

Affinity Homecare Shrewsbury Limited

Affinity Homecare Shrewsbury

Inspection report

Suite 1B Network House, Badgers Way
Oxon Business Park, Bicton Heath
Shrewsbury
Shropshire
SY3 5AB

Tel: 01743367000

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03 April 2019
04 April 2019

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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:

Affinity Homecare (Shrewsbury) is a domiciliary care agency that provides personal care and support to people living in their own homes. It provides a service to older adults some of whom are living with dementia and younger disabled adults. Not everyone using Affinity Homecare (Shrewsbury) received a regulated activity. CQC only inspects the service received by people provided with 'personal care': for example, help with tasks related to personal hygiene and eating. Where they do we also take into account any wider social care provided. At the time of our inspection 70 people were receiving the regulated activity of personal care.

People's experience of using this service:

People received safe support with their medicines by competent staff members. The provider had systems in place to respond to any medicine errors should they occur. The provider completed regular checks to ensure people received the right medicine at the right time.

The provider had assessed risks to people associated with their care and support. Staff members were knowledgeable about these risks and knew what to do to minimise the risk of harm to people. The provider had systems in place to respond to any additional risks to people. Staff members were aware of the necessary action they should take in the event of an emergency.

The provider, and management team, had good links with the local communities within which people lived. The provider had systems in place to ensure the Care Quality Commission was notified of significant events in a timely manner and in accordance with their registration.

People received safe care and support as the staff team had been trained to recognise potential signs of abuse and understood what to do to safely support people. Staff members followed effective infection prevention and control procedures when supporting people in their own homes. Staff members had appropriate personal protection equipment supplied by the provider.

The provider supported staff in providing effective care for people through person-centred care planning, training and one-to-one supervision. Staff members were knowledgeable about the relevant legislations that informed their practice and supported the rights of those receiving services from Affinity Homecare (Shrewsbury).

People were supported to refer themselves for additional healthcare services when required. When appropriate people were supported to maintain a healthy diet by a staff team which knew their individual preferences.

People received help and support from a kind and compassionate staff team with whom they had positive relationships. People were supported by staff members who were aware of their individual protected

characteristics like age, gender and disability. People were supported to retain their independence whilst living in their own homes.

People were provided with information in a way they could understand. The provider had systems in place to encourage and respond to any complaints or compliments from people or those close to them.

More information in Detailed Findings below.

Rating at last inspection:

Requires Improvement for the key questions 'Safe,' 'Effective,' 'Responsive' and 'Well-led,' and Good for 'Caring.' (Published 3 May 2018). At that inspection we found people's medicines were not safely managed, risks were not comprehensively recorded, staff training did not account for people's specific health needs, care and support plans did not fully reflect people's needs and the providers quality monitoring systems were not effective. At this inspection Affinity Homecare (Shrewsbury) had made the necessary improvements.

Why we inspected:

This was a planned inspection based on the rating at the last inspection, 'Requires Improvement.'

Follow up:

We will continue to monitor all intelligence received about the service to ensure the next planned inspection is scheduled accordingly.

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

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.

Affinity Homecare Shrewsbury

Detailed findings

Background to this inspection

Background to this inspection

The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection checked whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Inspection team:

One inspector and an expert by experience carried out this inspection. An expert by experience is a person who has personal experience of using or caring for someone who uses this type of care service. In this instance a family member receiving care in a residential setting.

Service and service type:

Affinity Homecare (Shrewsbury) is a domiciliary care agency that provides personal care and support to people living in their own homes.

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:

Inspection site visit activity started on 02 April 2019 and ended on 04 April 2019. We visited the office location on 04 April 2019 to see the registered manager and staff; and to review care records and policies and procedures.

We gave the service 48 hours' notice of the inspection visit because it is a domiciliary care provider and the registered manager is often out of the office supporting staff or providing care. We needed to be sure that

they would be in.

