

Apex Prime Care Ltd

Apex Prime Care - Ashtead

Inspection report

The Old Bank
50 The Street
Ashtead
KT21 1AZ

Tel: 01372230757

Website: www.apexprimecare.org

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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

Apex Prime Care – Ashtead provides personal care and support to people living in their own homes. All the people using the service at the time of our inspection were older people, some of whom had needs in relation to health, mobility, and sensory Impairment.

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.

The service was supporting 34 people at the time of our inspection, 25 of whom received personal care.

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

People felt safe when staff provided their care. Relatives were confident their family members received a reliable service from staff who knew how to provide care in a safe way. Staff understood their responsibilities in protecting people from abuse and knew how to report any concerns they had. The provider's recruitment procedures helped ensure only suitable staff were employed.

Risk assessments were used effectively to identify and manage any risks involved in people's care. People's medicines were managed safely. Staff protected people from the risk of infection by wearing personal protective equipment (PPE) when they carried out their visits.

People received their care from kind and caring staff with whom they had established positive relationships. Staff knew and respected people's preferences about their care. Staff encouraged and supported people to be independent wherever possible.

Staff had an induction when they joined the agency and had access to the training they needed to carry out their roles. Staff had opportunities to discuss their performance and training needs with their line managers.

People's needs were assessed before they began to use the service and kept under review. Staff were observant of any changes in people's health and wellbeing and highlighted any concerns they had promptly. Professionals said staff followed any guidance they put in place to ensure people received the care they needed.

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.

The management team encouraged people who used the service, relatives and staff to contribute their

views and acted on their feedback. Staff were supported well by their managers and had access to advice and guidance when they needed it. There were effective systems in place to monitor the quality and safety of the service. Managers and staff worked effectively with other professionals to ensure people received the care they needed.

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

Rating at last inspection

The registered provider of this service has changed since the last inspection. The last rating for the service under the previous provider was good, published on 14 June 2019. The service was registered under the current provider on 4 August 2021.

Why we inspected

This inspection was prompted by a review of the information we held about this 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.

Apex Prime Care - Ashtead

Detailed findings

Background to this inspection

The inspection

We carried out this performance review and assessment under Section 46 of the Health and Social Care Act 2008 (the Act). We checked whether the provider was meeting the legal requirements of the regulations associated with the Act and looked at the quality of the service to provide a rating.

Unlike our standard approach to assessing performance, we did not physically visit the office of the location. This is a new approach we have introduced to reviewing and assessing performance of some care at home providers. Instead of visiting the office location we use technology such as electronic file sharing and video or phone calls to engage with people using the service, their relatives and staff.

Inspection team

One inspector carried out the inspection.

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 a short notice period of the inspection because we needed to ask the registered manager to send us information and to obtain people's consent to receive a telephone call from us.

Inspection activity started on 13 October 2022 and ended on 23 October 2022.

What we did before inspection

We reviewed information we had received about the service since the last inspection, including notifications of significant events. We sought feedback from the local authority and professionals who work with the service. 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 of this information to plan our inspection.

During the inspection

We spoke with the registered manager via Microsoft Teams about how the service was run. We reviewed feedback forms which had been submitted by four relatives and two people who used the service. We spoke with two people who used the service and two relatives to hear their views about the care the agency provided. We received feedback from two professionals who had worked with the agency and from nine staff about the training, support and information they received.

We reviewed care plans and risk assessments for three people, medicines records for two people, recruitment records for three staff, training records, policies, accident and incident records, quality audits, meeting minutes, satisfaction surveys, and the agency's business continuity plan.

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 under the previous provider we rated this key question good. The rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- People said they felt safe when they received their care. Relatives told us their family members received a safe and reliable service, which they found reassuring. One relative said, "They are very careful with [family member]; I know she is in safe hands." Another relative told us, "We have the reassurance that someone is looking after her. We can trust them."
- Professionals said staff provided people's care in a safe way. One professional told us, "I have always found the care Apex Prime Care (Ashtead) provides is safe and meets individual needs in a person-centred way." Another professional said, "I use this care agency frequently, they provide safe care to all of their clients."
- Assessments were carried out to identify and manage any risks involved in people's care. For example, risks relating to moving and handling, skin integrity and people's home environment. Risk assessments were reviewed regularly to ensure they continued to reflect people's needs.
- Any accidents that occurred were recorded and reviewed to identify actions which could be taken to prevent a similar event happening again. Learning took place when adverse events occurred, and action was taken to reduce the risk of them happening again. For example, when a person who took their medicines independently forgot to do so, an additional care call was put in place with the person's consent so staff could check the person was taking their medicines.
- The provider had a business contingency plan to ensure people would continue to receive care in the event of an emergency, such as an infectious disease outbreak or adverse weather conditions.

