

# Southern Family Care Ltd Southern Family Care Ltd

### **Inspection report**

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Ratings

Website: www.southernfamilycare.co.uk

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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

Southern Family Care Ltd is a domiciliary agency registered to provide personal care to both older and younger people in their own homes, however at the time of the inspection only three young people under the age of eighteen received the regulated activity of personal care.

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 were unable to express their views about the care and support they received. Relatives and professionals were very positive about the care provided. We were told that staff were kind, friendly and attentive to people's needs. Relatives told us there were enough staff to meet people's needs. Staff felt that there were enough of them to meet people's needs in a person-centred way. Staff were trained and felt well supported.

Relatives said that people felt safe and staff were aware of how to promote people's safety. Regular checks were in place to ensure staff worked in accordance with training and health and safety guidance adhered to. Relatives and professionals told us that staff always put people's safety and welfare first.

There were governance systems in place and these were being used effectively and regularly.

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 and their relatives were involved in planning their care. There were no complaints but there was a system in place to ensure they were responded to appropriately should one be raised. Feedback was sought through meetings and relatives told us the registered manager was always available to talk if needed.

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 29 July 2017).

Why we inspected

This was a planned inspection based on the previous rating.

Follow up

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

inspection 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?	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.	



## Southern Family Care Ltd

**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 homes.

The service had a manager who was registered with the Care Quality Commission. A registered manager 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

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.

#### What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. We reviewed 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 were unable to observe care provision or speak directly with people who received support due to their age, the complex conditions some of them lived with and the circumstances in which they were supported.

However, we obtained feedback about the services provided from relatives, health and social care professionals and staff. We spoke with the registered manager and one member of staff.

We reviewed a range of records. This included three people's care records and various medication records. A variety of records relating to the management of the service were also reviewed.

#### After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at quality assurance records.



## 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 has remained the same. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management

- People had their individual risks assessed.
- Staff were aware of individual risks. Relatives and professionals told us staff were working safely.

#### Staffing and recruitment

- Relatives told us there were enough staff to meet their family member's needs.
- Records showed that care calls were carried out as planned and staff said they felt there were enough staff to meet people's needs.
- Staff told us that robust recruitment processes followed, and this helped them ensure those employed were suitable to work in a care setting. The registered manager said, "Southern Family Care have a safe recruitment process and great emphasis is placed on recruiting recommended personnel and train staff considering clients changing needs."

#### Using medicines safely

- People received their medicines when needed and in accordance with the prescriber's instructions.
- Audits were completed regularly and staff were trained.

Systems and processes to safeguard people from the risk of abuse

- Relatives told us they felt their family members were safe. A health and social care professional said, "I have found that if any issues are identified that Southern Family Care will report this to social services to promote the safety and well-being of the young person."
- Staff had received training and updates on how to recognise and report abuse.
- Information on reporting concerns was displayed in the office and any concerns had been reported appropriately.

#### Preventing and controlling infection

• Staff had received infection control training and we were told by relatives that this was put into practice. For example, the use of personal protective equipment and appropriate handwashing.

#### Learning lessons when things go wrong

- Where incidents, accidents and complaints had occurred, or updates were needed, the registered manager shared information with the staff team through daily meetings and supervisions.
- Staff confirmed that they were kept informed of changes and they were reminded of what was expected.



## 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 has 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

- People's needs were assessed before they started to receive a service from the provider. They ensured that staff had the relevant skills to meet each person's needs.
- Staff were kept informed of what was expected by the registered manager through supervisions and observations.

Staff support: induction, training, skills and experience

- Relatives told us they felt staff were trained for their role. One relative said, "We are very pleased Southern Family Care took this package. It is not an easy package to run and requires a whole different level of care, skill, expertise and patient management of a [person] who can be quite tricky to understand. They have dealt with it like ultimate pros even when I have fallen apart with the upset of it all, they have remained calm and focused."
- Staff had received training in subjects to support them in their work and they told us they felt equipped for their role.

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

- People were supported when needed to have a varied and balanced diet, or supported with their feeding regimes via a PEG feeding tube. Percutaneous endoscopic gastrostomy (PEG) feeding tubes are used as a means of feeding when a person is not able to eat and drink sufficiently or safely orally.
- Relatives told us that staff supported people appropriately and safely. One relative said, "The carers all know their diet requirements and restrictions, importance of fluid intake and always give me an excellent handover."

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

- The team worked with the local authority to help ensure people received safe and effective care.
- There was good communication between staff and professionals to help ensure people's needs were being met.

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

- People had regular access to health and social care professionals.
- Staff supported people and their relatives with health or social care appointments, if needed. One relative said, "They attend regular CIN disability meetings with county and professionals and are always able to give a clear update, detailed account reflecting the nature, behaviour and level of care needs."

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.

We checked whether the service was working within the principles of the MCA, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

• People's relatives were involved in all decision making and best interest decisions were recorded. The team acted in the best interests of people and consent was sought.



