

Ezer Leyoldos Limited

Ezer Leyoldos Domiciliary Care Agency

Inspection report

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Date of inspection visit:
31 October 2022

Date of publication:
20 December 2022

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

Ezer Leyolodos Domiciliary Care Agency is registered to provide personal care to people living in their own homes. At the time of our inspection they were facilitating support to one person who lived in a bespoke setting in their community. 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.

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

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

Right Support: The service was set up to maximise the choice and independence of people receiving support. The model of care was truly unique and had been developed to ensure the person was able to maintain and develop their community relationships. 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.

Right Care: People received culturally appropriate care that promoted their religious and cultural identity. People had been involved in developing their care plans and were enthusiastic about the range of activities they were supported to be involved with. Staff spoke about people with kindness and compassion. Staff were proud of people's achievements and spoke about them in a way that promoted people's sense of achievement and personhood. Care was designed to promote people's independence and community wellbeing

Right Culture: Staff demonstrated clear values which promoted the rights and achievements of people using the service. There was an open culture which focussed on supporting people to achieve their desired outcomes. People told us they were supported to "have a blast" within a service that supported them to manage risks in a safe way.

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 requires improvement (published 27 November 2019)

At our last inspection we recommended that the provider make improvements to their safeguarding and

whistleblowing processes. We also made a recommendation about improving their recruitment processes. At this inspection we found both our recommendations had been followed.

Since our last inspection the provider had made changes to their statement of purpose. When we last inspected they worked only with children. Since then they have stopped this work and now only work with adults.

Why we inspected

This inspection was prompted by a review of the information we held about this service.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

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.

Ezer Leyoldos Domiciliary Care Agency

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

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.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

Notice of inspection

We gave a short period notice of the inspection because the service is small and we needed to ensure that the provider and registered manager would be available to support the inspection. We also needed to give the person receiving support time to prepare for meeting us.

Inspection activity started on 31 October and ended on 23 November. We visited the location's office on 31

October and visited the person in their home on 14 November. Inspection activity finished on 23 November 2022.

What we did before the inspection

Before the inspection we reviewed in the information we already held about the service. We sought feedback from the local authority commissioning and safeguarding teams. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually. We used all this information to plan our inspection.

During the inspection

During the inspection we met the registered manager and the chief executive of the provider. We met two members of staff and the person receiving support. We reviewed one staff file including recruitment, training and supervision records. We reviewed one person's care file including assessments, care plans and records of care. We reviewed various policies, procedures and records relevant 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.

At our last inspection we rated this key question requires improvement. At this inspection the rating has changed to good.

This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- At our last inspection in October 2019 we made a recommendation about ensuring staff were aware of their safeguarding and whistleblowing responsibilities. At this inspection we found this recommendation had been fully met.
- Staff had detailed knowledge about safeguarding processes and knew what steps to take if they were concerned about allegations of abuse or neglect.
- There was a clear safeguarding policy in place which ensured staff had information about how to protect people from the risks of abuse.
- The person we spoke with was confident their staff knew how to protect them from harm.

Assessing risk, safety monitoring and management

- Risks to people had been assessed and the provider and staff had put in clear plans to mitigate risks people faced.
- People were supported to take measured risks through a positive risk-taking model. This ensured they were safe and were supported to develop their own understanding of risk.
- Risks were kept under regular review with the provider and social services involvement.

Staffing and recruitment

- At our last inspection we made a recommendation about ensuring recruitment practice always explored staff employment history. At this inspection we found this recommendation had been met.
- The provider had effective and robust systems in place to ensure staff were suitable to work in a care setting. The provider recruited staff who understood the specific cultural needs of the population they served.
- Staff had been identified and appointed prior to the provider taking over the management of the service. However, the provider had carried out recruitment checks to ensure staff were safe to work in a care setting.
- There were enough staff to meet the current needs of the service. The provider assured us they would recruit more staff if they intended to grow the service.

Using medicines safely

- There were systems in place to ensure medicines were managed safely.
- The person we spoke with told us they were confident they were supported well with their medicines. Staff described how they ensured medicines were managed safely.

Preventing and controlling infection

- We were assured there were effective systems in place to prevent and control the risks of infection.
- The provider had systems in place to check risks of infection were mitigated. This included risk assessments around the risks of infectious diseases and checking that staff were vaccinated to reduce the risks of onwards transmission.

Learning lessons when things go wrong

- There had been no accidents or incidents since the provider had changed the nature of the service. There were robust systems in place to ensure incidents and accidents were reported and escalated appropriately.
- A person had been supported to go on holiday. This had been identified as being a potential risk for the person. Staff reviewed the events of each day and took steps to learn from how things had gone.

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 our last inspection we rated this key question requires improvement. At this inspection the rating has changed to good.

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

Staff support: induction, training, skills and experience

- At the last inspection in October 2019 we made a recommendation about staff training. At this inspection this recommendation had been followed and staff had received the training and support they needed to perform their roles.
- Staff had completed the care certificate. The Care Certificate is an agreed set of standards that define the knowledge, skills and behaviours expected of specific job roles in the health and social care sectors. It is made up of the 15 minimum standards that should form part of a robust induction programme. They had also completed training in supporting autistic people and people with learning disabilities.
- Staff received regular support and supervision in line with the provider's policy. Staff told us they felt supported by the supervision process. One staff member said, "They've been very proactive, supporting me with the training and giving me strategies to keep him safe."

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

- People's needs had been assessed in a holistic, person centred way that took full account of their cultural and spiritual needs alongside their practical needs.
- The person told us they were full involved in developing their support plan, which focussed on supporting them to develop the skills they needed to become independent.
- Staff told us how they had sought advice regarding the transition from children's services to adults as they recognised different standards and guidance applied.
- There were clear goals in place with progress towards achieving them marked in milestones.

