

Fitzpatrick Total Home Care Limited

# Fitzpatrick Total Home Care Limited

## Inspection report

Unit 2, Colne House Farm  
Station Road, Earls Colne  
Colchester  
CO6 2LT

Tel: 01787221622

Date of inspection visit:

04 May 2023

12 May 2023

Date of publication:

15 June 2023

## Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

**Requires Improvement** ●

# Summary of findings

## Overall summary

### About the service

Fitzpatrick Total Home Care Limited is a domiciliary care agency providing personal care to people living in their own homes. 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. At the time of our inspection there were 32 people receiving personal care support.

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

The provider's processes for monitoring the quality and safety of the service were not always effective in demonstrating what actions were taken when issues were identified. The provider had not always ensured all appropriate notifications were sent to CQC in line with their regulatory responsibility. We have made a recommendation about the provider's quality assurance systems.

The provider had systems in place to recruit staff safely; however, checks were not always fully documented. We have made a recommendation about the provider's recruitment processes. We received some mixed feedback from staff about how supported they felt in their roles.

People told us they were happy with the care they received and spoke positively about the staff and management team. People told us staff were reliable and they received their care at their preferred times. Staff understood people's needs and how they liked to be supported. 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.

People told us they felt safe. Staff knew how to recognise and report any signs of abuse or concerns about people's safety. Risks to people's safety were assessed and documented. The provider had processes in place to monitor the administration of medicines and people's care plans contained information about how to support them. People and relatives felt involved in the service and told us they were able to give feedback and discuss any concerns with the registered manager.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

### Rating at last inspection

The last rating for this service was good (published 13 February 2018).

### Why we inspected

We received information of concern in relation to the timing of people's care visits and management oversight at the service. As a result, we undertook a focused inspection to review the key questions of safe and well-led only.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating. The overall rating for the service has remained good. However, we have found evidence the provider needs to make improvements. Please see the well-led section of this full report.

#### Recommendations

We have made recommendations in relation to staff recruitment and management processes for monitoring the quality and safety of the 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 well-led?

Requires Improvement ●

The service was not always well-led.

Details are in our well-led findings below.

# Fitzpatrick Total Home Care 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 Health and Social Care Act 2008.

#### Inspection team

The inspection was carried out by 1 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 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.

Inspection activity started on 4 May 2023 and ended on 12 May 2023. We visited the location's office on 4

May 2023.

#### What we did before the inspection

We reviewed information we had received about the service since the last inspection. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

#### During the inspection

We spoke with 6 people who used the service and 4 relatives about their experience of the care provided. We spoke with 9 members of staff including the registered manager, deputy manager, senior and care staff. We also received feedback from 2 health professionals who have contact with the service.

We reviewed a range of records. This included 4 people's care records, 3 staff files in relation to recruitment and a variety of records relating 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 good. The rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

### Staffing and recruitment

- The provider had a recruitment process in place to check staff were safely employed. However, not all checks had been documented appropriately. For example, we found staff did not always have a full employment history listed.
- Following the inspection, the provider responded promptly to confirm the appropriate documentation was now in place and confirmed they were completing an audit of all staff files to ensure accurate information was recorded throughout.

We recommend the provider reviews their process to ensure staff are safely recruited

- People told us they were supported by regular carers who understood their needs. One person said, "I have the same group of carers. They're very helpful and very nice." Another person told us, "I have a small group of regular carers. I know them and they're beginning to understand me and why I like things as I do."
- People and relatives told us staff were usually punctual and they were kept up to date if there were any delays. Comments included, "They're generally on time and they always let me know if they're running late" and "They arrive around the right time, I never wait too long, and they never leave me without care."
- People we spoke with did not have any concerns with the timings of their care visits. Comments included, "They're very reliable" and "They stay as long as I need them."
- Staff generally told us they had enough time to support people and confirmed they were able to request extra time if they felt rushed when providing support. One member of staff said, "I don't feel rushed and if I do, I can report to management and they will increase the time."

