

APT Care Limited

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Inspection report

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Date of inspection visit:
04 March 2021
19 March 2021

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Ratings

Overall rating for this service

Inspected but not rated

Is the service safe?

Inspected but not rated

Is the service well-led?

Inspected but not rated

Summary of findings

Overall summary

APT Care Ltd is a domiciliary care agency providing personal care to 60 people at the time of the inspection. 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.

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

People told us they were happy with the care and how the company provides small care teams to ensure continuity of care. One person told us, "[Staff] are very pleasant and I certainly feel safe. I chat with them and feel I could confide in them too. I have the same group of [staff] coming in."

People were supported by a staff team who understood how to meet their needs safely and reduce risks related to their various health conditions including support to mobilise.

People were happy that staff always wore gloves, aprons and masks and regularly washed and sanitised their hands to reduce the risks of COVID-19 spreading.

People had very detailed care plans and risk assessments that were kept up to date and detailed how they preferred their care to be delivered. Some relatives told us they were involved in this process also.

The manager had processes and systems in place that ensured people were safe and risks monitored. Where any changes to risks were identified, action was taken to resolve them and put additional or different measures in place.

People were happy that if any problems arose, they could speak to the staff or manager and would be listened to.

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 18 February 2020).

Why we inspected

We undertook this targeted inspection to check on a specific concern we had about COVID-19 practices both in the office and the community and the understanding and management of these risks. We also had concerns about manual handling training, staff inductions and the culture of the management. The overall rating for the service has not changed following this targeted inspection and remains good.

CQC have introduced targeted inspections to follow up on Warning Notices or to check specific concerns. They do not look at an entire key question, only the part of the key question we are specifically concerned

about. Targeted inspections do not change the rating from the previous inspection. This is because they do not assess all areas of a key question.

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?

At our last inspection we rated this key question good. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question, we had specific concerns about.

Inspected but not rated

Is the service well-led?

At our last inspection we rated this key question good. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question, we had specific concerns about.

Inspected but not rated

APT Care Limited

Detailed findings

Background to this inspection

The inspection

This was a targeted inspection to check on a specific concern we had about COVID-19 practices both in the office and the community and the understanding and management of these risks. We also had concerns about manual handling training, staff inductions and the culture of the management.

Inspection team

This inspection was carried out by three inspectors 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 did not have a manager registered with the Care Quality Commission. This means that the provider is legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection

This inspection was unannounced.

Inspection activity started on 04 March 2021 and ended on 19 March 2021. We visited the office location on 04 March 2021.

What we did before the inspection

We reviewed information we had received about the service since the service was registered. We sought feedback from the local authority, Healthwatch England and professionals who work with the service. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England.

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. We used all of this information to plan our inspection.

During the inspection

We spoke with six people who used the service and seven relatives about their experience of the care provided. We spoke with fourteen members of staff including the nominated individual who was also acting as manager, senior care workers, care workers and care co-ordinators.

We reviewed a range of records. This included five people's care records. We looked at four staff files in relation to staff induction, training, competency assessments and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at training data and quality assurance records. We spoke with one professional who regularly visits the service.

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. We have not changed the rating of this key question, as we have only looked at the part of the key question we had specific concerns about.

The purpose of this inspection was to check on a concern we had about COVID-19 practices both in the office and the community and the understanding and management of these risks. We also had concerns about manual handling training, staff inductions and the culture of the management. We will assess all of the key question at the next comprehensive inspection of the service.

We found no evidence to support the concerns or that people were at risk of harm from the concerns.

Assessing risk, safety monitoring and management

- People were very happy with the quality of care provided and told us they felt safe when staff were supporting them as they tended to have the same staff team.
- People told us staff followed all measures in place to reduce risks of contracting COVID-19 and in relation to safe support to mobilise or use hoists. One person said, "[Staff] help with the maintenance of my walking frame." Another person said, "I am not fast but [staff] do not pressure me. [Staff] ask me how I feel and will offer to help. They are caring and kind and I feel listened to."
- Relatives feedback was mixed but mainly they told us they were also happy that their family member was being supported safely and correctly. They told us staff always wore full PPE and the staff involved them in reviewing risks. One relative said, "There was a risk assessment, a [staff member] called and we went through [My family member's] routines, likes and dislikes."
- Staff had a good understanding of the risks related to COVID-19 and how to use personal protective equipment (PPE) and other measures to keep people and themselves safe. Staff were also able to explain how to safely support people who required assistance to mobilise.
- Staff knew how people liked to be supported in ways that encouraged them to accept the care. For example, where people were nervous or their conditions meant they behaved in particular ways, staff adapted their approach accordingly.
- Risk assessments were reviewed and updated regularly and incorporated into people's care plans. Care plans were very detailed and ensured clear, current guidance for staff on how to safely meet people's needs. Staff told us this gave them enough information to be able to fulfil their role.
- There were robust systems in place to monitor and analyse risk and consider any patterns or trends. This enabled the manager to identify risks and take action to address these.

Preventing and controlling infection

- We were assured that the provider was preventing visitors to the office from catching and spreading infections.
- We were assured that the provider was meeting shielding and social distancing rules.
- We were assured that the providers admissions process was safe.

- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was accessing testing for staff.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the office premises.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.

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. We have not changed the rating of this key question, as we have only looked at the part of the key question we had specific concerns about.

The purpose of this inspection was to check on a concern we had about COVID-19 practices both in the office and the community and the understanding and management of these risks. We also had concerns about manual handling training, staff inductions and the culture of the management. We will assess all of the key question at the next comprehensive inspection of the service.

We found no evidence to support the concerns or that people were at risk of harm from the concerns.

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

- People told us they thought the staff and manager were very good and always listened to them and helped them with any requests. One person told us, "I am happy with the service. It is excellently managed. I am not aware of any impact on the service from [COVID-19]." Another person said, "[APT Care Ltd] provide a good service and [staff] are well trained."
- Relatives generally told us that the company was well managed, and they would recommend it to other people. However, some relatives had experienced problems in relation to communication about late care visits or other concerns. This was in relation to specific staff members and these concerns have since been addressed by the manager.
- Staff were very happy with the support given by the management team and felt the culture was an open, honest one where they could raise any concerns and be heard. One staff member told us, "I can speak to [the manager], they are very approachable." Another staff member said, "[The manager] is very supportive, they are brilliant, you can go to them anytime."
- The manager and the staff team understood the requirements of their roles and were able to describe how this impacted their daily tasks and their approach to providing care. A staff member told us, "The training is really good, they tell you how to speak to people and how to relate to them as well as the job."
- Staff received a thorough induction including the opportunity to shadow more experienced staff members on care visits, a variety of training, regular supervision and spot checks of practice and knowledge. Senior staff also carried out competency assessments of all staff in manual handling, safeguarding and infection prevention and control, which included PPE and COVID-19. Staff told us the induction process helped them to do their jobs well.
- Robust policies and audit systems were in place to ensure very clear guidance and protocols in the event of emergencies and outbreaks of COVID-19 to protect people and staff. This included robust systems and resources available for office staff to ensure they also remained safe and contingencies to ensure continuity of care would continue.

