

Avanta Care Ltd

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Inspection report

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Date of inspection visit: 27 June 2019 02 July 2019

Date of publication: 29 August 2019

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

Avanta Care Ltd is a domiciliary care agency and provides care and support to people living in their own homes. Not everyone using the service receives a regulated activity; The Care Quality Commission (CQC) only inspects the service being received by people provided with 'personal care'; help with tasks related to personal hygiene, medicines and eating. Where they do, we also take into account any wider social care provided. At the time of our inspection 15 people received the regulated activity 'personal care'.

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

Staff were vigilant to the safety and wellbeing of people who used the service and kept people safe from avoidable harm, abuse and discrimination. Staff followed good infection control practises and administered people's medicines safely.

People received the right support based on their current needs and preferences. Staff had the right skills and knowledge to carry out their roles effectively and were well-supported by the registered manager and the provider.

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.

Staff were kind and compassionate and showed a genuine passionate for providing high standards of care. They upheld people's privacy and dignity and supported people to be as independent as possible.

People received personalised care and support based on their individual needs and preferences. The service was well-led. The registered manager had good oversight of the running of the service and made continuous improvements.

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 22 September 2016).

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 reinspection programme. If we receive any concerning information we may inspect sooner.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?	Good •
The service was safe.	
Details are in our safe findings below.	
Is the service effective?	Good •
The service was effective.	
Details are in our effective findings below.	
Is the service caring?	Good •
The service was caring.	
Details are in our caring findings below.	
Is the service responsive?	Good •
The service was responsive.	
Details are in our responsive findings below.	
Is the service well-led?	Good •
The service was well-led.	
Details are in our well-Led findings below.	



Avanta Care Ltd

Detailed findings

Background to this inspection

The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Care Act 2014.

Inspection team

The inspection was carried out by one inspector.

Service and service type

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

The service had a manager 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. 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 27 June and ended on 2 July 2019. We visited the office location on 27 July 2019.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. We 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 used all this information to plan our inspection.

During the inspection

We spoke with three people who used the service and two relatives about their experience of the care provided. We spoke with three members of care staff including the registered manager. We reviewed a range of records. This included three people's care records and medication records. We looked at two staff files in relation to recruitment and staff supervision. We reviewed a variety of records relating to the management of the service.

After the inspection

We reviewed training data for care staff provided by the registered manager.



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 requires improvement. At this inspection this key question has now improved to good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were kept safe from avoidable harm, abuse and discrimination.
- Staff received training in the safeguarding of vulnerable adults. They were able to identify different types of abuse and were clear about how to raise concerns.
- The registered manager was clear about their responsibility to raise concerns with the local authority safeguarding team and CQC. They kept comprehensive records of all safeguarding concerns and actions taken.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- Staff were vigilant to the safety and wellbeing of people who used the service. A staff member told us, "It's nice that we go to the same people all the time. You get a feel for what people are like. Familiarity with people gives you a measure of whether things are OK or not."
- People's care plans incorporated detailed risk assessments which provided staff with the information they needed to care for people safely.
- The registered manager thoroughly investigated where things went wrong and made improvements to safety. They involved all relevant staff, partner organisations and people who use the service.

Staffing and recruitment

- The provider employed enough staff to cover the geographical area and people received a consistent and reliable service. One staff member told us, "You keep to the same areas all the time I see the same six people every morning".
- Arrangements were in place to cover staff sickness and holidays. The provider had robust contingency plans in place for managing in bad weather and during unforeseen circumstances.
- The provider had safe recruitment processes in place. Appropriate checks were carried out to protect people from the employment of unsuitable staff.

Using medicines safely

- People received their medicines as prescribed.
- Staff managed medicines safely and kept accurate medicines records.

Preventing and controlling infection

• Staff received training in the prevention and control of infection applied this learning in practice.



Is the service effective?

Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people's outcomes were consistently good, and people's feedback confirmed this.

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

- People's needs were thoroughly assessed, and personalised aims and goals were identified in their care plans. Regular reviews were carried out so that people continued to receive the right level of care.
- People were included in the assessment process and received care in the way they preferred. A staff member told us, "Care plans are really detailed, it's all about that individual, their needs and their preferences."
- Staff delivered care in line with current guidance and best practise which achieved good outcomes for people.

Staff support: induction, training, skills and experience

- Staff had the right skills and knowledge to carry out their roles effectively.