What we did:

Before our inspection visit, the provider completed a Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. We also reviewed information we held about the service in the form of statutory notifications received from the service and any safeguarding or whistleblowing incidents, which may have occurred. A statutory notification is information about important events, which the provider is required to send us by law.

We asked the local authority and Healthwatch for any information they had which would aid our inspection. We used this information as part of our planning. Local authorities together with other agencies may have responsibility for funding people who used the service and monitoring its quality. Healthwatch is an independent consumer champion, which promotes the views and experiences of people who use health and social care services.

We spoke with eight people who received services from Affinity Homecare (Shrewsbury) and four relatives. In addition, we spoke with the registered manager, the deputy manager and four care staff members.

We reviewed a range of records. This included three people's care and support plans and medication records. We confirmed the safe recruitment of two staff members and reviewed records relating to the provider's quality monitoring, health and safety and staff training.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

Good: People were safe and protected from avoidable harm. Legal requirements were met.

At our last inspection (published 03 May 2018) we identified a breach in regulation regarding the key question 'Safe'. This was Regulation 12 HSCA Regulations 2014 - Safe care and treatment. We identified that people's medicines were not safely managed. Risk assessments were generic and not individual to people and their specific circumstances. We asked the provider to complete an action plan to show what they would do, and by when, to improve this key question. At this inspection we found that improvements had been made and therefore rated this key question 'Good'.

Using medicines safely.

- People were safely supported with their medicines by a trained and competent staff team.
- One relative told us, "They (staff) give [relative's name] their tablets from the boxes. They make sure they get them and there has not been a problem." We saw medicines were accurately recorded.
- The provider had systems in place to respond to any medicine errors, including contact with healthcare professionals, investigations into the error and, if needed, retraining of staff members.
- People had guidelines in place for staff to safely support them with 'when required' medicines including the maximum dosage within a 24-hour period to keep people safe. Staff members we spoke with were aware of these guidelines.

Assessing risk, safety monitoring and management.

- One person told us, "I do feel safe. They (staff) are very good and keep me safe. I've had falls in the past and I feel safe with them."
- People's care plans contained risk assessments linked to their support needs. These explained the actions staff took to promote people's safety and ensure their needs were met appropriately. For example, the risks arising from people's mobility difficulties and the assistance they required as a result.
- Risk assessments were updated following changes in people's needs. For example, one person told us how they mobility had improved over time and they could now access areas of their home they couldn't before. Their risk assessment was updated to reflect this.
- People told us staff members followed their individual risk assessments to ensure safe care and support.

Systems and processes to safeguard people from the risk of abuse

- People were protected from the risks of ill-treatment and abuse as staff members had received training and knew how to recognise and respond to any potential concerns. One person said, "I do feel safe with everyone who helps me."
- Information was available to people and staff on how to report any concerns.
- The provider had made appropriate notifications to the local authority to keep people safe.
- People told us the provider completed safety checks at their properties to ensure it was safe for them to be supported in.

- Staff members had received specific training on fire safety and knew what to do in the event of an emergency to keep people safe.

Staffing and recruitment.

- People told us staff members arrived when expected and stayed for the agreed amount of time. One person said, "I get a rota which [staff member's name] brings on a Sunday. I get different people visit me but I don't mind as they are all fine. Once or twice the carers have been off sick and cancelled at the last minute but they (management team) have always got somebody to me on time."
- The provider followed safe recruitment processes when employing new staff members. The provider had systems in place to address any unsafe staff behaviour including disciplinary processes and re-training if needed.

Preventing and controlling infection.

- The provider had effective infection prevention and control systems and practices in place. One person said, "They (staff) wear gloves and aprons. They are absolutely clean and tidy. I have seen them wash their hands."
- Staff members were provided with personal protective equipment to assist in the prevention of communicable illnesses.

Learning lessons when things go wrong.

