

Care Angels (Batley) Ltd

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Inspection report

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05 December 2019
09 December 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?

Outstanding ☆

Is the service responsive?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Care Angels (Batley) is a domiciliary care agency providing personal care to people living in their own homes within Batley and surrounding areas. 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 the inspection 34 people were receiving personal care.

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

People repeatedly described the care provided as "exceptional" and "outstanding." Staff were referred to as angels and we were provided with a number of examples of when staff had gone above and beyond to enhance people's self-worth and well-being. One person said, "[Registered manager] tells me I am inspirational. Staff treat me like I am inspirational too." The caring nature of the management team extended to family members and staff also.

Everyone we spoke with told us the service was well-led. The management team and staff had clear roles and responsibilities and were committed to ensuring the service provided was good. There was an emphasis on developing a person-centred culture within the service. Staff praised the skills, commitment and caring nature of the management team.

People and relatives told us the service was person-centred. They said care was delivered in line with preferences and wishes. People were consulted with and involved in developing their care where appropriate. There was a focus on developing independence and promoting relationships and community networks. One person told us their life had changed for the better since they had been supported to attend an activity of their choosing. People told us concerns were proactively addressed by the senior management team. Lessons were learned from any feedback provided.

People told us they felt safe when being supported by staff from Care Angels (Batley). People described staff as reliable. Overall, people said they were supported by a staff team who knew them well. Staff said they were happy with the way their visits were planned and said they were not rushed to complete tasks. Processes continued to be implemented to ensure safeguarding concerns were taken seriously and responded to. Staff were aware of processes to follow should they have any concerns about the care and treatment of people who used the service. Risk was appropriately managed and addressed.

When people required support with diet and nutrition, care plans detailed support required. During the inspection we made some recommendations regarding documenting people's dietary requirements. The registered manager acted swiftly to make the improvements in line with good practice. Staff told us they were adequately supported by the management team and were happy with the training provided.

Consent was routinely sought in line with good practice. The service worked within the principles of the

Mental Capacity Act 2005 (MCA). 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. Although capacity was routinely assessed, best interests decisions were not always decision specific. We have made a recommendation about this.

Overall, people said they were supported by a staff team who knew them well.

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 31 May 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?

Outstanding ☆

The service was very 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.

Care Angels (Batley) 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 Care Act 2014.

Inspection team

The inspection team was made up of one inspector and an Expert by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

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

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

We gave the service 24 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 04 December 2019 and ended on 09 December 2019. We visited the office location on 04 and 05 December 2019.

What we did before the inspection

We reviewed information we had received about the service since registration. This included looking at information held on our database about the service for example, statutory notifications completed by the registered provider. We used the information the provider sent us in 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 also sought

feedback from the local authority contracts and commissioning teams and Healthwatch. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England. This information helps support our inspections. We used all this information to plan our inspection.

During the inspection

We spoke with three people who used the service and eight relatives by telephone. We also carried out one home visit to speak with a person about their experiences and to look at their records, (with their consent). We spoke with the registered manager, the recruitment coordinator and five members of staff who were responsible for providing care to people.

To gather information, we looked at a variety of records. This included care records related to five people, and medicines administration records. We also looked at information related to the management of the service. This included audits, policies and procedures and quality assurance documents. We did this to check the management team had oversight of the service and to make sure the service was appropriately managed.

After the inspection

We continued to communicate with the registered manager to corroborate our findings.

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

- Assessment of risk was addressed but was not always consistent. Risk assessments took into consideration the working environment and equipment required to assist people. When people had specific medical conditions which posed risk, these had been considered and included within care plans to promote safety. However, we noted choking risk wasn't always addressed. We discussed this with the registered manager who took immediate action to ensure all risks were clearly identified and addressed.
- People and relatives told us they felt safe when being supported by staff from Care Angels (Batley) Limited. Feedback included, "I'm definitely safe" and "I have never felt safer."

Using medicines safely

- Medicines were managed in line with good practice guidance to promote safety.
- People told us they were happy with the support they received with their medicines. One person said, "Staff manage my medicines as I sometimes forget. The carers are in full control of them. They order them and check them in" and "They keep records for each other to show what they have given and when its due."
- Staff who administered medication said they had received appropriate training. They told us a member of the management team regularly carried out observations to make sure they were giving people their medicines safely.
- Although good practice was followed this was sometimes inconsistent and did not always reflect the service's policy. For example, when medicines were prescribed on an as and when basis, details about the medicines were not always fully complete. We highlighted this to the registered manager who took immediate action.

Systems and processes to safeguard people from the risk of abuse

- Processes were established to protect people from the risk of harm and abuse. Staff told us they had received safeguarding training. In addition, they had access to a safeguarding policy and were aware of reporting procedures to follow if they suspected someone was being abused. Safeguarding was actively promoted and discussed within team meetings and staff supervisions.
- Staff were confident the management team would take immediate action if any concerns were reported. Staff confirmed they had a whistle-blowing policy and understood the importance of reporting concerns to external agencies if required.