 Staff told us, "All the training is really interesting" and "I like the video training I enjoy them. It pulls you back to think about it from different angles and not reel off answers."
- Staff received regular supervision from the registered manager and were encouraged to reflect on their practice and focus on development. A staff member told us, "They [The registered manager] put some much into all the staff and the team."
- The provider recognised, and rewarded staff performance and staff told us they felt valued by the provider. A staff member told us, "When you get praise, you feel more confident and it boosts your self-esteem."

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

- People who needed support with eating, drinking and meal preparation were given choice and had access to enough food and drink throughout the day.
- Staff received training in food hygiene and were skilled in food preparation.

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

- Staff kept clear records of people's care and worked together to provide consistent support.
- Where necessary, urgent medical care was sought for people without delay.
- Staff received additional, specialist training so that they could confidently meet people's individual healthcare needs.

Ensuring consent to care and treatment in line with law and guidance
The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of

people who may lack the mental capacity to do so for themselves. The Act requires that, as far as possible, people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA. When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty. We checked whether the service was working within the principles of the MCA.

- The registered manager confirmed at the time of inspection that to their knowledge, no person who used the service had their rights or liberty deprived, lawfully or otherwise. The registered manager was clear about the process they would follow if they believed a person may lack the capacity to make certain decisions.
- Staff received training in the principles of the MCA and DoLS and routinely asked people for their consent when they provided care.



Is the service caring?

Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

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

- People received kind and compassionate support, free from discrimination.
- Staff spoke passionately about providing high standards of care. They supported people as individuals and respected their individual needs, choices and preferences. One person told us, "My carers are excellent."

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

- Staff communicated with people in a way they understood. This meant people had access to the information they needed to make decisions about their care.
- The provider actively sought feedback from people about their care and acted on the feedback received.

Respecting and promoting people's privacy, dignity and independence

- Staff maintained people's privacy and dignity when they provided care and support. They closed curtains and doors before supporting people to wash or dress and ensured they remained covered wherever possible.
- Staff spoke with us about the importance of supporting people to remain as independent as possible. A staff member told us, "I would let them wash and dry themselves and I would assist if I was needed. Independence is about seeing what people can do standing back to let people do their own things, like take their tablets."
- Staff understood the importance of maintaining confidentiality. They told us they do not discuss the details of their work or disclose information about people or where they live.



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

- People received personalised care and support. Their care plans provided staff with step by step guidance about to care for people in a way they preferred.
- Changes in people's needs were monitored by the registered manager and information was regularly reviewed and updated.

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 provider identified, recorded, shared and met the information and communication needs of people with a disability or sensory loss. Information regarding people's communication needs was recorded in their care plans and staff communicated with people in an accessible format of their choice.
- Reasonable adjustments were made for people where appropriate.

Improving care quality in response to complaints or concerns

- •The provider had a policy and procedure in place for acting on complaints and information was provided to help people understand the care and support available to them.
- Any concerns were dealt with appropriately by the registered manager when received; there had been no complaints received in the time the service had been operating. One person told us, "I would know who to speak to if I needed to speak to someone once the information was provided."

End of life care and support

- Staff were aware of good practice and guidance in end of life care and knew to respect people's religious beliefs and preferences. People's care plans included this information.
- The registered manager had good links with healthcare professionals should their input be 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.

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

- People told us the service was well-led. One person told us "It's a very good service."
- The services benefitted from a registered manager who was driven to provide a high-quality service. They recognised the value in offering consistent support to care staff and this resulted in good outcomes for people.
- Without exception, staff gave positive feedback about the registered manager and the provider. Comments included, "It's a nice company to work for. They don't take on too many care packages without the staff. They make sure they have the staff to cover the packages" and "[The registered manager] will always answer and always pick up the phone. They are really lovely, we are like a little family."

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; 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; Continuous learning and improving care

- The registered manager had robust systems and processes in place to monitor the safety and quality of the service.
- Staff were clear about their roles and responsibilities and what was expected of them. A staff member told us, "Everything is structured. We are being held accountable for the things we do like picking up new paperwork. Everything is monthly, so they [The registered manager] can do a proper audit."

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

- People were encouraged to provide feedback about the service they received. The registered manager used this information to make improvements to the service. One person told us, "I did fill in a survey and I rated them very highly."
- Staff regularly attended team meetings and were given the opportunity to contribute ideas to the running of the service.