

Angels Healthcare Ltd

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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

Angels Healthcare Ltd is a domiciliary care agency. It provides personal care to people living in their own homes, including, older people, younger adults, people with mental health problems, physical disabilities, sensory impairment and people living with dementia. At the time of our inspection approximately 78 people received care and support from this service.

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

People and relatives said staff provided care and support safely. Risk associated with people's care and medicines were well managed. There were enough staff to ensure people received their planned care calls. Most people said they knew the staff who visited them. Records showed people received their care calls from a small team of staff, at the times agreed.

People's needs were assessed, and staff understood how to provide care which reflected people's wishes and preferences. People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible. Staff received the training and management support they needed to fulfil their roles. The management team and staff continued to work within the requirements and principles of the Mental Capacity Act (2005).

People's privacy and dignity was respected by staff. Staff cared about the people they visited and promoted people's independence. People made decisions about their care and support. Staff felt valued and supported by the management team.

People were involved in planning their care and developing their care plans. Information about the service was available in a range of different formats. Care plans informed staff how to deliver personalised care. Complaints were managed in line with the providers complaint procedure.

The management team understood their regulatory responsibilities. They regularly completed quality checks to monitor and improve the service. Feedback from people, relatives and staff was used to improve the service and people's experiences. The management team and staff worked in partnership with other professionals to improve outcomes for people.

The last rating for this service was Good (published 6 March 2017).

Why we inspected: This was a planned inspection based on the previous rating of good.

Follow up: We will continue to monitor intelligence we receive about the service until we return to visit as per our methodology. If any concerning information is received, we may inspect sooner.

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

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

The service was safe.

Details are in our safe findings below

Good ●

Is the service effective?

The service was effective.

Details are in our effective findings below.

Good ●

Is the service caring?

The service was caring.

Details are in our caring findings below.

Good ●

Is the service responsive?

The service was responsive.

Details are in our responsive findings below.

Good ●

Is the service well-led?

The service was well-led.

Details are in our well-Led findings below.

Good ●

Angels Healthcare 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 was carried out by one inspector and an expert by experience. An expert by experience is a person who has personal experiences of using, or caring for someone, who uses this type of care service.

Service and service type

Angels Healthcare Ltd is a domiciliary care agency. It provides personal care to people living in their own homes, including younger adults, older people, people with physical disabilities, people living with dementia and mental health needs, sensory impairments or physical disabilities. CQC regulates the personal care provided.

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

This comprehensive inspection was announced. We gave the service 48 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 23 July 2019 and ended on 7 August 2019. We visited the office location on 7 August 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 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 of this information to plan our inspection.

During the inspection

We spoke with nine people who used the service and six relatives, by telephone, to obtain their views of the service provided. We spoke with five members of staff including the provider, registered manager, a senior care worker and two care workers.

We reviewed three people's care and medicine records, to ensure they were reflective of their needs. We looked at three staff files in relation to recruitment and staff supervision and a range of records relating to the management of the service, including audits and checks, people's and relatives' feedback about the service and policies and procedures.

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 the rating for this key question remains Good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People felt safe with staff who visited them. Relatives agreed. One said, "Staff use the key safe and key code correctly."
- Staff continued to understand their responsibility to report any safeguarding concerns. They were confident these would be addressed and knew how to escalate their concerns if they were not.
- The management team understood and had met their responsibility to report concerns to the local authority and to us (CQC) to ensure any allegations or suspected abuse were investigated.

Assessing risk, safety monitoring and management

- Risks associated with people's care were assessed, recorded and regularly reviewed.
- Risk management plans informed staff how to manage and reduce risks.
- Staff demonstrated they understood the actions they need to take to keep people safe. One staff member said, "If anything changes the seniors tell us straight away before we do the next visit, so we know what we need to do. Keeping the clients [people] safe is a key responsibility."

Staffing and recruitment

- People told us they received all their planned calls. Most people said their care calls were provided by staff they knew, at the expected time and for the length of time agreed. Records confirmed people were supported by a small team of regular staff at the times planned.
- Staff said they had enough time to provide the support people needed. One told us, "If we need to stay longer we can ring the office and a senior would cover our next call." They added, "If a client was upset I wouldn't leave them. I would stay and comfort them."
- The provider had recruitment procedures to ensure staff were of suitable character before they were employed by the service. Staff confirmed they were not able to start work until all checks had been completed.

Using medicines safely

- People who were supported to take their medicines, told us they received their medicines as prescribed.
- Staff had been trained to administer medicines safely.
- The management team completed regular checks to ensure staff worked in line with the provider's medicine administration procedure and best practice guidance.

Preventing and controlling infection.

- People said staff used disposable gloves and aprons One person explained this was important because a health condition meant they needed a 'germ free environment'.

- Staff completed infection control training and understood their responsibilities in relation to this.

Learning lessons when things go wrong

- Accidents and incidents were managed well. Where needed care plans and risk assessments were updated, and planned care adjusted to keep people safe.
- The management team completed a monthly analysis of accidents and incidents to prevent reoccurrence and identify any learning. Staff confirmed action needed and learning was discussed in team meetings.

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 the rating for this key question has remained Good. 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 fully assessed before they started using the service to ensure these could be met. This included identifying people's daily routines and life style choices, were people chose to share this information. This ensured protected characteristics under the Equality Act 2010 were considered.
- Information from assessments was used to develop care plans which helped staff to get to know people and understand their needs. One staff member said, "Care plans tell you a lot about a client [person]. They explain what to do and how to do it."

Ensuring consent to care and treatment in line with law and guidance

The Mental Capacity Act 2005 (MCA) provides a legal framework for making 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.

Where people may need to be deprived of their liberty in order to receive care and treatment in their own homes, the DoLS cannot be used. Instead, an application can be made to the Court of Protection who can authorise deprivations of liberty.

