

Green Arrow Homecare Ltd

Green Arrow Homecare LTD

Inspection report

Astra House Suite 9B
The Common
Cranleigh
GU6 8RZ

Date of inspection visit:
03 August 2022
04 August 2022
11 August 2022

Date of publication:
12 October 2022

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

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

At the time of the inspection, the location did not care or support for anyone with a learning disability or an autistic person. However, we assessed the care provision under Right Support, Right Care, Right Culture, as it is registered as a specialist service for this population group.

Green Arrow is a domiciliary care agency providing the regulated activity personal care to people in their own homes. At the time of our inspection there were 46 people using the service living with a mixture of health conditions such as diabetes, Parkinson's and dementia. 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 45 people were receiving support with the regulated activity.

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

People were supported in a person-centred way that was responsive to their needs. People told us Green Arrow had supported them in such a positive way it meant their quality of life had greatly improved. People were supported to meet other service users and follow hobbies and avoid isolation.

People were supported by kind and caring members of staff. We were told staff respected people's privacy and treated them with dignity.

People were kept safe from the risk of harm by staff that had been safely recruited. Staff supported people with their medicines and ensured they had enough to eat and drink.

Staff and people felt supported by the registered manager who was keen to work with other professionals and ensured people had access to health professionals in a timely way.

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.

Right Support: The model of care maximised people's choice, control and independence.

Right Care: Care was person-centred and promoted people's dignity, privacy and human rights.

Right Culture: The ethos, values, attitudes and behaviours of leaders and care staff ensure people using services lead confident, inclusive and empowered lives.

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

Rating at last inspection and update

This service was registered with us on 19 May 2021 and this is the first inspection.

Why we inspected

This inspection was to provide a rating for the newly registered service.

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 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.

Green Arrow Homecare LTD

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

This 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 houses and flats.

Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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.

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.

Inspection activity started on 03 August 2022 and ended on 10 August 2022. We visited the location's office on 04 August 2022.

What we did before the inspection

We reviewed information we had received about the service since the registration. We sought feedback from the local authority and professionals who work with the service. We sought feedback from service users and

relatives. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

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

We reviewed a range of records. This included eight people's care records and multiple 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.

This is the first inspection of this newly registered service. This key question has been rated good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People and relatives told us they felt safe with the staff that supported them and their family members. One relative said, "The most important thing is [person] is safe. [Person] feels safe and that is the most important thing to trust people to enter their home and for her to feel safe."
- The registered manager was knowledgeable about how to identify and report safeguarding concerns. They also understood the correct procedure to follow to ensure all relevant professionals were made aware in a timely way.
- The provider had a safeguarding policy in place which offered guidance and advice for staff. All staff had also completed mandatory safeguarding training.

Assessing risk, safety monitoring and management

- People were kept safe from the risk of harm. People's individual risks had been identified, assessed and reviewed on a regular basis. For example, one person had a range of rare medical conditions and the registered manager had ensured that these were all separately risk assessed and clear guidance from the NHS provided for staff in the care file.
- Staff were knowledgeable about people's individual risks. One staff member said, "I think it's so important to know every person's risks. The care plans are such a good tool to make sure we all are aware of people's risks before we go to support someone."
- Assessments were also completed for housekeeping and environment of each person's personal homes. This not only assured risks to people were managed, it also included ensuring the safety of the staffing team.

Staffing and recruitment

- People told us there were always enough staff. One person said, "They are always on time, I haven't had any problems." A relative told us, "They're always prompt, and this is so important to [person]."
- The registered manager had a dependency tool that calculated how many care hours were required to meet people's needs and this was in line with the rotas reviewed at inspection. This ensured there was enough staff to meet all care packages.
- People were supported by staff who always attended on time and stayed for the duration of their agreed call time. All calls were recorded on a digital system and if they did not fit in with travel time they could not be plotted in to the system. The system would also generate an alarm if a call was missed or late, this alert would go straight to the registered manager to investigate to ensure all people were supported safely in line with their care plan, needs and the staffing rota.
- The registered manager followed safe recruitment practises. These included full reference checks, previous employment details and checks with the Disclosure and Barring Service (DBS). These checks

provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.

Using medicines safely

- People and relatives told us they received support with their medicines. One person said, "They help me with my medicines, I have no complaints, they really are great."
- Medicines were managed on a digital system, this included Medicine Administration Record (MAR) charts. This system ensured that if a medicine had not been administered, an alert was sent to the registered manager and it was addressed in a timely way.
- All people individual medicine needs were detailed in people's care plans and staff had received training in the administration of medicine.