Systems and processes to safeguard people from the risk of abuse; Learning lessons when things go wrong

- The provider was aware of their responsibility to notify the local authority of safeguarding concerns. However, whilst some concerns had been raised with CQC appropriately, we found others which had not. The provider responded promptly to our feedback by completing a full audit of all safeguarding concerns and retrospectively submitting notifications to CQC which had not been raised previously.
- The provider kept a log of the safeguardings raised and documented the actions they had taken to protect people from the risk of abuse and the outcome of their investigations.
- Staff knew how to identify and report safeguarding information. One member of staff told us, "I would report it to management immediately." Another member of staff said, "I would inform my line manager straightaway."
- The provider had recorded lessons learnt from incidents and shared information with staff in order to mitigate the risk of a reoccurrence.

### Assessing risk, safety monitoring and management

- The provider had assessed risks to people's safety and risk assessments were in place for key areas of people's support.
- The provider informed staff of any changes to people's support needs following input from health professionals. However, people's risk assessments had not always been updated to incorporate any recommendations. Following the inspection, the provider confirmed all relevant information had now been transferred into people's risk assessments.
- People told us they felt safe when being supported and relatives confirmed they had no concerns regarding people's safety. One relative said, "They know [person] inside out and they let me know if they have any concerns. They're really good."

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 Mental Capacity Act (MCA). In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS)

- We found the service was working within the principles of the MCA and if needed, appropriate legal authorisations were in place to deprive a person of their liberty.

### Using medicines safely

- People received their medicines as prescribed. People's care plans contained information about their medicines and what support they needed to take them safely.
- Staff had received medicines training and the provider completed spot checks to ensure they administered medicines safely.
- The provider used an electronic medicines administration system which alerted the management team to any delays or errors with administration, allowing them to respond immediately.

### Preventing and controlling infection

- People were protected from the risk of infection. Staff completed infection prevention and control training and appropriate personal protective equipment (PPE) was available to use.
- The provider had an infection control policy in place and staff were kept informed about any updates or changes to guidance.



# 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 has changed to requires improvement. This meant the service management and leadership was inconsistent. Leaders and the culture they created did not always support the delivery of high-quality, person-centred care.

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 provider had processes in place for monitoring the quality and safety of the service. However, it was not always clear what actions were taken where issues were identified. For example, where audits found people's care visits were shorter than the agreed times, the provider was not always able to evidence how they had investigated this, or reviewed staff travel times.
- The provider told us they spoke with people every week and picked up on any concerns around their call times during these conversations. However, it was not clear how this information was recorded or analysed.
- The provider understood their responsibility to be open with people when things went wrong. Incidents were investigated and people and relatives were kept informed and updated. However, the registered manager had not submitted all relevant notifications to CQC in line with their regulatory responsibility.
- Following the inspection, the provider reviewed their processes and sought additional support to ensure notifiable incidents were promptly identified and reported.

We recommend the provider reviews current best practice guidance to ensure effective quality, safety and compliance monitoring processes are in place.

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

- We received mixed feedback from staff about how valued they felt, with some staff speaking positively about their support and pride in the service and others telling us they lacked support. Comments included, "I do feel valued, and I would most definitely feel comfortable with talking to [management team]", "I feel very much supported" and "I would recommend them 100%". However, other staff told us, "No, I don't feel supported" and "It's gone downhill, I don't feel supported now."
- The provider told us they asked staff for regular feedback in supervisions and team meetings and had implemented a suggestion box to enable staff to feedback anonymously. The registered manager told us they continued to review this feedback to highlight areas for improvement.
- People and relatives spoke positively about the culture of the service and the support from the management and staff team. Comments included, "I'm so glad I was told about Fitzpatrick, I couldn't be better off than I am and if I have any problems, they'll sort it for me" and "They're like an extension of the family. They go above and beyond. We feel really lucky to have them."

- People and relatives told us they felt involved with the service and able to discuss any concerns. One person said, "I'm always able to talk to someone, and they always know you and what you're speaking about. It's because they're a small organisation, it's so nice to know they really know you and have a handle on everything."

Continuous learning and improving care; Working in partnership with others

- The provider sought regular feedback from people and relatives during care visits and via phone calls and surveys. The registered manager told us the frequent contact enabled them to understand people's experience of care and identify areas for learning and improvement.
- The provider worked in partnership with a number of different health and social care professionals in order to support people's needs. Comments from healthcare professionals included, "They are generally responsive to our requests" and "The team are always very prompt in providing feedback and information required."