## 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 has remained the same. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

Respecting and promoting people's privacy, dignity and independence

- Relatives told us that staff were discreet and sensitive when they supported their family members with personal, difficult and intimate care tasks.
- Records were held securely which ensured confidentiality was maintained at all times.

Ensuring people are well treated and supported; respecting equality and diversity

- Relatives told us that staff were kind and attentive. One relative described staff as, "Honest, happy and very caring. We have a wonderful relationship with the whole team and it's very clear they care for my [family member] and run to hug them."
- A health and social care professional told us, "Southern Family Care come across as very caring and work well with the families and young people."

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

- People and their relatives were involved in planning and reviewing their care and the day to day decisions. One relative said, "Lots of choice around when and who it will be. We have a rota in advance that we work out together with the manager. They know what my [family member] needs and the level of care required is intimate, challenging and often difficult for them. They know how to calm them, relax them and keep them safe when they maybe frightened or upset. This is invaluable and a skill you can only acquire with true continuity of care. This is the only way this particular care package could work."
- Staff asked people before supporting them and explained what they were doing.



## 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 has 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

- Relatives told us that they were happy with the care their family members received, and it was delivered in a way they preferred. One relative said, "I have never ever had to raise any concerns, their care delivery has been 100 percent professional and brilliant from beginning to end." They went on to say, "[person's] care need is put before anything else and I truly believe we wouldn't get this service from any other care agency or staff across the whole county, continuity is key with this particular care package, along with building relationships and trust of which they have put time effort and pride into. We as a family cannot thank them enough. Peace of mind cannot be bought, and they have given us that freely which is precious to us."
- Care plans gave staff clear details of people's needs. They were easy to follow, and person centred.

#### 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.

- Staff took time to communicate with people who had impaired communication.
- Care plans set out how each person needed to be supported with communication and staff knew people's abilities and how they needed to approach people.
- Relatives told us that staff spent time getting to know their family members and how they needed to be supported with communication, even when it was difficult.

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

- Relatives told us that staff supported people to prevent them from feeling socially isolated. One relative said, "The carers often take [person] for the day whether it be the park, soft play or a visit elsewhere my [family member] is safe, and they are able to enjoy the environment to the full. Knowing [person] is cared for and their needs accommodated means the respite hours I have can be used to their best and fullest. I was able to access some rest, hobbies and time out. This has been key to my mental health and allowing me time to be myself and recharge my batteries. I cannot thank them enough for allowing me that luxury."
- Relatives told us that staff spent time developing positive relationships with their family members.

Improving care quality in response to complaints or concerns

• Relatives told us that they felt confident to raise an issue if one arose.

• There were no recent complaints. However, there was a system in place to manage complaints if they were to receive one.



## 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 has 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.

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

- The registered manager carried out checks and audits to help satisfy themselves that standards were to that expected and regulations were met. Relatives told us that they saw the registered manager frequently and were asked for their views.
- Where these checks had identified shortfalls, action plans were implemented to address the areas found as requiring change or improvement.
- Health and social care professionals were positive about the registered manager and the service provided. One professional said, "[registered manager] has received good verbal feedback from service users and families and has always been very supportive to them and ensuring that she can offer her help/cover in emergency situations."
- Accidents and incidents were reviewed to ensure there were no themes and trends. Also, to check all necessary action had been taken. Staff were made aware of what was needed to minimise reoccurrences.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- Relatives were positive about the registered manager and the running of the service. One relative said, "I am very, very happy. They supported us through some very difficult times post and pre-operatively and gave us lots of our 'normality' of life back as much as they could." They said they would recommend the service 'without hesitation'. Another relative told us, "All I can say is that Southern Family Care have been the best thing to have happened to us. Their professionalism is second to none, they are friendly, nothing is too much trouble and always there to support us. I would recommend their services wholeheartedly and with complete confidence."
- Staff felt that the service ran well. One staff member said, "We are a very close and friendly team."
- Feedback we had about the service was that they strived to always support people well and further develop wherever needed. We were told by relatives and health and social care professionals that the provider offered a unique service that put people at the heart of what they do.

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

- We found the registered manager to be open and transparent.
- Regular meetings discussed safeguarding issues and incidents. Any changes or updates to practice that were needed to provide a good standard of care was also discussed.

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

- Relatives told us they were always in contact with the registered manager. They were asked about their experiences and their views and suggestions were listened to.
- Staff also told us that there were regular meetings and the registered manager was always available which made them feel supported and gave clear understanding of what was expected of them. A staff member said, "I wouldn't want to work anywhere else."

#### Continuous learning and improving care

- Incidents and events were reviewed, and meetings discussed any learning as a result. One staff member said, "It's a family approach and we all work hard to try and improve the lives of children and families who have a challenging life."
- The registered manager worked with local agencies and authorities to keep up to date with their knowledge and practice.

#### Working in partnership with others

- The management team worked with the local authority to address areas they found as needing development. Feedback from the local authority was positive.
- The registered manager said, "We consider it a privilege to care for these children and give the support to these families."