Preventing and controlling infection; Learning lessons when things go wrong

- People were protected from the spread of infection. People told us that staff used Personal Protective Equipment (PPE) when necessary. This reduced the chance of the spread of COVID-19.
- Staff had easy access to PPE. The registered manager had hired an additional office space to ensure there was a good stock of both PPE and COVID-19 tests for all staff to access whenever they required so there was no need for a shortage to occur.
- The registered manager had an accidents and incident procedure in place. This ensured they analysed trends and patterns so steps could be taken to prevent reoccurrence. As a result, the registered manager could take action, for example they had supported a person to make a health referral in response to one of the incidents.

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.

This is the first inspection for this newly registered service. This key question has been rated 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

- The registered manager completed all assessments thoroughly. This ensured the service could meet the needs of all new service users. One relative said, "[Registered manager] was very personable in the initial meetings – you were reassured they were very involved."
- People told us they were very involved with the assessment process. One person said, "I like that I am so involved in all assessments. It makes me feel like I am still in control, which is so important."
- Care plans detailed people's individual needs and how staff could support them. This was alongside recognised guidance such as The National Institute for Health and Care Excellence (NICE) in relation to medicines.

Staff support: induction, training, skills and experience

- People told us that staff were well trained and informed of their individual needs. One person said, "[Registered manager] ensures that all staff know about all of my needs, and the rare conditions I have they ensure all staff are trained in it so they have the knowledge, it's exceptional."
- All staff completed a range of training to ensure they had the skills and competencies to meet people's needs. Staff new to care undertook the Care Certificate is an agreed set of standards that define the knowledge, skills and behaviours expected of specific job roles in the health and social care sectors. It is made up of the 15 minimum standards that should form part of a robust induction programme.
- The registered manager had a training matrix. This was a record that showed all members of staff and what training they had received. This also highlighted what dates staff needed to complete refresher training so all staff could remain up to date. The registered manager ensured all staff had completed the relevant training and refresher training.
- The registered manager had also identified specific training is more effective as a face to face training session and this had been organised with a trainer in the office for all staff. For example, first aid and moving and handling.
- All staff completed an induction period, where they would have a period of 'shadowing' an experienced member of staff. At the end of an induction period the registered manager would complete a competency assessment. All staff would then have regular, ongoing competency assessments to ensure there were no additional training needs.

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

- People told us that staff took care and attention whilst preparing food for them. One person said, "(Staff) are always so careful when preparing my meals to make sure it's something I like."
- People also told us how staff had been diligent with ensuring people remained hydrated during a period

of unusually hot weather. One person told us, "(Staff) always check if I have plenty of water, especially in the last two weeks."

- We saw that care plans had person-centred details about food and drink and advice for staff on how to encourage people to have a balanced diet. This included lists of their preferred foods and what drinks they enjoyed.

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

- People told us when appropriate, staff sought medical advice in a timely way. One person said, "They (staff) are perceptive, they notice when I'm unwell, they know I'm ill before I know I'm ill. [Registered manager] will notice straight away and make a health referral."
- There was evidence in care plans that staff worked closely with various health professionals to ensure they understood people's individual needs and diagnosis. This also included guidance for staff shared by health professionals. We saw evidence of information sharing by a local occupational therapist with advice for staff regarding a change to a person's condition.
- The registered manager was keen to keep an open communication with all professionals. During the inspection there was a number of calls to and from the office where the registered manager was speaking with health professionals and social care workers to ensure a timely response to a specific urgent case they were all dealing with in partnership.
- Where people had been supported by social care services, the registered manager had liaised with them to ensure copies of assessments were included in care plans so all information was known to the staff supporting them.

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 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.

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, whether appropriate legal authorisations were in place when needed to deprive a person of their liberty, and whether any conditions relating to those authorisations were being met.

- All care plans detailed consent from people who had capacity. Where people did not have capacity, correct assessments had been completed.
- Where people's relatives held Legal Power of Attorney (LPA) this was detailed in people's care plans and what areas this related to. For example, financial or health decisions.
- Staff received training in MCA and when spoken with they were knowledgeable about this area of care they delivered.
- The registered manager had knowledge of what their responsibilities were in relation to the court of protection and how they would support a person and their family through this process.

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.