- The provider reviewed any incidents or accidents to see if any further action was needed and to minimise the risk of reoccurrence. For example, all incidents, accident and near miss incidents were recorded and passed to the registered manager for their review. They analysed these incidents to identify if anything else could be done differently in the future to minimise the risks of harm to people.

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.

Good: People's outcomes were consistently good, and feedback confirmed this.

At our last inspection (published 03 May 2018) we found staff were not provided with training about people's specific health needs and how to support them effectively. At this inspection we found that improvements had been made and therefore rated this key question 'Good'.

Staff support: induction, training, skills and experience.

- People were supported by a well-trained staff team who felt supported by the provider and the management team. Staff members we spoke with told us they received regular support and supervision sessions. These were opportunities for staff members to discuss their performance and any concerns related to their work or personal development.

One staff member told us about the training they had completed since starting with Affinity Homecare (Shrewsbury). They said, "I did all my initial training and then completed a level two in medicines. I have also completed a specific module to increase my knowledge of diabetes. This was because I supported one person and needed to be aware of how this impacted on their life."

- New staff members completed a structured introduction to their role. This included completion of induction training, for example, adult safeguarding and infection prevention and control.
- In addition, new staff members worked alongside experienced staff members until they felt confident to support people safely and effectively. One person told us, "New staff members come out and help me alongside other staff. It is good that they are able to learn on the job." Staff members we spoke with found this process supportive. One staff member said, "There is no need to rush things. I took some time getting to know people before I was confident to work on my own."
- Staff members who were new to care were supported to complete the care certificate. The care certificate is a nationally recognised qualification in social care.

Supporting people to eat and drink enough with choice in a balanced diet.

- Not everyone we spoke with received assistance with their eating and drinking. However, when they did they were supported by staff who knew their preferences and supported them to maintain a healthy diet. One person said, "They (staff) always ask me what I want for my lunch and leave me with a drink."
- Staff members told us they were prompted by the management team to remind people to drink plenty of fluids when the weather temperatures increased and therefore helped to prevent dehydration.

Ensuring consent to care and treatment in line with law and guidance.

- All the staff members we spoke with had a clear understand of The Mental Capacity Act 2005 (MCA) and how this was effectively applied to those they worked with to ensure their rights were maintained.
- The 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. Any applications must be made to the Court of Protection. At the time of our inspection no one was receiving care or support who was subject to such a Court Order. We checked whether the service was working within the principles of the MCA. The provider had trained and prepared staff in understanding the requirements of the MCA.

- People were supported to have choice and control over their lives and staff supported them in the least restrictive way possible; the policies and systems supported this practice. When someone could not make decisions for themselves, the provider and staff knew what to do in order to protect the individual's rights.

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

- People's needs were assessed and regularly reviewed. People's physical, mental health and social needs had been holistically assessed in line with recognised best practice.
- One person told us a staff member came out to their home and completed an assessment based on what they could do themselves and what they needed assistance with. They said, "This was quite comprehensive. I feel I get just the right amount of support I need."
- Staff members could tell us about people's individual needs and wishes. People were supported by staff who knew them well and supported them in a way they wanted.
- People's protected characteristics under the Equalities Act 2010 were identified as part of their needs assessment. Staff members could tell us about people's individual characteristics and knew how to best support them. This included, but was not limited to, people's religious and cultural diets and preferences.

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

- Staff members had effective, and efficient, communication systems in place to share appropriate information with those involved in the support of people receiving services from Affinity Homecare (Shrewsbury). One relative told us how staff members liaised with healthcare professionals following their family member's health changing. They told us how the staff members gathered up-to-date information and shared this with others providing care. This was to ensure their relative received consistent support from all those assisting them.

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

- People had access to healthcare provisions within their own communities and self-referred for services when they needed it. However, when people needed assistance making any such referrals they told us Affinity Homecare (Shrewsbury) helped them. For example, one person told us they were a little hard of hearing and staff members made the phone calls to the GP practice for them.
- Staff members we spoke with were knowledgeable about people's healthcare needs and knew how to support them in the best way to meet their personal health outcomes.

