

Adelfi Care Services Limited

Adelfi Care Services

Inspection report

156 Sapphire Road
Bishops Cleeve
Cheltenham
GL52 7YU

Tel: 01242384825
Website: www.adelficare.co.uk

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Outstanding ☆

Summary of findings

Overall summary

Adelfi Care Services is a domiciliary care service providing personal care to people in their own home. At the time of the inspection, 15 people were receiving support from the service, 7 of which were in receipt of personal care.

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

We received positive views about the service from people and their relatives. One person's relatives told us: "It has been a great success. [Person] lives on [their] own and would not be able to stay at home. They come four times a day. They have given us lots of ideas and tips which we probably would not have known about. I can't fault them at all. We are all very happy. I can't thank them enough for their professionalism and the care they are giving [person]."

People received care which was safe, and staff understood how to support people to maintain their safety. People's medicines were administered safely and as prescribed. The provider checked the suitability of new staff through recruitment processes. Staff used personal protective equipment (PPE) when supporting people to reduce the risk of infection.

People received compassionate care and they felt respected and valued as individuals. Staff exceeded expectations to ensure people's needs were met and they were comfortable and safe. One person's relative told us: "Everything that is possible to do is done for [person]. If they go to a wedding, they bring [person] a piece of cake. At Christmas [staff] made Christmas dinner for everyone who was on their own."

The registered manager and management team offered exceptional leadership and had a clear vision about the service. There were robust quality assurance systems in place to ensure people received the best possible service which was person centred to their needs and wishes. The registered manager worked closely with people, their representatives, partner agencies and services and the community to promote best practice within the service and make a positive impact to people's lives.

Rating at last inspection and update

The last rating for this service was requires improvement (published 14 July 2022) and there was a breach of regulation. The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection we found improvements had been made and the provider was no longer in breach of regulation.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Adelfi Care Services on our website at www.cqc.org.uk.

Why we inspected

We carried out an announced comprehensive inspection of this service on 30 and 31 May 2022. A breach of legal requirements was found. The provider completed an action plan after the last inspection to show what they would do and by when to improve safe recruitment practices.

We undertook this focused inspection to check they had followed their action plan and to confirm they now met legal requirements. This report only covers our findings in relation to the Key Questions Safe and Well-led which contain those requirements.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

The overall rating for the service has changed from requires improvement to good based on the findings of this inspection.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

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 well-led?

Outstanding ☆

The service was exceptionally well-led.

Details are in our well-led findings below.

Adelfi Care Services

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 Health and Social Care Act 2008.

Inspection team

The inspection was carried out by 2 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.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

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.

What we did before inspection

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

The provider was not asked to complete a Provider Information Return (PIR) prior to this inspection. A PIR is

information providers send us to give some key information about the service, what the service does well and improvements they plan to make.

During the inspection

We spoke to 2 people using the service and 5 relatives about their experience of the care provided. We spoke to 7 members of staff, including 4 care staff, the registered manager, the deputy manager and the director of the service.

We reviewed a range of records. This included 3 people's care records and multiple medication records. We looked at 4 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. We looked at training data and quality assurance records and additional evidence of how the service went the "extra mile" to support their staff and people using 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 our last inspection we rated this key question requires improvement. At this inspection the rating has changed to good. This meant people were safe and protected from avoidable harm.

Staffing and recruitment

At our last inspection safe recruitment practices had not always been followed. This was a breach of regulation 19 (Fit and proper persons employed) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 19.

- Since our last inspection, the registered manager had introduced systems and processes to ensure safe staff recruitment and implemented them when recruiting new staff.
- Checks had been made on relevant previous employment, as well as identity and health checks. Gaps in employment histories were explored. Disclosure and barring service (DBS) checks had also been carried out. DBS checks are a way that a provider can make safer recruitment decisions and prevent unsuitable staff from working with people.
- The service had enough staff to meet the needs of people using the service. They used an electronic rota planning system which supported the management team to monitor the care call delivery.
- People told us they felt assured that they would receive their care. Phone calls were made to inform people of any late visits.
- One person told us, "It's never happened that they have been that late. Yes [stay full length of time], they will sit on the settee and have a chat if they have finished too soon. They make my coffee and make sure I am settled in the chair. I have recommended them to several people and I could not be more pleased."
- A plan was in place to ensure people with the highest needs were prioritised to receive their care in the event of any disruption to the service provided such as in bad weather.