Staffing and recruitment

- The provider employed enough staff to carry out all the agency's scheduled care visits. The registered manager told us they would not take on a package of care unless they were confident the agency had sufficient staff with appropriate skills to meet the person's needs.
- People told us staff almost always arrived within the agreed time window for their visits. They said the office informed them if staff were going to be late for their visits. One person told us, "They are always punctual; I can rely on them." another person said, "They are pretty much always on time. If they are running late, the office will phone me and let me know."
- The provider's recruitment procedures helped ensure only suitable staff were employed. The provider obtained proof of identity, references and a Disclosure and Barring Service (DBS) certificate for staff prior to employment. DBS checks provide information including details about convictions and cautions held on the Police National Computer. This information helps employers make safer recruitment decisions.

Systems and processes to safeguard people from the risk of abuse

- Staff received training in safeguarding and understood their responsibilities in protecting people from

avoidable harm. Staff knew how to report any concerns they had, including to external agencies if necessary. One member of staff told us, "Safeguarding issues can be reported to the care manager. I've not had to do this but I am confident it would be taken seriously if I felt the need to report anything." Another member of staff said, "If I was concerned about abuse, I would immediately speak to the senior carer or another member of the management team. If I felt it wasn't dealt with efficiently, or if I felt that the abuse was due to the management, I would contact the local authority or CQC."

- The registered manager had taken action to safeguard people when concerns had been raised. For example, the registered manager made a safeguarding to the local authority and notified CQC in December 2021 when a person who used the service was at risk of domestic abuse.

Using medicines safely

- People who received support to take their medicines told us staff helped them do this safely. Relatives confirmed staff supported their family members take their medicines as prescribed. One relative told us, "The ladies attend in the evening to make sure [family member] takes her evening medication." Another relative said, "They manage [family member's] medication safely."

- Staff received medicines training and their practice was assessed before they were authorised to administer people's medicines. Medicines administration records were kept in people's homes and returned to the office for regular auditing. The audits we checked confirmed medicines were being managed safely.

Preventing and controlling infection

- Staff received training in infection prevention and control (IPC) and their IPC practice and use of PPE was assessed during spot checks. People told us staff helped them keep their homes clean and wore personal protective equipment (PPE) when they visited. Relatives said staff always wore PPE during their visits to protect their family members from the risk of infection. One relative told us, "They were very good during the COVID crisis; they always wore their masks, gloves and aprons."

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 our last inspection under the previous provider we rated this key question good. 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 assessed before they used the agency to ensure staff had the appropriate skills to provide their care. Assessments considered areas including mobility, continence, skin integrity and personal care.
- The registered manager told us they encouraged people to express what outcomes they wanted from their care during assessments. The registered manager said, "When I do the assessment, one of the questions I ask is, 'What can we do to improve your life, what would you like to achieve from your care?' I always explain we are not here to take over, we are here to help in any way they need."
- Professionals told us the agency adapted people's care plans when necessary to ensure they reflected professional guidance. A professional said, "Apex Prime (Ashtead) adjust their care plans when they receive guidance from professionals from health or social care." Staff followed any guidance put in place by health and social care professionals. About people's care. A professional told us, "If I or district nurses or GPs give instruction, this is adhered to."

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 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.

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.

- Staff received training in the MCA and people told us staff sought their consent before providing their care. One person said, "They will always check with me before they do anything."
- The registered manager told us all the people using the service had capacity to make decisions about their care. The registered manager said they would seek input from the local authority if people lacked the

capacity to give consent and a mental capacity assessment was needed. None of the people using the service were subject to deprivations of their liberty.