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

- People were supported to eat and drink enough and to maintain a balanced diet that reflected their cultural needs and preferences.

Staff working with other agencies to provide consistent, effective, timely care

- There were effective working relationships in place that ensured people received consistent and appropriate care.
- Staff worked closely with each other and the local authority to ensure people received the support they needed. Staff had sourced and set up relationships with education providers to ensure people received high quality support.
- The person we spoke with confirmed staff helped them keep in touch with the different professionals

involved in their care.

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

- People were supported to access healthcare services and support by confident and compassionate staff.
- The person we spoke with confirmed they felt well supported around their medical needs. They said, "There's no problem with the doctor. 100% [staff] helps me stay on track."
- Staff supported people to develop the skills they needed to take control over their own health conditions.

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 MCA 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 provider recognised that the level of support the person received amounted to a restriction of their liberty. They worked within the principles of the MCA.
- The provider worked closely with the person, the local authority and staff to support the person to understand the support in place. The person understood and was able to consent to their care arrangements.

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 our last inspection we rated this key question good. At this inspection the rating for this key question has remained 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

- The provider ensured people were supported in a way that met and promoted their individual needs and characteristics.
- People were well supported by staff who respected them, and promoted their rights and personal development. Staff spoke about people with warmth and demonstrated pride in their achievements.
- Staff demonstrated a sensitivity to people's past experiences and the lasting impact these had on their behaviour and relationships. They celebrated the progress people had made. One staff member said, "After [life event] they had a very difficult time. Now they are in a far better place. They have moved from being defiant and angry, a person others didn't feel safe to be around. Now they can engage and can see how building trust leads to better relationships."
- The person was being supported in a bespoke, family centred environment that recognised the importance of the person's religious and cultural identity.
- The person we spoke with confirmed they felt part of the family and valued the social life they were able to develop through their religious life.

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

- People were supported to express their views and make decisions about their care.
- Staff involved people fully as partners in their care, seeking their views and involvement in all elements of their life.
- The person we spoke with confirmed they were involved in both day to day and wider decisions about their care.

Respecting and promoting people's privacy, dignity and independence

- People were treated with dignity and respect by staff who respected their rights.
- Staff took every opportunity to support people to develop their skills and independence. The person we spoke with told us, "I get on well with [staff]. They make me feel more independent." There was a clear focus on supporting the person to develop life skills, both practical and emotional that would support them to live a fulfilling and independent life.

Is the service responsive?

Our findings

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

At our last inspection we rated this key question good. At this inspection the rating for this key question has remained 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 were receiving personalised care which reflected their needs and preferences.
- People confirmed they were able to change their support when their preferences changed.
- Records confirmed people were receiving the support they needed to achieve their goals.

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- People were given information they needed in a way they could understand.
- The provider confirmed they could make materials available in alternative formats where this was needed to facilitate people's understanding. The registered manager told us they had staff who spoke the main languages within the community they served, so they were able to meet people's communication needs.
- The provider also provided external professionals with information about how to best engage members of their community, ensuring effective communication was maintained.

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 develop and maintain relationships and to engage in a range of activities that reflected their needs and preferences.
- Staff supported people to maintain relationships with family members. The person we spoke with confirmed that with the support of staff they had been able to have more contact with their family.
- People had an active and busy schedule of activities that supported them to achieve their goals. The person we met spoke about their tutor and classes with passion and enthusiasm. They said, "We have a blast. I've worked on my life skills, money and safety."
- The person's activity programme included religious education and attendance at their place of worship. The person confirmed that their religious identity was very important to them and they valued being part of their religious community.

Improving care quality in response to complaints or concerns

- There were systems in place to respond to complaint or concerns.
- There had not been any complaints made about the service. People and staff both confirmed they knew how to raise complaints, though felt confident they would not need to.

End of life care and support

- The provider was not providing any end of life care. The registered manager told us that they would identify any end of life care needs during an assessment. They confirmed they would work with other services to ensure people's end of life wishes were met.

Is the service well-led?

Our findings

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

At our last inspection we rated this key question good. At this inspection the rating for this key question has remained 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

- The registered manager and staff promoted a person centred culture focussed on supporting people to achieve outcomes.
- All the staff we spoke with talked about people with respect, demonstrating their values base which focussed on supporting people to achieve their best.
- This was reflected in how the person we spoke with spoke about the provider. They said, "[Staff] knows how to work with me. I feel respected by [staff] and everyone at Ezer."

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 understood their responsibilities under the duty of candour.
- The provider operated in an open and transparent way.

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

- It was clear that managers and staff knew their roles; performance and risk were well managed.
- There was a comprehensive staff handbook which ensured staff had clear information about their role and responsibilities. Staff told us they felt well supported by their managers.
- Although the provider had only been responsible for the service for a few months, there were well established quality assessments frameworks. Staff reviewed the quality of records and sought feedback from people and staff.

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

- While the service was still very small, there were effective systems for involving and engaging people and staff. The whole organisation is embedded within the local community and is driven by its purpose to meet the local community's needs.
- Staff and people confirmed the provider sought their views about the service.
- The provider confirmed any growth in the service would be driven by the needs of the population they served.

Continuous learning and improving care

- There was a culture of continuous improvement within the service.
- The provider ensured they monitored outcomes and reviewed the service with a focus on making improvements for people.

Working in partnership with others

- The provider worked closely and effectively with other agencies.
- The provider had effective working relationships with the local authority which had ensured a bespoke package of care was established that was truly person centred and able to meet people's needs.