Systems and processes to safeguard people from the risk of abuse

- People and their relatives told us they felt safe when staff visited to provide care and support. One person told us: "they are all very friendly, very good. You always get the same people, you get to know those people and feel comfortable with them coming into your home. We know them by name, and my wife gets on well with all of them."
- Staff received training in safeguarding adults and were aware of the procedures for reporting any safeguarding concerns.
- Staff demonstrated awareness and understanding of whistleblowing procedures. They told us they were confident to follow this process if needed. Whistleblowing allows staff to raise concerns about their service without having to identify themselves.

Assessing risk, safety monitoring and management

- Risks to people had been assessed and actions needed to mitigate their risks were available for staff to refer to. This included, for example, how to support people's risk related to skin integrity.
- Staff were aware of people's risks and the support they needed to remain safe.
- Moving and handling assessments provided staff with the information they needed to safely support and transfer people.
- Environmental risk assessments had been completed for identified risks in and outside of people's homes to ensure the safety of people receiving care and the staff who supported them.
- Measures were put in place to ensure the personal safety of staff where they were working on their own in people's homes.
- Plans were in place for staff to follow in the event of staff being unable to gain entry to people's homes.

Using medicines safely

- An electronic system was used to record people's medicines and the administration. This enabled regular audits to be carried out to ensure people were receiving their medicines correctly.
- People's care documentation contained information in relation to their medicines. A separate medication risk assessment was in place for people who required support with their medicines.
- Staff had received training to support people to take their medicines and their competencies were checked to ensure correct practices.

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 MCA 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.

- We found the service was working within the principles of the MCA and the registered manager and the staff had received training in MCA.

Preventing and controlling infection

- Effective infection prevention and control procedures were in place to reduce the risk of spread of infection.
- People and their relatives confirmed staff wore PPE and maintained good infection control practices during delivery of care. One person told us: "I would say they go over the top with that, which is a good thing to see."
- Staff had been trained in safe infection control practices and had access to personal protective equipment (PPE).

Learning lessons when things go wrong

- Systems were in place for staff to report concerns or accidents to the registered manager. Accidents and incidents were recorded, and actions were identified to help minimise the risk of further occurrence for people.
- The service's quality audit systems identified any actions required and lessons learnt which were used to improve the service delivery.

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 our last inspection we rated this key question requires improvement. At this inspection the rating has changed to outstanding.

This meant service leadership was exceptional and distinctive. Leaders and the service culture they created drove and improved high-quality, person-centred care.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; Working in partnership with others

- The delivery of care, values and culture of the service was underpinned by the provider's own principles of good quality care and well-being. The provider's vision of the service was to not only provide support to their clients, but also to their loved ones, "as they navigated the often-challenging landscape of finding and implementing care for the first time" and to support with the intention of providing positive outcomes.
- The culture of the service was exceptional and involved local community support and developing ways of working over and above the expectations of a domiciliary care agency.
- The provider's values were embedded in staff practices through a comprehensive recruitment and training programme and exceptional support from the provider. Staff demonstrated a true understanding of personalised care and helped people to achieve not only their personalised goals, but also wishes such reconnecting with the community they lived in.
- Staff were positive in their roles and clearly proud to work for the service, receiving ongoing support to continue to provide a high-quality service which made a difference.
- As well as working collaboratively with health care professionals, the provider worked in partnership with a number of other agencies in the wider community.
- There was a strong culture to continually review the service, drive improvement, set new objectives and pledges which focused on the well-being of people and staff who worked for the service.
- The service had built links with the local community and enhanced people's participation in the community. This included sponsorship actions such as giving back to the local community which included a hedgehog charity. One person who had not accessed the community in a long time following deterioration in health and bereavement, was supported by staff to enjoy a day out on a hedgehog trail. This helped the person build their confidence, brightened their day and gave them the opportunity to socialise again.
- The service was a member of a recognised dementia programme. They were using resources sourced through the programme to support people living with dementia. They were supporting one person living with dementia by using games and puzzles to keep them stimulated, giving them the opportunity to reminisce and talk about how they envisage their future.
- Other sponsorship included supporting a motor neuron disease (MND) association in remembrance of people they supported who lived with this medical condition. This supported the association make a difference to how people who lived with MND or their loved ones coped with the future.
- Person centred initiatives included supporting one person who was generally bed bound and nervous

about accessing the community to go out and make the first step in reconnecting with the community, which set the scene for further outings. One staff taking their puppy to work which had a positive impact for one person who was an animal lover and recently lost their dog. This brightened their day and supported them surpass a difficult moment, giving them a topic of conversation for days.

