

Apollo Healthcare & Training Ltd

# Clarity Homecare (Bolton)

## Inspection report

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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

Clarity Homecare (Bolton) is a domiciliary care agency providing personal care to people living in their own homes.

Not everyone who used the service received personal care. CQC only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do, we also consider any wider social care provided. At the time of our inspection there were 27 people using the service, 25 of whom were receiving the regulated service.

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

The service had systems in place to help safeguard people from the risk of abuse. Individual and general risks were assessed and managed by the service. Medicines were managed safely. The service ensured appropriate infection control and prevention measures were in place.

Staff were recruited safely. Staff received a thorough induction and sufficient on-going training to ensure their skills were appropriate to meet people's needs.

People's needs were thoroughly assessed and care plans included appropriate health and personal information. Nutritional and hydration needs, such as special diets were adhered to. Referrals were made to other professionals and agencies as required.

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 said they were well treated and supported and were encouraged to be as involved as possible in their care delivery. People's privacy and dignity were respected. People were encouraged to be as independent as possible. People's communication requirements were adhered to.

People were aware of how to make a complaint. The management team were open and honest in their responses to concerns and suggestions. People felt the management team and staff were accessible to talk to them any time.

Auditing systems and regular staff checks provided a way for the service to learn, address issues and improve service delivery. The service worked well with other professionals and agencies.

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

This service was registered with us on 4 March 2021 this is the first inspection.

### Why we inspected

This was a planned inspection to look at all five domains and to rate the service.

### Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

## The five questions we ask about services and what we found

We always ask the following five questions of services.

### Is the service safe?

The service was safe.

Details are in our safe findings below.

Good 

### Is the service effective?

The service was effective.

Details are in our effective findings below.

Good 

### Is the service caring?

The service was caring.

Details are in our caring findings below.

Good 

### Is the service responsive?

The service was responsive.

Details are in our responsive findings below.

Good 

### Is the service well-led?

The service was well-led.

Details are in our well-led findings below.

Good 

# Clarity Homecare (Bolton)

## Detailed findings

### Background to this inspection

#### The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Health and Social Care Act 2008.

#### Inspection team

The inspection was carried out by one inspector.

#### Service and service type

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

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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. At the time of our inspection there was not a registered manager in post. However, the manager of the service was in the process of registering with CQC.

#### Notice of inspection

Inspection activity started on 12 April 2022 and ended on 25 April 2022. We visited the location's office on 14 April 2022.

We gave the service 48 hours' notice of the site visit. 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. The provider was not asked to complete a Provider Information Return (PIR) prior to this inspection. A PIR is information providers send us

to give some key information about the service, what the service does well and improvements they plan to make. We used information gathered as part of monitoring activity that took place on 22 February 2022 to help plan the inspection and inform our judgements. We used all this information to plan our inspection.

#### During the inspection

We spoke with one person who used the service and four relatives about their experience of the care provided. We spoke with four members of staff, including the manager, a care coordinator, a care assistant and the Nominated Individual. A nominated individual is responsible for supervising the management of the service on behalf of the provider.

We reviewed a range of records. This included three people's care records and medication records. We looked at electronic staff files in relation to recruitment. A variety of records relating to the management of the service, including policies and procedures were reviewed.

# Is the service safe?

## Our findings

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

This is the first inspection of this newly registered service. This key question has been rated good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- The service had systems in place to help ensure people were safeguarded from the risk of abuse.
- Safeguarding concerns were logged and escalated to the local safeguarding team as required.
- Staff had completed safeguarding training and those we spoke with were confident to recognize and report any issues.
- Staff told us they would be confident to report any poor practice they may witness.

Assessing risk, safety monitoring and management

- Individual and general risks were assessed and managed by the service.
- Care plans included risk assessments around issues such as falls, mobility, medicines and nutrition. These were updated as required.
- Environmental and lone working risk assessments were also in place.

Staffing and recruitment

- Staff files included all required documentation to aid safe recruitment of staff.
- Staffing levels were satisfactory and the management team were happy to cover some calls in the event of unplanned staff shortages.
- A new care coordinator and field care supervisor had recently been recruited, and the provider felt this would be really helpful in the delegation of some management responsibilities.
- Recruitment was on-going and newly appointed staff were due to attend induction training in the near future.

Using medicines safely

- Medicines were managed safely at the service.
- There were policies and procedures to guide staff on all aspects of medicines management.
- Staff completed medicines training, and their competence to administer medicines was checked regularly to help ensure their skills remained appropriate.

Preventing and controlling infection

- An appropriate policy and procedure was in place with regard to prevention and control of infection.
- Staff were required to complete infection control training and had undertaken additional learning with regard to COVID-19 and the use of personal protective equipment(PPE).

Learning lessons when things go wrong

- All incidents, accidents and safeguarding concerns were recorded and followed up appropriately.

- The manager planned to implement monthly audits to ensure any patterns or trends could be identified and addressed going forward.

# 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.

This is the first inspection for this newly registered service. This key question has been rated 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

- People's needs were thoroughly assessed and recorded within their care plans.
- Care plans included relevant information about people's health and personal circumstances.
- Care and support needs were reviewed six-monthly, or when anything changed.
- A call logging in and out system helped ensure visits were completed at the required time and for the appropriate duration.

