access community places as and when they could. It was noted in people's support plans that they had contact with friends and family members so staff could check to ensure people were not socially isolated.

Improving care quality in response to complaints or concerns

- A relative confirmed they had no concerns and that "I am always able to contact them if I have any worries."
- The registered manager confirmed they had not received any complaints but stated there were systems in place to manage them.

End of life care and support

- No people were receiving end of life support at the time of our inspection.
- The registered manager had completed end of life training and had an end of life support plan available for when they supported anyone with end of life care. They recognised that some people might require an advocate to look at their end of life care preferences and would work closely with others in people's best interests.

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

- A relative was complimentary about the service. They were happy with how their family member was supported and felt they could talk with the registered manager if they had any issues.
- Feedback received from staff demonstrated their experience of working for the company was positive. A staff member told us, "Communication between me and my manager is excellent."
- The registered manager worked in the interests of the people using the service and supported the staff they employed. One staff member said, "I feel very supported in my job and I believe that being supported means that I can give the best care possible." A social care professional confirmed the registered manager behaved in a "Professional manner."

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 of their responsibilities in relation to duty of candour and communicated regularly with people and relatives.
- Services that provide health and social care to people are required to inform the Care Quality Commission (CQC), of important events that happen in the service. The registered manager was aware of their responsibilities to report notifiable events through submitting a notification form appropriately to CQC.

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

- The service was well led with the registered manager overseeing the service and carrying out quality checks. These included audits of medicine management records, care plans and risk assessments. The provider used various trackers; to monitor staff's training compliance, accidents, safeguarding concerns and other occurrences.
- As part of monitoring the quality of the service staff were observed during visits to people. One staff member confirmed, "I have spot checks by my manager, once I have had the spot check, we usually discuss what went well and if there is anything I could improve on if needed."
- It was evident throughout the inspection that the registered manager worked closely with staff and external professionals to offer a good service and to review practices to drive improvements. They engaged with the inspection in a positive way and reflected on how they were managing the service.

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

characteristics

- A relative confirmed there was good communication between the registered manager and themselves and that they were kept up to date if the person's needs changed or if there was an emergency.
- People and their relatives were able to feedback their views during regular reviews, spot checks and by telephoning the registered manager. Satisfaction surveys were also given to people and relatives so the registered manager could act on any areas noted for improvement.
- Staff felt involved with the running of the service. One staff member told us, "I feel like I can contribute my views and feel listened to" and "I feel like a valuable member of the company."

Working in partnership with others

- The registered manager worked well in partnership with local health and social care professionals. One social care professional commented "They [registered manager] have taken great care to work in a person centred way and have maintained extremely good communication with us in the local authority."
- We saw the registered manager kept a log of the phone calls and emails to professionals to help them follow up on anything needing to be addressed.
- The registered manager attended regular meetings with Swindon and Wiltshire councils which enabled them to keep up to date with good practice.