Adapting service, design, decoration to meet people's needs.

- People remained responsible for maintaining their own home environment. As part of the providers assessment process they made recommendations for adaptations which would assist people to remain in their own home. For example, one person told us a grab rail was recommended by [staff member's name] to assist with their mobility. This person told us they passed this on to their landlord who provided the grab rail.

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.

Good: People were supported and treated with dignity and respect; and involved as partners in their care.

At our last inspection (published 03 May 2018) we rated this key question 'Good'.

Ensuring people are well treated and supported.

- People told us they were treated with care by a compassionate and respectful staff team. Those we spoke with described the staff members supporting them as, "Lovely", "Kind," and "Fantastic."
- All those we spoke with were complementary about the staff supporting them and the management team.
- All staff members, we spoke with, talked about those they supported with fondness and compassion.
- People were supported at time of upset and when they were anxious. We saw one member of the management team reassuring one person on the phone who was upset. They reassured the person and asked if they would like someone to pop out and see them. The person declined this offer of support. This was then passed onto the staff member supporting them later in the day so they could check to see if there was any additional support they needed.

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

- People told us they were supported to be involved in making decisions about their care. One person told us they had expressed a preference to be supported by female staff members. Although they were happy to receive assistance from any staff member regardless of gender. They said they received a phone call after a staff member phoned in sick. They were given the option of a male or female carer. They told us they expressed a preference and this was respected.
- Staff members we spoke with knew those they supported well and could tell us what people's individual preferences were.
- As part of the care assessment making process the provider had systems in place to identify and support people's protected characteristics from potential discrimination. Protected characteristics are the nine groups protected under the Equality Act 2010. They include, age, disability, gender reassignment, marriage and civil partnership, religion etc. The care and support plans we saw recorded people's protected characteristics and how staff members and the management team assisted them to retain their individual identities. We saw the registered manager had made arrangements to educate staff members on how to have sensitive and supportive conversations with people. They told us this was so staff members could encourage people to talk about elements of their lives which were important to them. They went on to say, "This would help empower people to retain their personal identities which had been important to them throughout their lives."

Respecting and promoting people's privacy, dignity and independence.

- People told us they were treated with dignity and respect and their privacy was supported by staff members. We saw information which was confidential to the person was kept securely and only accessed by

those with authority to do so.

- People were supported to retain their independence. One person said, "I'm very pleased. Although my sense of balance has gone and I can't stand for long they (staff) encourage me to do what I can for myself and stay independent."

Is the service responsive?

Our findings

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

Good: People's needs were met through good organisation and delivery.

At our last inspection (published 03 May 2018) we found people's care and support plans did not contain the level of detail required. At this inspection we found that improvements had been made and therefore rated this key question 'Good'.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control.

- People, and if needed those close to them, were involved in the development and review of their own care and support plans. We saw these plans gave the staff information on how people wanted to be assisted. One person described how their needs changed. They said the registered manager came out to see them and went through the changes with them. The care and support plan was amended and the person expressed their happiness with the changes which fully met their needs. All those we spoke with were happy with their involvement and amount of detail contained in these plans.
- When it was appropriate relatives were kept informed about changes to people's health and needs. One relative told us they would receive a phone call if there was ever a change or a concern regarding their family member. They went on to tell us they found this reassuring as they were not always around to support them themselves.
- We saw people's care and support plans were reviewed to account for any personal or health changes. These plans also reflected advice and guidance from visiting healthcare professionals.
- People had information presented in a way that they found accessible and in a format that they could easily comprehend. The management team were aware of the accessible information standards, and were in the process of implementing the standards as part of people's individual reviews of care. The Accessible Information Standards sets out a specific, consistent approach to identifying, recording, flagging, sharing and meeting the information and communication support needs of patients, service users, carers and parents with a disability, impairment or sensory loss.