Staff support: induction, training, skills and experience

- Staff had an induction when they joined the agency, which included mandatory training and shadowing colleagues to get to know people's needs. Refresher training was provided regularly to ensure staff kept up to date with best practice.
- Staff were required to complete the Care Certificate, 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.
- Staff told us the induction training and shadowing had prepared them well for their roles. One member of staff said, "I had an induction as well as shadowing with my senior care supervisor. It prepared me well and let me meet the service users I was going to be supporting prior to visiting them on my own, meaning that both myself and the service users were at ease." Another member of staff told us, "After being offered the job, I was put on three days of training, which I found very informative. I then worked four shifts shadowing other carers. I found the shadowing useful, as I was able to observe and ask questions."
- Staff had opportunities to discuss their roles and any support they needed at supervision with their line managers, which they said was useful. One member of staff told us, "Supervisions have been to observe me working and to discuss if there was anything I needed to be aware of or improve on. [Line manager] also asked me how I felt I was getting on and if I was happy and comfortable in my role and with the management team." Another member of staff said, "We discuss what is working well and if there is anything I can improve on, if I need extra help, to discuss any concerns and to discuss my personal development plan."

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

- Relatives told us staff monitored their family members' health and took action promptly if they became unwell. A relative who submitted feedback via our website said, "Any worries or concerns the carer has about health and/or well-being are reported on the spot." Another relative told us, "If [family member] is not well, one of the carers will ring the office and they will call me so I can get in touch with [family member's] GP."
- The registered manager told us staff were observant of any changes in people's needs and reported these to the office team. The registered manager said, "We always ask for feedback [from care staff] about any concerns. They are brilliant at letting us know if they have any concerns, or if they notice a change."
- Professionals confirmed staff were quick to highlight any concerns they had about people's health and welfare. A professional told us, "Apex Prime Care Ashted are quick to notify social care if they have any concerns and will contact medical professionals if they have any medical concerns about a service user." Another professional said, "I feel Apex Prime Care Ashted are particularly good at supporting clients' needs and pick up quickly if the needs of the clients have changed."

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

- People's needs in relation to nutrition and hydration were recorded during their initial assessments and detailed in their care plans. Where necessary, the agency involved specialist healthcare professionals to ensure people were supported to eat and drink safely. For example, the registered manager told us the agency had requested a speech and language therapy assessment for one person who had difficulties swallowing.
- People who received support with meals told us they were happy with this aspect of their care. Most people told us they had stocks of ready meals which staff prepared for them. They said staff prepared meals based on their choices and preferences.

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 our last inspection under the previous provider we rated this key question good. The rating for this key question has 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; respecting equality and diversity

- People told us they got on well with their care workers and enjoyed their company. A person who sent us feedback via our website commented, 'This company have fantastic staff and they are just like my extended family to me.' Another person who submitted a feedback form stated, 'The staff look after me extremely well and it's a pleasure to see them every time they come to look after me.'
- Relatives confirmed their family members had established positive relationships with the staff who supported them. A relative told us, "They are all very friendly and [family member] enjoys seeing his carers throughout the day." A relative who submitted a feedback form said, 'They are always willing to chat with [family member] and are so kind and caring. They are very much in tune with who she is and what she likes.'
- People told us they saw the same staff regularly, which they said was important to them. One person told us, "I see a little group, which I like; I would not want different people coming all the time. I know which one is coming because I get a rota. They are all very nice." Relatives confirmed their family members were supported by consistent staff. One relative said, "Because there is good continuity of care, the girls know [family member] and they know if something is not quite right."
- People said staff were willing to carry out additional tasks to help them when needed. One person told us, "They look after me very well. Anything I want, they will do it; it is never a problem." Another person said of staff, "I love them, they are good girls; nothing is too much trouble."

Supporting people to express their views and be involved in making decisions about their care; Respecting and promoting people's privacy, dignity and independence

- People told us staff respected their choices and decisions about their care. They said staff maintained their privacy and dignity when providing their care. One person said, "They are very polite and always helpful when I have any difficulties."
- Relatives and professionals confirmed staff treated people with respect. A relative who submitted a feedback form stated, "All the carers treat [family member] with respect." A professional told us, "The care workers are always respectful to the service users they provide care for."
- People and relatives spoke highly of the attitude and approach of staff. A relative who sent us feedback via our website said, "The care givers are considerate and thoughtful people who obviously love the job they are doing. This team truly do care for their clients." Another relative's feedback form stated, 'They are a really lovely bunch; they are so caring. I honestly feel if it wasn't for Apex caring for [family member], she wouldn't still be here.'
- The registered manager told us they agency only employed staff who demonstrated a caring and compassionate approach. The registered manager said, "We won't take someone on if they are not right for

the role. We are looking for a kind and caring nature. You have to employ the right sort of person. You do it to help people."