Staff support: induction, training, skills and experience

- Staff were given a thorough induction to the service, including training the provider considered mandatory, reading key policies and completing shadowing shifts. A staff member told us, "You can have more training or stay on shadowing if you are not confident."
- Further training was completed on line and refresher courses were on-going. Another staff member said, "It is the best training I have had."
- Staff supervisions were completed regularly to provide a forum to discuss work issues, learning and development needs.

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

- People's nutritional and hydration needs were recorded within their care plans, and intake monitored where required.
- Food allergies were recorded clearly and special diets followed appropriately.

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

- Care plans included details of other health professionals involved with the individual. For example, one person was under the speech and language therapy team (SALT) with regard to nutrition. Their particular diet, choking risk and risk of dehydration were documented. Advice from the SALT team was followed appropriately to help keep the person healthy.
- Referrals were made to other professionals and agencies as required.

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.

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.

- Mental capacity assessments were in place and consent forms signed as required.
- Staff had completed MCA training and those we spoke with were aware of the principles and application of the Act.

# 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.

This is the first inspection for this newly registered service. This key question has been rated 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 said they were well treated and supported. One relative said, "I am over the moon with them [the service], absolutely over the moon. They go out of their way."
- Care plans included information about people's religion, culture and sensory needs.
- Staff spoken with demonstrated respect for people's diversity.

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

- People were encouraged to be as involved as possible in decisions about their care and support.
- There was clear evidence within care plans of people's input into how they wished their care to be delivered, clothes they preferred to wear, routines, equipment used, food and drink preferences.
- People were given a service user guide when they commenced the service. This included all relevant information about what was offered, staff and management profiles and how people's views would be sought.

Respecting and promoting people's privacy, dignity and independence

- People's privacy and dignity were respected. One relative told us, "They [staff] really keep [person's] dignity. They think the world of her." Another relative said, "Everything [person] needs is done. They do everything with respect and dignity."
- People were encouraged to be as independent as possible. Their personal goals and achievements were recorded so staff could assist them with these.

# Is the service responsive?

## Our findings

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

This is the first inspection for this newly registered service. This key question has been rated 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

- Care was planned to help ensure people had choices. People's preferences and wishes were documented and respected.
- Staff we spoke with knew people they supported well and were aware of their individual needs and wishes. One person, who was anxious about new people, had been given a rota of regular carers and assurance that the service would try to keep the team of carers consistent for them.
- A hospital passport, including important information about people's needs and wishes, was used when anyone was admitted to hospital. This helped ensure people received consistent and person-centred care.

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.

- People's communication requirements were documented within their care plans.
- Where there were issues with verbal communication, this was recorded and staff were aware of how to approach communication to ensure the best outcome.
- Information could be supplied in a range of different formats to help ensure it was accessible to as many people as possible.

Improving care quality in response to complaints or concerns

- The service had a relevant complaints policy and procedure.
- People we spoke with were aware of how to make a complaint. Information about how to complain was included within the service user guide.
- There were no on-going complaints or concerns at the time of the inspection.

End of life care and support

- Where people had expressed their wishes about how they wanted to be supported at the end of their lives, this was recorded.
- Some staff had completed training in end of life care, and support could be provided when required.

# 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.

This is the first inspection for this newly registered service. This key question has been rated 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

- The service promoted a positive, person-centred culture, ensuring open and inclusive discussions to facilitate good outcomes.
- Discussions with the manager and Nominated Individual demonstrated a commitment to embracing diversity and treating people equally.

How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong

- The provider demonstrated an understanding of the duty of candour and policies had been compiled with this in mind.
- Open and honest conversations promoted better support. One relative told us, "I had some issues with continuity, but that is now sorted. Management came to see me to discuss it."
- Notifications about significant incidents, such as injuries, deaths and allegations of abuse, were submitted to CQC as required.

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

- Discussions with the manager and staff members demonstrated a good understanding of their roles and responsibilities. One staff member told us, "You get time to do all the tasks. I love my job. I am comfortable and confident."
- We saw evidence of quality monitoring telephone calls made to people who used the service. The information from these was used to inform improvement to the service provision.
- An annual survey was also sent to people for their feedback and responses to the recent one were positive. Comments included; "Friendly, cheerful and helpful staff" , and, "Everyone kind and pleasant. Happy to see carers throughout the day."

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

- People felt the management team and staff were accessible, and could talk to them any time. One relative said, "I can ring the office and can leave a message and they will ring me back." Another relative told us, "I can contact them day or night. No problem contacting the office and also the carers if there is an emergency."

- Staff felt communication was good. One staff member told us, "The management team are great, they are really supportive." Another staff member said, "The best management team I have ever worked for, very hands on."
- We saw minutes of staff meetings and records of regular staff supervision sessions, which evidenced open discussions between staff and management.

#### Continuous learning and improving care

- There was continuous learning and improvement to the service informed by regular audits of all aspects of service provision.
- An action plan was in place to address identified concerns from audits, checks and feedback from people using the service and their relatives. This demonstrated an openness to criticism and a commitment to continual improvement.
- Spot checks of staff were completed regularly and any issues addressed with the staff member.

#### Working in partnership with others

- Care plans evidenced good links with other agencies and professionals to help ensure good joined up working. A professional we spoke with told us, "I have found communication good having spoken with [manager] quite a lot recently, I have always found her to be responsive and does appear to care about the service users."