Improving care quality in response to complaints or concerns.

- We saw information was available to people, in a format appropriate to their communication styles, on how to raise a complaint or a concern if they needed to do so.
- The provider had systems in place to record and investigate and to respond to any complaints raised with them.

End of life care and support.

- Affinity Homecare (Shrewsbury) was not supporting anyone who had been identified at the end of their life at this inspection. The registered manager told us should this be the case, in the future, they would use their care and support planning to identify the person's preferences. They would also engage the services of other specialised healthcare professionals to ensure the person's needs and 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.

Good: ☐ The service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

At our last inspection (published 03 May 2018) we identified a breach in regulation regarding the key question 'Well-led'. This was Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. We found the provider's quality monitoring systems were not effective in identifying and driving good care. We asked the provider to complete an action plan to show what they would do, and by when, to improve this key question. At this inspection we found that improvements had been made and therefore rated this key question 'Good'.

Continuous learning and improving care.

- The management team had systems in place to monitor the quality of the service that they provided. This included checks of the medicine administration records and reviews of the care and support people received. We saw these checks were completed regularly and actions were completed promptly to ensure people received good care and support. As part of these checks the management team identified a pattern of poor recording regarding people's medicines. The management team undertook relevant checks to assure themselves these were recording errors and not administration errors. As a result, they acted to prevent reoccurrence and to further educate staff members. All the staff members we spoke with could tell us about this and the changes which were made. This indicated to us the provider and registered manager had effective monitoring system in place and worked in a transparent and open manner with staff members and those receiving care.
- The registered manager told us that they kept themselves up to date with developments and best practice in health and social care to ensure people received positive outcomes. This included regular attendance at a local provider representation organisation, updates and newsletters from professional organisations.

Planning and promoting person-centred, high-quality care and support; and how the provider understands and acts on duty of candour responsibility.

- People and relatives told us they had a positive relationship with the registered manager and found them to be available and engaging. Everyone we spoke with was complementary about the management team and felt supported by them.
- Staff members we spoke with told us they found the management team supportive and approachable. One staff member said, "I can go to [registered manager's name] at any time day or night. They are very supportive and nothing is ever too much trouble for them."
- We saw the management team, and provider, had systems in place to investigate and feedback on any incidents, accidents or complaints.

Managers and staff are clear about their roles, and understand quality performance, risks and regulatory

requirements.

- At this inspection a registered manager was in post and present throughout. The registered manager understood the requirements of registration with the Care Quality Commission. The provider had appropriately submitted notifications to the Care Quality Commission. The provider is legally obliged to send us notifications of incidents, events or changes that happen to the service within a required timescale.
- We saw the last rated inspection was displayed in accordance with the law at the offices of Affinity Homecare (Shrewsbury) and also on their website.

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

- We saw people were involved in decisions about their care and support and were asked for their opinion. We saw details of the latest service user satisfaction survey which the management team were in the process of collating. All the comments we viewed were positive about the service people and their family members received. Staff members were also asked for their views on the role they performed by way of an electronic survey. Again, the management team were in the process of collating the results. Staff members we spoke with told us they felt valued by the management team and their views and opinions were encouraged. One staff member told us about the staff reward scheme and the carer of the month initiative. They said the carer of the month was nominated by people or their family members and they received a certificate and box of chocolates as a thank you. They went on to say it is a small token which helped them feel appreciated.
- Staff members took part in regular staff meetings where they could discuss elements of the work they completed. One staff member said, "We can all make suggestions and the management team actually listens to you here."
- Staff members understood the policies and procedures that informed their practice including the whistleblowing policy. They were confident they would be supported by the provider should they ever need to raise such a concern.

Working in partnership with others.

- The management team had established and maintained good links with the local communities within which people lived. This included regular contact with local healthcare professionals which people benefited from. For example, GP practices and District Nurse teams.