

Affinity Trust

Affinity Trust - Domiciliary Care Agency - Central

Inspection report

109 Boston Road
Beaumont Leys
Leicester
LE4 1AW

Tel: 01162363793
Website: www.affinitytrust.org

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Affinity Trust - Domiciliary Care Agency - Central, is a domiciliary care agency. It provides personal care to people living in their own houses or flats. This service also provides care and support to people living in 'supported living' settings, so that they can live in their own home as independently as possible. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for supported living; this inspection looked at people's personal care and support.

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 120 people were receiving personal care.

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

People were safeguarded from abuse, staff were trained and were aware where and when to escalate safeguarding issues if not dealt with in a timely fashion.

Risks were assessed and care plans were regularly reviewed to ensure people were cared for safely.

Medicines were administered safely and where errors had occurred we saw staff had been re-trained in line with Affinity Trust policies and procedures.

The registered manager circulated information to all managers and senior staff where lessons had been learned and improvements could be made throughout all the Affinity locations in Central Region.

Staff followed infection prevention and control (IPC) best practice, in relation to reducing the risks of transfer of infections, wearing personal protective equipment (PPE) and following good hand hygiene. Most staff were aware of the latest information about changing face masks when attending personal care. We advised the registered manager who clarified instruction from the local authority and re-issued staff instructions. Staff had access to enough supplies of PPE equipment. Some relatively felt areas in and around some locations required further staff assistance to ensure they were properly protected.

People and their relatives knew how to raise a complaint and said they would feel confident to do so if needed. Most staff were happy with the support provided by the management team at Affinity Trust. We discussed some staff comments and changes have been made to improve the conditions at a location. People their relatives and staff were sent questionnaires periodically to judge their satisfaction of the service. Negative comments from relatives were followed up. Staff questionnaires are to be re-sent due to the low number of returns.

The provider understood their role and responsibilities under the duty of candour and informed CQC of incidents they were legally obliged to do so.

Rating at last inspection

The last rating for this service was Good (published 29 January 2019).

Why we inspected

The inspection was prompted in part due to concerns received about infection prevention controls. A decision was made for us to inspect and examine those risks.

We found no evidence during this inspection that people were at risk of harm from this concern. Please see the Safe and Well-Led sections of this report.

We reviewed the information we held about the service. No areas of concern were identified in the other key questions. We therefore did not inspect them. Ratings from previous comprehensive inspections for those key questions were used in calculating the overall rating at this inspection.

The overall rating of Good has not changed based on the findings at this inspection. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Affinity Trust - Domiciliary Care Agency - Midlands on our website at www.cqc.org.uk.

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 well-led?

Good ●

The service was Well Led.

Details are in our safe findings below.

Affinity Trust - Domiciliary Care Agency - Central

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 two inspectors and two experts by experience.

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 three managers 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 48 hours' notice of the inspection and provided an explanation as to the inspection process. We asked the provider to submit information to CQC to minimise the time spent on site in response to the pandemic.

The inspection activity started on 3 May 2021 and ended on 28 May 2021. We visited the office location on 11 May 2021.

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 prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report.

During the inspection

We spoke with seven people who use the service and 22 relatives of people using the service, about their views and experience of the care provided. We spoke with nine members of staff including all three registered managers.

We reviewed a range of records. This included five people's support plans, policies and procedures, internal management audits, staff supervision and training records and three staff recruitment files. A variety of other 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, such as training 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.

Systems and processes to safeguard people from the risk of abuse

- All of the people told us they felt safe with the staff, and staff provided safe care and support. One person said, "I am happy here, the staff are nice [and] help me with my bedroom, clean up and shopping."
- Most relatives felt their relation was safe, those who did not, provided information that we followed up with the registered managers. One relative said, "There have been incidents in the past, when [named] incurred injuries." We followed this and other incidents up and found that staff acted in accordance with Affinity Trust policies and procedures and protected people from harm.
- Staff had been trained in safeguarding procedures and knew what action to take to protect people from harm and abuse and knew which external agencies to report to, if that was required.
- The provider worked with local safeguarding authorities to safeguard people.

Assessing risk, safety monitoring and management

- Equipment was used to promote people's safety, which included the use of equipment to move and support people safely. A member of staff told us there was a delay in obtaining the correct equipment for a person using the service. We spoke with several staff about this and found the provider had acted appropriately and there were delays due to the pandemic, but this was out of the providers control.
- Risks associated with people's care and support were assessed, and plans developed to reduce risk. For example, people at risk of malnutrition and dehydration had their food and fluid intake closely monitored. Areas of concern were reported onto relevant health care professionals and written guidance sought.
- People's care records were stored electronically at the head and local offices as well as in paper form.

Staffing and recruitment

- Staff rotas were planned in advance to ensure enough staff were employed, had the appropriate skills, competencies and knowledge to meet people's needs though one person and a number of relatives commented on the number of staff changes. One person said, [There has been] a little change-over of staff for one or two people."
- The induction and training staff undertook meant they were aware of their roles and responsibilities in promoting people's safety, health and well-being. One staff member who had been recruited recently said: "The company made sure that I went through care certificate training which was good and helped me understand things I will have to deal with." Another said, "The training helps us to keep everyone safe."
- A number of relatives told us they were unhappy with the training of staff where they thought recently employed staff did not have enough experience to provide personal care. We found staff recruitment practices and ongoing training supported staff to provide care safely. When we spoke with the registered manager about staff training, they confirmed there has been some staff turnover and lack of availability of

face to face training during the pandemic. They produced documentation and demonstrated they were fully aware of the training needs of staff which was reviewed regularly. Personal supervision and monitoring was also used to ensure staff competence.

