

All Aspects Care Limited

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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

About the service

All Aspects Care 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 the inspection 13 people were receiving personal care.

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

People and their relatives were happy with the service All Aspects Care provided. People felt safe with staff who knew them well and had received the appropriate training to meet their needs. Potential risks to people had been identified and strategies put in place to keep people safe.

Systems and processes were in place to protect people from harm. Staff received regular supervisions and spot checks from the registered manager to ensure best practice was always completed. Staff had been recruited safely and all necessary checks had been completed.

Care plans detailed peoples likes, dislikes, routines and preferences. Staff knew people well and responded to their needs. People were supported to access healthcare professionals as required.

Staff understood people's individual care needs and preferences and used this knowledge to provide them with flexible, responsive support. Staff worked in a non-discriminatory way and promoted people's dignity, privacy and independence.

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 were involved in all aspects of their care, and their dignity and independence was promoted. People knew which staff were coming to each call and told us that staff turned up on time.

Quality assurances and audit systems were in place and effective in ensuring person centred care was given.

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 16 August 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?

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.

All Aspects Care 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 consisted of one inspector.

Service and service type

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

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.

Inspection activity started on 21 January 2020 and ended on 24 January 2020. We visited the office location on 21 January 2019, and contacted people, their relatives and staff on 22 and 24 January 2020.

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 three people who used the service and two relatives about their experience of the care provided. We spoke with six members of staff including the provider, registered manager, and care workers.

We reviewed a range of records. This included four people's care records and medication records. We looked at three staff files in relation to recruitment and staff supervision. 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.

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

- The provider had effective safeguarding procedures in place and the registered manager understood their responsibility to liaise with the local authority if any safeguarding concerns were found
- Staff received training and had a good understanding of identifying abuse and reporting concerns.
- People and their relatives told us they felt safe with staff. One person told us, "I feel safe with staff, they always lock my door and are very kind."

Assessing risk, safety monitoring and management

- People had risk assessments in place with strategies identified to mitigate any potential risks.
- Staff had been trained in the use of specific equipment people required.

Staffing and recruitment

- People told us they had a consistent staff team and always knew who was coming.
- The provider followed safe staff recruitment procedures. Records confirmed that Disclosure and Barring Service (DBS) checks were completed and references obtained from previous employers. These are checks to make sure that potential employees are suitable to be working in care.
- There were enough staff to meet the needs of people supported by the service.

Using medicines safely

- People received appropriate support with their medicines. We looked at people's medication records and this evidenced that staff managed medicines consistently and safely.
- Staff had been trained in medicines administration and had their competencies checked before being able to administer medicines to people.

Preventing and controlling infection

- People were protected from the risks of infection as the staff supporting them had undergone training in infection prevention and undertook safe practices when providing care.
- Staff told us that the provider ensured all staff had sufficient personal protective equipment [PPE] such as gloves, aprons and shoes covers.

Learning lessons when things go wrong

- The provider had an accident and incident policy. This set out the requirements for reporting people's or staff incidents and accidents.

- Incident and accidents were audited to look for any trends or patterns.

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 assessed before they started to receive personal care to ensure effective care and outcomes were delivered.
- Care plans included information regarding people's likes, dislikes routines and preferences. One person told us, "Staff know me well."
- We saw evidence that assessments were reviewed regularly and that any changes were implemented immediately.

Staff support: induction, training, skills and experience

- Staff told us their training was excellent. Staff were able to request additional training whenever they wanted to. One staff member told us, "If I'm concerned I can request additional training or ask for someone to come with me [to see people] for first few times." A relative told us, "Staff are highly professional and have obviously had the appropriate training to support [person's name]."
- Staff felt supported by the registered manager. One staff told us, "I love my job because I get lots of support." Another staff member said, "They [managers] have always been supportive since day one of starting with them."
- Staff received regular supervisions and team meetings.

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

- People were supported to have a healthy and balanced diet and staff received training in food hygiene.
- Care plans detailed people's food and fluid requirements.

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

- People were supported with all their healthcare needs.
- Staff understood their responsibility to refer people to other healthcare professionals when needed. This included Doctors, speech and language therapists or district nurses.
- People had detailed health passports completed. This document provides healthcare professionals with information about people's individual needs, support with communication and prescribed medicines in the event of an unplanned hospital admission.

