

# Altogether Care LLP Altogether Care LLP -Salisbury Care at Home

## **Inspection report**

91 Castle Street Salisbury SP1 3SP

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Ratings

## Overall rating for this service

Inspected but not rated

Is the service safe?

**Inspected but not rated** 

# Summary of findings

### Overall summary

#### About the service

Altogether Care LLP – Salisbury Care at Home is a domiciliary care service providing personal care to people in their own homes. The service was supporting 37 people at the time of the inspection.

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

People told us staff followed good infection control practice while they were in their home.

Staff were trained in infection control and demonstrated a good understanding of the systems in place. Additional training had been completed by all staff since the COVID-19 pandemic.

Staff had a supply of personal protective equipment (PPE) and were able to get additional supplies whenever they needed them. Senior staff completed spot checks to ensure staff were following the correct procedures.

People received support to manage their medicines safely and maintain their independence. Staff had received training in safe administration of medicines. Their practice had been assessed to ensure it was safe. There were enough staff working to meet people's needs. Staff had been thoroughly checked when they were recruited and received training before providing care for people.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

#### Rating at last inspection

This service was registered with us on 05/08/2019 and this is the first inspection.

#### Why we inspected

We undertook this targeted inspection to check on specific concerns we had received about infection control, medicines management and staffing. An overall rating for the service has not been given following this targeted inspection.

CQC have introduced targeted inspections 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.

We found no evidence during this inspection that people were at risk of harm from this concern. Please see the safe section of this full report.

#### 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?

We have not provided a rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about.

Details are in our safe findings below.

#### **Inspected but not rated**



# Altogether Care LLP -Salisbury Care at Home

### **Detailed findings**

# Background to this inspection

#### The inspection

This was a targeted inspection to check on specific concerns we had about infection control, medicines management and staffing.

Inspection team The inspection was completed by one inspector.

Service and service type This service is a domiciliary care agency. It provides personal care to people living in their own home.

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. This was because we needed to be sure that the provider or registered manager would be in the office to support the inspection. Inspection activity started on 13 November 2020 and ended on 24 November 2020. We visited the office location on 13 November 2020.

What we did before the inspection

We reviewed information we had received about the service since it was registered.

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 four people who used the service and one relative about their experience of the support provided. We spoke with three members of care staff, a regional manager and the registered manager. We reviewed a range of records relating to care provision, infection control, staff recruitment, training and management oversight.

## 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 for this newly registered service. We have not given a 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 specific concerns we had about infection control, medicines management and staffing. We will assess all of the key question at the next comprehensive inspection of the service.

Preventing and controlling infection

- Staff were trained in infection control and demonstrated a good understanding of the systems in place. Additional training had been completed by all staff since the COVID-19 pandemic.
- Staff said they had a supply of personal protective equipment (PPE) such as face masks, gloves, aprons and hand sanitizer. Staff said they were able to get additional supplies whenever they needed them. Senior staff completed spot checks to ensure staff were following the correct procedures.
- People told us staff followed good infection control practice while they were in their home. People said the way staff used the PPE helped them to feel safe. One person commented, "I have no concerns about what they are doing to keep me safe from the virus."
- The provider had updated their infection prevention and control procedures as a result of the COVID-19 pandemic.
- The provider had contingency plans in place to deal with any significant staff absence as a result of the COVID-19 pandemic.

#### Using medicines safely

- People were supported to manage their medicines safely. Details of the support people needed was set out in their care plans.
- Staff had received training in safe administration of medicines. Their practice had been assessed to ensure they were following the correct procedures.
- Medicines records had set out the support people were given. The registered manager had identified gaps in some of the medicine administration record charts. This had been followed up with the staff concerned through additional training and monitoring. The registered manager said they were in the process of introducing an electronic records system. This will give the management live information about the support people have received and will enable any omissions to be followed up quickly.

#### Staffing and recruitment

- There were enough staff working to meet people's needs. People told us staff usually arrived on time and that they stayed for the full allocated time. People said they were contacted by staff in the office if their carer was running late.
- Staff said their rotas were realistic and usually had sufficient travel time built into them. The rotas

demonstrated some visits did not have any allocated travel time. The registered manager told us she had identified this issue and had made changes for subsequent rotas. Although the visits with no allocated travel time were very near to each other, the registered manager had ensured there would be at least five minutes between the scheduled visits in future.

• Staff said they received a good induction and training before providing care for people. Training included use of any specialist equipment such as hoists, medicines management, infection control and safeguarding. Staff said they were able to complete as many shadow shifts as they needed and did not feel under pressure to provide care alone until they were confident.

• Effective recruitment procedures ensured people were supported by staff with the appropriate experience and character. This included completing Disclosure and Barring Service (DBS) checks and contacting previous employers about the applicant's past performance and behaviour.