

RRC (GB) Ltd

# Eagles Community Support

## Inspection report

8 Oakmead Road  
Croydon  
Surrey  
CR0 3AS

Tel: 02030110728

Website: [www.eaglesandshofar.org.uk](http://www.eaglesandshofar.org.uk)

Date of inspection visit:  
22 September 2023

Date of publication:  
17 October 2023

### 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

Eagles Community Support provides personal care support to people in their own home. 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 1 person was receiving support with their personal care.

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

People received personalised support which met their needs. They received support from consistent care workers who knew them well 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. Staff supported people to engage in activities that they liked and had an interest in. Staff protected people from the risk of abuse. They were respectful of people's protected characteristics and people received support free from discrimination.

Staff completed regular training on a range of topics to ensure they had the knowledge and skills to meet people's needs in line with best practice guidance. Staff felt well supported in their role with good access to the management team.

There were systems in place to review the quality of care delivery and make any changes required to ensure people received high quality care. The registered manager liaised with other social care providers to share best practice and focus on continuous improvement.

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 7 November 2018).

### Why we inspected

This inspection was prompted by a review of the information we held about this service and the time passed since last inspection.

### 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.

# Eagles Community Support

## 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

This inspection was undertaken by 1 inspector.

#### Service and service type

This service is a domiciliary care agency. It provides personal care to people living in their own homes.

#### 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 registered manager would be in the office to support the inspection.

#### What we did before the inspection

We reviewed information we had received about the service since the last inspection. We 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 1 relative, 2 staff including the registered manager and a support worker. We reviewed records relating to the person receiving care, the staff and 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.

Systems and processes to safeguard people from the risk of abuse

- People were kept safe from avoidable harm because staff knew them well and understood how to protect them from abuse. The service worked well with other agencies to do so.
- Staff had training on how to recognise and report abuse and they knew how to apply it.
- Staff were respectful of people's protected characteristics and people received support free from discrimination.

Assessing risk, safety monitoring and management

- Staff were knowledgeable about any risks to the person's safety and supported them appropriately to remain safe. The relative we spoke with felt their family member was safe with staff and they trusted them.
- Staff were aware of what equipment people needed to stay safe, for example any walking aids and ensured these were left within reach of the person.

Staffing and recruitment

- Safe recruitment practices were in place to ensure suitable staff were employed to support people. This included undertaking disclosure and barring service (DBS) checks, getting references from previous employers, checking people's identity and their eligibility to work in the UK. DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.
- There were sufficient staff to meet the person's needs and provide consistency in care. The relative confirmed staff attended on time and stayed the length of time required to support their family member.

Using medicines safely

- At the time of our inspection people did not need support with their medicines. However, staff had received training on safe management of medicines should someone need this level of support.

Preventing and controlling infection

- We were assured the provider was supporting people to minimise the spread of infection.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider's infection prevention and control policy was up to date.

Learning lessons when things go wrong

- The service had appropriate systems in place to monitor, record and manage any incidents that occurred, to ensure the person received appropriate support and lessons were learnt.

# 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 good. The rating for this key question has remained 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

- A full assessment was undertaken prior to staff providing support. These assessments looked at people's needs, any risks to their safety and information about their preferences and how they wished to be supported.
- Information from assessments were shared with staff providing support so they were aware of what support to provide and how this was to be carried out.

Staff support: induction, training, skills and experience

- People were supported by staff who had received relevant and good quality training in evidence-based practice. The relative we spoke with told us staff carried out their duties in a "professional manner" and they had no concerns regarding staff's ability to do their job.
- Updated training and refresher courses helped staff continuously apply best practice.
- The service checked staff's competency to ensure they understood and applied training and best practice.
- Staff received support in the form of continual supervision, appraisal and recognition of good practice.

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

- At the time of our inspection the person received most of their nutritional support and mealtimes with family members. However, staff provide the person with a hot drink and a light support, in line with their wishes, during their calls.

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

- At the time of our inspection the person's relatives were supporting them with any health appointments. Staff told us they would communicate with the person's relatives if they identified any concerns or decline in a person's health.

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.

- People were involved in day to day decisions and staff always asked for the person's permission before providing any support. They respected the person's decision and provided support in line with the principles of the MCA.
- Staff had received training on the MCA and DoLS to ensure they had up to date knowledge and provided care in line with these legal frameworks.



# 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. 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

- People received kind and considerate care which respected their personal preferences, culture and beliefs.
- People received support from consistent care workers who they were able to build relationships with.

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

- People were enabled to make choices for themselves and staff ensured they had the information they needed. People were involved in all decisions about their care and staff provided support in line with their wishes.
- People, and those important to them, took part in making decisions and planning of their care and risk assessments.

Respecting and promoting people's privacy, dignity and independence

- Staff respected people's privacy and dignity, especially whilst supporting with their personal care. They encouraged people to be as independent as possible with their self-care.

# 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. 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 and their relatives were involved in their care and people received personalised care in line with their wishes.
- People's care records contained information about their care needs so staff knew what level of support people required and how this was to be delivered.

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.

- Staff were aware of how the person communicated and ensured they provided information in a format the person understood.

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

- During the assessment process, staff obtained information about the person's interests and hobbies. They also completed information about what was important to them so they could provide appropriate support. This included supporting with religious preferences, reading the bible to them and supporting them to get ready to go to church.

Improving care quality in response to complaints or concerns

- Processes were in place to record and respond to any concerns raised. At the time of our inspection the person receiving support had not raised any concerns about the care provided.

End of life care and support

- At the time of our inspection the person did not require end of life support. Staff had started to begin conversations with the person and their relative around end of life wishes, however, they respected that they were not ready to have those conversations.

# 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. 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; engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- The registered manager welcomed feedback from people, relatives and staff to improve practices and ensure better outcomes for people. The relative we spoke with confirmed the registered manager visited or rang them to ask for feedback about the service and check they were satisfied with the support provided.
- Staff, people and relatives were asked to complete satisfaction surveys to feedback about the service. Staff also confirmed that during team meetings they were able to suggest ideas or new ways of working and these were taken on board by the registered manager.

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

- The registered manager had the skills, knowledge and experience to perform their role and a clear understanding of people's needs and oversight of the service they managed.
- Governance processes were effective and helped to hold staff to account, keep people safe, protect people's rights and provide good quality care and support. There was a regular programme of audits and spot checks to review the quality of service provision.
- Senior staff understood and demonstrated compliance with regulatory and legislative requirements.

Working in partnership with others

- The registered manager worked with other social care providers to share best practice and discuss ideas.
- The provider was involved in provider engagement groups organised by the Local Authority which aimed to help improve care services in the local area.

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 service apologised to people, and those important to them, when things went wrong
- Staff gave honest information and suitable support, and applied duty of candour where appropriate.