- Other person centred initiatives included visiting people in hospital who did not have any loved ones to visit them, helping them feel valued, and supporting people transition into care homes by visiting them, which supported them with consistency, aided to their transition support to residential care and offered them something to look forward to.
- Staff and people's relatives spoke positively about the management of the service. Staff felt very supported by the management team.
- Comments from people's relatives included, "They go above and beyond all of the time. [Person] wouldn't still be there [at home] if it wasn't for them." and "[Person] trusts them, they have proved they know what they are doing. They are very pleasant. The agency is local and [person] is local. I know some of the people, and I think that has given [person] confidence in them."

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

- At the last inspection we recommended the provider reviews the effectiveness of their recruitment audit to ensure it supports the implementation of their recruitment policy. At this inspection we found that the registered manager had reviewed these and was monitoring the implementation of their recruitment policy.
- Systems of governance were well imbedded, which meant that the service could run very well in the absence of the registered manager, and promoted inclusion, empowerment and strong partnership working.
- There were effective and robust systems in place to monitor the quality of services and care provided to people. Regular audits were taking place to support the registered manager to meet the regulatory requirements and identify shortfalls in the service, this included quality audits related to medicines, daily care records and care documentation.
- The registered manager and deputy manager were able to monitor the care visits provided to people on a daily basis using a live screen. This gave real time information about visits planned for the day and staff attendance enabling any issues to be identified and responded to.
- The registered manager carried out a robust and comprehensive quarterly audit of the service which followed the CQC key lines of enquiry and regulations. This allowed them to appraise the service, reflect on the findings and identify actions to implement towards improving the quality of the service they offered people.
- For example, following the last quarterly audit, the registered manager identified more details were needed to be captured in the spot checks carried out to verify staff practice to include feedback from the staff member and the manager.
- Since our last inspection, through the appraisal of the service, the registered manager identified the electronic system they were using for care planning and medicines administration was not effective for the requirements of the service, therefore they invested in a new system to improve in these aspects of the service and ensure they tailored it to support them deliver high levels of personalised care.
- Through the implementation of the new electronic system, the management team were planning to further strengthen their quality monitoring systems by developing the electronic auditing schedule available to suit the business needs and carry out mock inspections of the service to ensure compliance with regulations and evaluate the care delivered to people.
- Through their monitoring of the service and feedback from staff, the management team identified where people no longer needed a certain amount of time for their visit or the number of calls per day and reduced this for the clients, this promoted their independence and reduced reliance on domiciliary care support.

- The provider was aware of the staffing pressure within the care industry and the risk this posed to people not received good quality care. They had adopted a careful approach to recruiting, developing and retaining staff to ensure people would receive exceptional care from staff that knew them well. These initiatives meant staff retention had been very good and the service never had to use agency staff. This provided continuity of person centred care to people.
- Some of these initiatives included a robust induction process for staff, through which staff had the opportunity to shadow the management team in supporting people for as long as they needed to until they felt comfortable to work on their own. In addition, staff were being supported with National Vocational Qualification (NVQ) training at different levels. One staff member told us they were currently working towards a level 3 qualification and were going to act up in role while the deputy manager was taking leave.
- Other initiatives included supporting the staff with loan for car repairs and funding private counselling following the passing of a client which had an impact on the staffing team. One staff member talked to us about this initiative and described this support as "great". The director told us the staff were their biggest asset and the management team appreciated the work they did and the extra mile they went for the clients.
- The service had plans for expansion, however they wanted to do this in a very careful way so it did not impact on the person centred care they offered people. They wished to replicate the smaller scale setting they currently had in a different geographical area as opposed to growing the business from the same office location.
- The registered manager kept up to date with best practice by attending local forums with other care professionals. These forums allowed for information sharing, professional updates and discussions around how to implement best practice guidance.
- People and their relatives described the management and the staff of the service as: "It's a small group and the people running the show often do the care too. It's very well managed." and "They are all very friendly. I just think they are all just wonderful people."

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

- People and their relatives had positive experiences when they communicated with the service.
- Surveys had been sent out to people and their relatives to gain their views. Results from the 2022 survey were positive. Staff surveys had also been carried out. The results from the 2022 survey were positive and showed staff felt valued and were happy in their roles.
- The management team had recently introduced a newsletter which was sent to staff, people and their relatives. One relative told us, "They go above and beyond all of the time. [Person] wouldn't still be there [at home] if it wasn't for them. They have a newsletter which makes it more personal."
- Staff told us they felt empowered to give feedback and felt engaged and listened to. For example, feedback from staff in relation to rota planning had been listened to and staff confirmed this to us.