This is the first inspection for this newly registered service. This key question has been rated 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; respecting equality and diversity

- People told us that staff were kind and caring. One person said, "The staff are very caring, I've made friends with most of them."
- Relatives told us that staff treated people well. One relative said, "The carers are so nice and caring. All of the staff really want to do the job." Another relative said, "[Relative] absolutely adores them all – [Registered manager] has picked an amazing team."
- People and relatives told us how the registered manager had 'matched' personalities of care workers to people to ensure an excellent level of support. One relative said, "[Registered manager] has been very good at matching personalities with my wife."

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

- People told us how staff supported them to make decisions. One person said, "Every day I do a list of things I want (staff) to do and they always complete it."
- Relatives told us how staff would always ask people their views in how they wanted to be supported. One relative said, "They're always asking [person] how she wants things done and giving her choices."
- Staff told me how it was important to give people choices. One staff member said, "It's so, so important to make sure people have a choice and a say as after all we are in their homes." The member of staff then continued to tell us how they give people choices regarding their outfit choices, what they want to eat and what activities they want to partake in.

Respecting and promoting people's privacy, dignity and independence

- People told us staff treated them with respect and encouraged independence. One person said, "They're very respectful." Another person said, "[Registered manager] has shown me I can do things, I can do hobbies. I can do things I actually want to do." This person continued to tell us how the registered manager had encouraged them to follow a hobby of theirs that meant a lot to them and their independence.
- Relatives also gave similar feedback. One relative said, "[Relative] would absolutely not be able to live at home without Green Arrow, she would be in a home, this way she keeps her independence."
- Staff told us how they support people whilst always promoting privacy and independence. One staff member said, "It's so important to treat them how I would want to be treated. I always encourage small goals to keep people moving and independent." The member of staff continued to tell me how they encourage people to take walks or access their garden when safe and appropriate to do so.

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs.

This is the first inspection for this newly registered service. This key question has been rated good. This meant people's needs were met through good organisation and delivery.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them; Improving care quality in response to complaints or concerns

- People told us that the level of care they had received was more responsive than any other company they had used. One person said, "I've used quite a few different care agencies in the past and I've been with them (Green Arrow) for just over a year. They are the best. For the first time in my life I actually feel safe, with the knowledge they (staff) know what they're doing, the carers are lovely." Another person said, "It's the extra things that mean so much that you just don't get from other companies. The thoughtful gestures like little gifts sent to us on certain occasions and events being organised for us to attend."
- The registered manager had arranged events for all service users in a local village hall to bring people together and encourage friendships. One relative said, "[Registered manager] always goes above and beyond, she found out [relative] had been in hospital with another client and sat them together at the event, they enjoyed catching up, and it was just so thoughtful." Another person said, "I was so lonely before I started using Green Arrow. My life has changed so much. I love the events that they put on so I can meet other people like me and the staff are friends now as well."
- People and relatives told us that their lives had improved for the better since using Green Arrow. One person said, "I just can't explain how much my life has changed. I didn't know I could have this quality of life and do the things that Green Arrow have helped me achieve. I now can go out for meals or coffees, where before all I did was spend all the time in my house."
- Another relative told us, "[Relative] used to be social when she was younger but she seemed to lose it in the last ten years. Green Arrow's staff and their events have really brought her out of her shell again and she really looks forward to the events that they have put on."
- The registered manager explained that she had received such a good response to their 'jubilee party' all service users attended requested another event. The original plan had been a Christmas party, however, seeing such a positive response the registered manager had planned an additional 'summer party'.
- People and relatives told us how Green Arrow included them in events throughout the year. One person said, "The staff are so thoughtful with lovely extra things, they sent us an advent calendar in December, Christmas present, valentines day present, St Patricks Day goody bags, Pancake day food." Another person said, "Those little touches mean so much to me, it makes me feel loved." A relative said, "Green Arrow do lovely little things for [person]. It's nice to see them celebrate important cultural events throughout the year." All events, transport to events and celebratory gifts throughout the year were financially covered by the registered manager.
- The staff told us the registered manager was dedicated to encourage relationships for the service users. One staff member said, "[Registered manager] is so thoughtful, she's always thinking of ways to ensure people aren't lonely." The staff member continued to tell us how meaningful the small gifts throughout the

year mean to people, for example gifts on Mother's Day and Father's Day.

- People and relatives told us they felt the registered manager and staff were responsive to any comments made. One relative said, "I literally have nothing negative to say and have never had a reason to complain, however, I am 100 per cent sure that [registered manager] would deal with anything immediately and brilliantly."
- There was a complaints policy in place, however, no complaints had been received. The registered manager said, "I like to resolve any questions quickly so it doesn't escalate to a complaint. I have an open, honest approach which has been working well for communication with clients and relatives."