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

- People's mental capacity to make decisions or choices was assessed and reviewed.
- Staff ensured people were involved in decisions about their care; and knew what they needed to do to make sure decisions were taken in people's best interests.
- Care plans were developed with people and we saw they had agreed with the content and had signed to receive care and treatment.

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 told us that staff were kind, friendly and caring. One person said, "Staff are so charming, they are efficient and helpful. I never feel hurried and they will do anything for me."
- Care plans needed more information regarding how people communicated, however staff had a good knowledge and understanding of the people using the service.
- Staff understood their responsibility to ensure people's rights were upheld and they were not discriminated against in any way. Staff had received equality and diversity training and the Equality, Diversity and Human Rights policy set out how to support people, and staff, from diverse backgrounds.

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

- People were treated respectfully and were involved in every decision possible. Care plans had been signed by people or when appropriate their relatives.
- People told us that staff always asked before completing any tasks. One person said, "Staff always ask me, "Is there anything you need" and "Is it OK if we do this or that."
- Staff told us they had enough time during calls to sit and speak to people to gain their views and get to know them better.

Respecting and promoting people's privacy, dignity and independence

- People's right to privacy and confidentiality was respected. Staff told us how they ensured people were treated with dignity and respect.
- One person told us, "Staff are so caring and natural, they ask if you want a shower or bath, they always encourage me without pushing, but they understand me and that I need my independence."
- A relative told us, "All the staff are cheerful, friendly, helpful and very caring and go the extra mile to support [person's name] and help them live independently with dignity."

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

- Care plans were regularly updated, and staff told us they felt the care plans gave them all the information needed to support the person.
- Care plans included personalised information such as, how a person liked to be dressed, what a person's abilities were on a 'good day' and on a 'bad day' and details of any religious or cultural needs.
- People and their relatives told us they received good quality care that met their needs. People knew which staff were coming to each call and staff turned up at the person's preferred time.

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 understood their responsibility to comply with the Accessible Information Standard and could provide information about the service in different formats to meet people's diverse needs.

Improving care quality in response to complaints or concerns

- The provider had a complaints policy in place and people, relatives and staff knew how to make a complaint.
- People, relatives and staff we spoke with told us they had not needed to complain however, they were confident the registered manager would deal with their concerns appropriately and in a timely manner.

End of life care and support

- At the time of the inspection, the service was not supporting anyone who required end of life support. However, people had their wishes and needs discussed within the pre-assessment process.
- The registered manager told us that if anyone required end of life support they would ensure all staff had the appropriate training and support and they would liaise with the appropriate health care professionals.
- The service had started working more closely with at home hospice care organisations, to support people with end of life care.

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 Requires Improvement. At this inspection this key question has now improved to 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

- Systems and processes were in place to ensure person centred care was offered and that people's choices and routines were documented.
- Spot checks and competency assessments were carried out on staff to ensure they were completing care tasks and support in line with best practice.
- People received care based on their individual assessed needs. A relative told us, "Staff always respond to [person's] needs, if anything changes I am informed but staff ensure [person's name] needs are met."
- People and their relatives knew who the registered manager was and were confident in contacting them if needed.

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 understood, and said they would act on, their duty of candour responsibility, however no incidents had occurred which would require action or investigation in this regard.
- Staff knew how to whistle-blow and knew how to raise concerns with the local authority and the Care Quality Commission (CQC) if they felt they were not being listened to or their concerns were not acted upon.

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

- We saw evidence of audits completed for a range of checks including care plans, medication administration charts and daily notes. Action plans were completed and reviewed to ensure all documentation was up to date.
- Staff were clear in their roles and understood what the provider expected from them.
- The registered manager notified CQC and other agencies of any incidents which took place that affected people who used the service.

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

- People, relatives and staff were asked for their feedback via an annual survey. Records showed satisfaction levels were good. Comments included, 'Outstanding care,' and 'excellent communication between staff and management.'
- We saw evidence of regular staff meetings which included actions required and any suggestions made.

Staff told us they felt valued and listened to by the registered manager.

Continuous learning and improving care. Working in partnership with others

- The registered manager had linked up with another agency to share experiences and learn from each other's experiences.
- The provider used an online application that allowed relatives, when appropriate to access notes and care plans of their loved ones, to help keep them up to date and involved in people's care.
- The registered manager was committed to working towards improving care for people. They welcomed feedback and were open to the inspection process.
- The registered manager and staff team worked in partnership with other professionals such as GP's, district nurses, social workers and commissioners to promote and maintain people's quality of life.