Staffing and recruitment

- Staff were suitably deployed to ensure people's individual needs were met. People and relatives told us, "They're good on time" and "If they're going to be late, someone from the office rings." We reviewed written feedback provided by one relative. The relative thanked the registered provider for the consistent staff. They

said, "The consistency of staff has made them feel happy, safe and well again."

- Following the last inspection, the service had introduced an electronic scheduling system to plan and monitor visits. Consideration was taken to ensure there was consistency of staff and enough travelling time between visits. Staff had to use technology to log in and out of visits. Visit times were monitored by staff at the office.
- Staff said they had time to carry out their duties and spend time with people. People and relatives confirmed staff were reliable and only one person of the eleven told us they had experienced a missed visit due to snow.
- Staff told us processes continued to be implemented to ensure staff were safely recruited. This included checking people's past work histories and suitability for working with people who may sometimes be vulnerable.

Preventing and controlling infection

- Systems and processes were established to prevent the spread of infection. Staff confirmed they had received training and said personal protective equipment was available for personal use.
- Spot checks upon staff took place and checks were in place to ensure staff followed good practice principles to prevent the spread of infection.

Learning lessons when things go wrong

- The registered provider understood the importance of learning lessons following unplanned incidents. For example, they had purchased a car which would allow them to transport staff in unplanned weather such as snow and floods.
- The registered manager kept a record of all accidents and incidents which occurred. Accidents and incidents were analysed and reviewed, and learning was shared with the staff team.

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.

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

- People were supported to eat and drink appropriate foods which met their needs and preferences. People told us they were able to make their own choices when they required support with eating and drinking.
- Relatives confirmed staff were aware of people's diets and individual needs. However, we found care documentation didn't always follow good practice. When people required a special diet; the texture of foods being prepared was not always clear in people's care documentation. We highlighted this to the registered manager who took immediate action to ensure records were clear and in line with good practice.

We recommend the registered provider reviews systems and processes to ensure good practice in relation to eating and drinking are consistently addressed and implemented.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law; Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- People's needs were assessed before a person was offered a service. We saw evidence of people being consulted with to ensure their needs and preferences could be met.
- Care needs were routinely assessed and monitored. Care records were regularly reviewed and updated by a senior member of staff when people's needs changed. One person said, "They change things as needed".
- We saw evidence of multi-disciplinary working taking place to support people to access healthcare services and live healthier lives. For example, the service had worked with a behaviour support team when supporting a person who sometimes displayed behaviours which challenged the service.
- The registered manager understood the importance of promoting health and well-being. They told us in line with good practice guidance, they had identified a training need for staff to promote oral care and had found some training for staff. In addition, they had been working with healthcare providers including opticians and dentists to find services who could carry out home visits to people who required visits at home.

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.

- Consent to care and treatment was sought in line with good practice.
- People's capacity was routinely assessed and there was clear documentation to show when a person was able to make their own decisions. When people lacked capacity to make decisions, best interests discussions and meetings had taken place, Although these were not always decision specific. This was fed back to the registered manager who agreed to take immediate action.

We recommend the registered manager reviews systems and processes to ensure the MCA is consistently applied throughout the service.

Staff support: induction, training, skills and experience

- Processes continued to be implemented to support staff in their roles. Staff told us they were provided with a comprehensive induction when they first started work. Additionally, the senior management team carried out spot checks and worked alongside staff to observe practice.
- Staff were expected to undertake regular supervisions with a more experienced staff member. Supervisions allowed staff to discuss performance and training needs with a more experienced member of staff.
- The registered manager told us they had invested heavily in training in the past year. They told us they were moving towards more classroom-based learning as they believed this would increase staff knowledge and confidence. Staff confirmed they received regular training to help them carry out their roles. They told us they were happy with the level of training provided and said they felt suitably equipped to carry out all tasks expected.

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 now improved to outstanding. This meant people were truly respected and valued as individuals; and empowered as partners in their care in an exceptional service.

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

- People confirmed they were well treated and supported. One person told us before they were supported by the service they were struggling emotionally. They said, "They have turned my life around."
- We looked at written feedback provided by people and relatives. Staff were repeatedly described as, "angels", 'exceptional', and 'outstanding.' One person had written, "Thank you for the excellent care. We were delighted with the level of kindness shown to us both. The carers showed a willingness to go over and above and what we expected."
- People and relatives confirmed staff were exceptionally kind and caring. One person said, "[Registered manager] tells me I am inspirational. Staff treat me like I am inspirational too." The person told us staff were genuinely concerned about people's welfare. They said the registered manager had called outside of work time to check they were ok. The person said, "I've been receiving a service a long time. No other organisation has ever made me feel like I did after that visit. They really care. Made me feel like I matter. I've never felt that before. The service is outstanding." Another person confirmed staff had taken their washing home and completed it for them when they had no access to a washing machine.
- Caring relationships extended to family members as well as people who received a service. One relative told us, "They've been really good to us [relatives] as well." During the inspection visit we overheard a relative calling the office for help not related to their family member. Staff happily obliged in helping.
- The registered manager understood the importance of supporting people to feel valued. They had identified people who were going to be alone at Christmas and had agreed to transport them to a Christmas party. The registered manager told us, "Initially, we were going to cook everyone a Christmas dinner and take it to them, but we realised no-one should be alone at Christmas so now we are taking people to a Christmas party. No one should be alone at Christmas."
- People and relatives valued the relationships they had developed with the staff team. Feedback included, "We are like a little family" and, "If I ever had a daughter, I'd want her to be like [name of carer]." Also, "My care team are like my extended family".