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

- People and relatives told us how the registered manager was thorough and gained lots of personalised details when completing assessments and reviews. One relative said, "The assessment process was thorough and they often complete reviews. Me and [person] are always involved and it seems important to [registered manager] that she gets as much personal information as possible so she can really tailor the care to what [person] needs." We saw evidence of this with a large amount of personalised information in the care plans.
- People felt they had control of decisions made relating to their care. One person said, "I like that I am so involved in all assessments. It makes me feel like I am still in control, which is so important." We saw evidence of people's involvement in care plans we reviewed.
- Care plans detailed people's choices and documented their involvement and preferences. One staff member said, "It's important to know people's individual preferences to deliver the level of care we deliver."

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- People told us staff communicated with them well. One person said, "They are always clear and always make sure they have understood me properly."
- People's communication needs were clearly documented in their care plans. For example, this detailed if people were hard of hearing and offered advice and guidance for staff to follow.

End of life care and support

- The registered manager was prepared to support people if they entered this stage of life. The registered manager confirmed they would involve the district nursing team and a hospice team and share all information with them to ensure a person was as comfortable as possible.
- Staff received death, dying and bereavement training. This prepared them for if they were to support a person at the end of their life in the future.

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.

This is the first inspection for this newly registered service. This key question has been rated 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; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- People and relatives, where appropriate felt involved in the care they received. One relative said, "We are completely involved in every step of the process and the communication is unbelievably good." This was shown through care plans and communication logs held at the office.
- The registered manager was keen to gain good outcomes for all service users through person-centred care. They had helped a service user follow a hobby they thought they would not be able to follow anymore. The registered manager had also encouraged friendships between service users to ensure they avoided isolation. People told us that this approach had changed their lives for the better. One person said, "I just never believed I could achieve what I have achieved with the help of Green Arrow."
- People were regularly asked for feedback and if any suggestions were made action was taken. For example, feedback suggested all service users wanted more events to be put on, as a result the registered manager had organised an additional event for everyone to enjoy.
- Staff felt included and involved in the company. One staff member said, "I know that [registered manager] would listen to any suggestions I make." This was seen through notes and actions made during the staff meeting minutes we reviewed.
- Staff also took part in regular supervision where they were given an opportunity to raise any suggestions or questions about their roles.
- Staff felt supported in their everyday work. The registered manager paid all staff to include travelling time. One staff member said, "We get paid travel time. It means we're never rushing our clients or in a rush to get to the next call."

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; Working in partnership with others

- Although the registered manager had not received any complaints, they were keen to share all information with relatives. One relative said, "It's just reassuring having that constant open communication and updates from [registered manager]. I just can't fault them. I know they would be honest if anything happened and they would update me immediately."
- The registered manager had a duty of candour policy which had advice and guidance for staff to follow.
- The registered manager shared many examples of how they were successfully working in partnership with others. This was also documented in people's care plans. For example, they working closely with the community mental health team (CMHT) to support a person to get the best results of care and health

support.

- The registered manager was keen to share information, when appropriate, with other professionals. The registered manager said, "It just means that we end up all being so much more efficient, and get the best results for people." We saw examples of staff working closely with social care professionals to ensure a person was able to remain in their home and receive the correct support.

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

- Staff told us that the registered manager was incredibly supportive whenever they needed help. One staff member said, "[Registered manager] is just brilliant, I don't really have the words, she's just so good at supporting her staff and she cares so much for all of the clients."
- The registered manager was knowledgeable in what quality assurance audits to complete to find effective, meaningful results so changes could be made if necessary.
- There were a number of audits that the registered manager completed, these ensured that all areas of the service were reviewed so any risks were identified quickly and action taken in a timely way. This included medicine audits to ensure all people were receiving their medicines safely. This identified if a person needed a review or a change to a prescription.

Continuous learning and improving care

- The registered manager was keen to continue to learn and build the company. The registered manager said, "I want to continue to grow but at a pace where we can handle it. I would never compromise the safety of the clients, so we will continue to grow but only when we have the right members of staff in place."
- The registered manager also had a network of experienced professionals that they had regular contact with. This meant that learning from other services and professions could be shared and action taken to ensure the care continued to improve. For example, this included other professionals working within the domiciliary care industry, that could advise on previous learning to prevent any errors occurring at Green Arrow.