- The management team understood their responsibilities under the Act and knew to contact the local authority if they had concerns about a person's capacity. No one using the service at the time of our inspection had restrictions on their liberty.
- Staff completed MCA training and worked within the principles of the Act. They asked people for their consent before they carried out any personal care and offered people choices in all aspects of their lives.
- People confirmed staff gained their consent before they provided them with assistance.

Staff support: induction, training, skills and experience

- People and relatives said staff had the right approach and skills to provide good care. One relative told us, "Staff are experienced."
- Staff continued to develop their knowledge and skills through an induction and on-going training programme, including training specific to people's needs.
- The management team promoted and encouraged staff development. One staff member told us they were completing diabetes awareness training because they wanted to be able to speak 'with confidence' to a

person they supported who was diabetic.

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

- People told us staff supported them with the preparation of food and drink where required.
- Care plans included up to date information about people's dietary needs and preferences, including those linked to people's health, medical conditions and beliefs.
- When staff were concerned people might be at risk due to poor diet or not drinking enough, advice was sought from healthcare professionals.

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

- People received the support needed to access health care services. One relative told us staff contacted the GP if their family member was unwell. Adding, "The office keeps me informed."
- The management team and staff worked closely with health and social care professionals to improve outcomes for people, including social workers, GPs and district nurses.
- Advice and guidance from external professionals was recorded in people's care plans and followed by staff. One person's sore skin was improving because staff had sought advice from the district nursing service.

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 remained Good. 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; equality and diversity

- People described the staff who supported them as, 'lovely, pleasant and supportive'. A relative told us, "The staff are nice and gentle and very helpful..."
- Staff visited the same people which assisted in building relationships and their understanding of how people preferred their support to be provided.
- Staff had completed equality and diversity training. One described the importance of using gender neutral language, such as partner instead of wife or husband, when speaking with people. They said, "It shows you're not making assumptions and could help clients [people] feel comfortable to talk to you."

Respecting and promoting people's privacy, dignity and independence

- People's privacy and dignity was respected, and their independence promoted. A relative explained how staff supported their family member's independence, by only providing support if needed when their family member 'tried to do something' themselves.
- Staff understood the positive effect independence had on outcomes for people. One said, "Clients [people] want to stay in their own homes. Helping them to do things is a big part of this."
- People's personal information was managed in line with data protection law.

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

- People were supported to make day to day decisions and were involved in planning and reviewing their care. One person said they had recently been involved in making changes to their care call times.
- Staff understood the importance of respecting people's choices and checked with people before providing support. One told us, "I start every visit by saying hello then asking what the client wants me to do, even if they have a routine I always check."
- People's communication needs were known, recorded and understood by staff. For example, one person communicated their support needs using hand signs.

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 and at this inspection this key question has remained Good. This meant people's needs were met through good organisation and delivery. The management team and staff demonstrated they were working towards achieving an outstanding rating in this key question.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- People said they were very satisfied with the service provided. Relatives agreed, one said, "I am happy with the care. Staff have a good relationship with [person]."
- Care plans were personalised, regularly reviewed and updated when needed. Staff felt confident the information they provided ensured care was provided in line with people's wishes.
- The service was responsive to people's changing care needs. An 'on call' senior care worker was available to cover care calls if a staff member was delayed or if people requested additional calls at short notice.

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 service was meeting the AIS standards. The provider told us information about the service, including the service user guide could be provided in a different format if required.

Improving care quality in response to complaints or concerns

- People and relatives told us they would speak with a member of the management team if they had any concerns and were confident these would be addressed.
- Complaints had been investigated and responded to in line with the provider's procedure. Where needed improvements had been made. For example, a staff meeting had been held to discuss call times and senior care workers had completed spot checks to ensure agreed times and durations were being met.
- The service had received numerous compliments about the positive attitude of staff and quality of service provided.

End of life care and support

- There was no end of life care being delivered at the time of the inspection. However, staff had previously cared for people at the end stage of life and were trained and supported to do so. One staff member said they provided the 'best possible end of life care' and felt 'privileged' to support people at this time in their lives.
- The provider was supporting staff to further develop their skills in supporting people and their families at the end stage of life. They told us, "It's really important for clients [people] and if we get it right it can help

the people who are left behind to cope better."

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 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

- People and relatives were happy with the care provided and told us they would recommend the service. One relative told us, "A good manager glue's everyone together... the staff are very good, always positive and never negative."
- Staff felt valued. One described the pride they felt when they were awarded 'employee of the month'. They said, "I was so happy I rang my mom to tell her."
- The management team promoted an open culture and led by example. A staff member told us, "The difference about working here is we are a real team. We feel comfortable to speak out and your opinion is respected. Managers are always there to help when needed."

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

- The service was led by an experienced management team who staff described as 'brilliant, knowledgeable and caring'.
- Staff were clear about their roles and responsibilities. They told us these were discussed in individual and team meetings. One staff member said, "We talk about expectations, training, anything your worried about or need help with."
- The management team completed a range of quality checks to monitor, review and improve the service. They understood and met their regulatory responsibilities, for example they had notified us about important events and displayed the services latest CQC rating.

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

- Feedback from people, relatives and staff was encouraged through telephone calls, meetings and quality questionnaires. Feedback was used to inform future planning.
- The service had links with the local community and other professionals.
- The management team and staff had organised charity events to support individuals and national organisations.

How the provider understands and acts on 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 provider understood their responsibility to be open and honest when things had gone wrong. Learning

had been shared with staff, to prevent reoccurrence.

- The registered manager maintained an action plan where improvement had been identified. They told us, "Going forward we are striving to achieve an outstanding CQC rating." The management team welcomed our inspection and said our feedback would be used to further support continuous improvement.