Using medicines safely

- People were supported with their medicines in a safe and timely way. When staff had made medicine errors, we were satisfied that appropriate action was taken to protect people from a re-occurrence. Staff were re-trained and if there were multiple errors, heightened levels of planned intervention was completed.
- The provider had spot checks carried out on all staff, which included observing staff administering medicines to people. This meant the provider ensured staff followed the training they had received and provided medicines in a safe and timely way.
- People's support plans had individually detailed information where medicines needed to be offered in a special way or 'as required' or PRN basis.

Preventing and controlling infection

- Staff had received training about COVID-19 and infection prevention measures, which included the correct procedure for the putting on and taking off personal protective equipment (PPE), known as donning and doffing. Some people's relatives were not happy with the cleanliness in and around some of the locations. We discussed this with the registered manager and viewed the checks in place to ensure cleanliness levels remain high. They said they would communicate with all the senior staff in the locations and review the staff cleaning practices to ensure this improved.
- Staff explained how they followed the government guidance to promote people's and their own safety against the transmission of COVID-19. Some staff told us they were not fully clear on how often they should change their masks and PPE. We contacted the registered manager, who immediately clarified instructions from the local authority and re-issued these to all staff.
- The provider ensured all people who used the service and staff were regularly screened for COVID-19. They also ensured any staff showing any COVID-19 symptoms or had been in contact with people that had tested COVID positive, were tested and followed the self-isolating government guidance.

Learning lessons when things go wrong

- The provider had a detailed and extensive quality management system which was used to support staff and to learn from events.
- Processes were in place that ensured any accidents or incidents were recorded, investigated and where necessary changes made to reduce further risk. Staff were informed of any changes that affected the care plan and how people were cared for.
- Learning from incidents was circulated to staff through group meetings or discussed with individual staff during personal meetings or supervisions.

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. 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

- All the people using the service we spoke with were positive about the service provided. One person said, "[Named staff] came around the other day for my birthday and brought a card." Most people's relatives were positive about staff support. Some relatives informed us of a number of issues they were unhappy with, some of which were historic. We followed these up and found that these had been investigated by the registered managers and other senior staff at Affinity Trust.
- Most staff spoke positively of the support they received from senior managers. One staff member said, "The manager is really good, staff are always encouraged." Another staff member said: "I definitely feel supported by the manager." We discussed the issues staff told us about and changes and clarification has been given to staff in one particular location.
- Staff told us they received one to one supervision, which gave them the opportunity to discuss in confidence their work performance, further training or support needs.
- Staff were supported to provide good quality care, as they were monitored, and had opportunities to attend meetings. Information about any key changes was shared electronically with staff and within staff newsletters.
- The provider had recently implemented a bi-annual staff awards covering all designations of staff. This recognised staff commitment to good quality work and was open for people, their relatives and the staffs' peer group who could all nominate a staff member and highlight good practice.

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

- People's views about their care were sought during review meetings and through satisfaction surveys. The latest survey results from people showed a high rate of satisfaction. The staff survey was being repeated due to a poor response. Staff regularly contacted people throughout the pandemic and provided additional support when needed. The registered manager said most of the feedback was sought face to face, but some telephone contact was necessary during the pandemic.
- Staff had regular meetings, personal supervision and regular competency checks on their performance.
- Whistleblowing was encouraged within the service and staff told us they would be confident to raise any safeguarding concerns.

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 understood their role and responsibilities. At this inspection several incidents had met the

criteria under the duty of candour. The duty of candour requires providers to be open and honest with people when things go wrong with their care, giving people support, and providing truthful information and a written apology. The registered manager included these outcomes in learning lessons and when sharing information with other senior staff in the organisation.

- Complaints records confirmed the provider responded promptly to complaints. One person said, "It's pretty reasonable care, [I've had] no complaints in four years." There is an extensive management reporting system which produces monitoring information about people's care and staff interactions with them. Complaints are included in this monitoring tool and we saw how the registered manager organised follow ups and reporting on to the senior management team for further scrutiny.

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

- An extensive managerial structure was in place, which identified individual staff responsibilities for all aspects of the quality and monitoring of the service. Quality assurance audits were completed on an electronic care monitoring system. The electronic system gave the provider access to live updates to continually monitor the delivery of people's care.
- The provider had a business continuity plan in place, which detailed how people's needs were to be met in the event of an emergency. A COVID-19 contingency plan had been developed in response to the pandemic, which outlined the actions needed to ensure essential care continued to be provided.
- The provider understood their legal obligations. They had informed CQC about events they were required to by law, and we saw that the provider had displayed the last inspection rating on their website and at the local office as they are required to do.

Continuous learning and improving care; Working in partnership with others

- The provider was committed to people's personal development and also that of the managers and staff to ensure good outcomes for people and the continuous development and improvement of each individual location.
- The operation managers and senior staff kept themselves appraised of good practice guidance. They continued to attend meetings, updates and events with external providers, which included the local authority and provider forums to share good practice and developments within the care sector.
- Staff understood their role in providing and monitoring the standard of care. Staff told us they were confident to raise any concerns and make suggestions to improve care. The provider ensured all staff were aware of their ability to use 'Whistleblowing' where staff felt progress on reported issues had not resulted in improvements.
- The provider worked with external health and social care partners when required for updating staff practices and people's care.