Respecting and promoting people's privacy, dignity and independence

- People and relatives told us privacy, dignity and respect were always considered. We observed staff working in one person's home. Staff were mindful they were working in someone's home and respected and promoted privacy.
- We saw wherever possible, people were encouraged to maintain their own independence. Care plans detailed where support was required so that independence could be considered and maintained. One person told us, "They are good at standing back and jumping in if needed."

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

- People told us they were able to express their views and were involved in making decisions about their care where appropriate. One person said, "I am in control." They told us they had recruited their own staff team and had written their own care plan for staff to follow. The person confirmed the care they received was delivered how they expected it to be.
- The registered manager understood the importance of effective communication. When people required support to express their views they worked proactively to ensure people's views could be heard.
- The registered manager was aware of the importance of accessing other support such as advocates when people did not have help from families to express their views. Advocates are independent people who can support people express their views and make decisions about their care.

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; 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 encouraged to make choices and have control within their lives. Support was flexible, according to people's needs and wishes.
- The service supported people to maintain relationships to combat isolation and follow their interests. One person told us they were supported to attend a social activity of their choosing. They told us this activity was very important to them and impacted positively upon their well-being. They told us, "It has made an unbelievable difference to me."
- Personalised care was promoted. One person told us, "You are not just a name and number here."

End of life care and support

- The registered provider understood the importance of ensuring people received high-quality care at the end of their lives. Training had been provided to staff around key concepts of end of life care.
- Staff confirmed they would work with other qualified and experienced health professionals to ensure people received high quality end of life care. They said that dealing with a person's passing was sometimes hard when relationships had been developed. The registered manager said they gave staff time off to grieve if they had been affected by a person's death.

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.

- The registered manager was aware of the need to provide information in an accessible manner. Care records included ways in which to communicate effectively with people. Documents had been made into easy-read guides using symbols. Provisions were in place to support some people with interpreters when English wasn't their first language.

Improving care quality in response to complaints or concerns

- The registered provider had a complaints policy and procedure for managing complaints. Concerns were dealt with seriously and in a timely manner. The registered manager said this prevented minor concerns developing into formal complaints.
- People and relatives who had experience of raising concerns, told us they were very happy with how the concerns were managed. Feedback included, "There was an incident. [Registered manager] sorted it out

straight away" and "We sat and talked, and it was sorted."

- Ten of the eleven people we spoke with said they were very happy with the service provided. One relative told us they had some concerns, but these had been fed back to the registered manager, so they could be dealt with.

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.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; Continuous learning and improving care; Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- People, relatives and staff were complimentary about the way in which the service was managed. Everyone we spoke with said the service was well-organised. Feedback included, "The care is excellent" and "I've never had a company so approachable and I've had care for over 20 years." Also, "[Registered manager] is the best manager I have ever had."
- There was an emphasis on developing a service which was built around empowerment and shared values. The recruitment coordinator told us they had recently undertaken training and changed the recruitment process to ensure only staff who shared the values of the service were recruited.
- The provider understood the importance of developing a high-quality service which achieved good outcomes for people and staff. One person told us before they were supported by the service they were struggling emotionally. They said, "They have turned my life around." Staff said that working for Care Angels (Batley) Limited was a positive experience for them too. One staff member said, "The managers have gone above and beyond to help me. They are really, really kind." Another staff member said, "Everyone who works here is so positive." We saw that staff were valued by management and rewarded for hard work and dedication to the service. This included having employee of the month awards and an annual celebration party for staff.
- The provider understood the importance of risk, regulatory requirements and the need to continuously improve the service. There was a comprehensive auditing system to ensure there was enough oversight within the service to promote safe, effective and responsive care.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- People who used the service and relatives were encouraged to provide feedback on the service. We reviewed quality surveys and saw feedback was consistently positive.
- The registered provider understood the importance of partnership working. We saw evidence of working with other agencies such as the local authority, colleges of further education and universities. Good practice was embraced and implemented within care.
- Staff told us communication within the service was good. Regular team meetings had been held to communicate and discuss topics of importance. Staff confirmed they could contribute to team meetings and suggest improvements. One staff member said, "We communicate as friends and support each other as a team."

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 was aware of the duty of candour and their legal responsibility to be open and honest.