- Relatives told us staff supported their family members to be independent where this was important to them. One person told us, "[Family member] likes to do his own personal care, and I can hear them encouraging him to do that." Another relative said, "They encourage [family member] to do what he can for himself, but they will do anything he cannot do."
- The registered manager said staff understood the importance of supporting people to manage aspects of their own care where they could. The registered manager told us, "All the girls are encouraged to promote their independence; anything they can do for themselves, we promote that. We are there to help them, not to take over. They ask the client what they want help with."

Is the service responsive?

Our findings

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

At our last inspection under the previous provider we rated this key question good. The rating for this key question has remained good. This meant people's needs were met through good organisation and delivery.

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

- Each person had a care plan which was developed from their initial assessment. Care plans were person-centred and contained details for staff about how people preferred their care to be provided.
- People confirmed the care they received reflected their needs and preferences. Professionals told us the agency provided personalised care based on people's individual needs. One professional said, "Their approach is person-centred and they are responsive to each service user's personal requirements and needs."
- Staff told us they received the information they needed to understand people's individual needs and preferences about their care. They said the office team kept them updated about any changes in people's needs. One member of staff told us, "I am kept up to date with all clients' needs. We get a client profile, which gets updated regularly, and also get sent information if there has been issues with that client on recent care calls. For example, if a client has been unwell, we get informed so we can monitor this on our care visits." Another member of staff said, "Profiles and risk assessments are sent to us before we attend a client. Risk assessments are updated if needs change."
- People and relatives told us the agency did their best to provide a flexible service were responsive to any requests for changes. A relative who submitted feedback via our website said, 'They do their best to accommodate with ad hoc amendments to [family member's] care schedule, e.g. if a hospital appointment clashes with care times.'

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.

- People's communication needs were recorded during their initial assessments and any needs identified were documented in their care plans. One person using the service had a hearing impairment and was supported by the Royal Association for Deaf People (RAD) to express their needs and wishes. The agency had worked collaboratively with RAD to ensure the person received the support they needed. The registered manager told us, "We have a communication book for [the person], which was done with RAD, and they provided an interpreter for reviews. If [the person] has an appointment, she needs an interpreter so we will tell RAD and they will provide one."

End of life care and support

- The agency was not providing end of life care at the time of our inspection but had done so in the past.

The registered manager told us staff had access to end of life care training and had previously worked with the local hospice, district nurses and community matrons in the provision of end of life care.

Improving care quality in response to complaints or concerns

- The provider had a complaints procedure which set out how any complaints received would be managed. This was given to people when they began to use the service. The agency had received no complaints since its registration under the current provider.
- People and relatives told us the agency had responded well if they had raised informal concerns. One person said, "If I have ever had a problem, I go to [member of staff] and she says she will sort it, and she does. She is the senior." A relative told us, "If ever I have any concerns or specific requests, the office staff always deal with them promptly and communicate what has been done and when."

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 under the previous provider we rated this key question good. The rating for 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; Continuous learning and improving care

- People who used the service and their relatives told us communication from the office team was good. Relatives said the office team contacted them if there were any changes to their family member's needs. One relative told us, "Their communication is very good; they will always ring me if they are concerned about anything." A relative who submitted feedback via our website said, 'The office always contact me if any concerns have been raised by the carers and are very helpful whenever I need to contact them.'
- Staff told us they were able to speak up about any concerns or suggestions they had and said the management/office team were responsive to their feedback. One member of staff told us, "We are always encouraged to speak up and our opinions are always taken seriously. They are always open to suggestions to do things better." Another member of staff said, "Suggestions are always taken on board and I trust things will be acted on."

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

- Professionals told us the service was managed well. One professional said, "I have always found the service to be well managed and the manager has a good oversight of the day to day running of the service." Another professional told us, "Management and all staff members that I communicate with at Apex are competent in running the care agency."
- The registered manager was appropriately qualified for their role, having completed the level 5 diploma in health and social care in 2021. The registered manager told us they had access to support from their peers and the provider's regional manager. The registered manager said, "It is good to talk to the other branch managers; it is like a support bubble. If I am not sure about something, I will phone them."
- There were systems in place to monitor the quality and safety of the service, including audits of key areas of the service and spot checks to observe the care people received. The registered manager understood their responsibilities under the duty of candour and the requirement to act in an open and transparent way when concerns were raised. When discussing the duty of candour, the registered manager told us, "We have to be open and honest. If we have made a mistake, we have to hold our hands up. I would tell the family, the local authority and CQC. It also about what can we do to make sure it does not happen again." When necessary, notifications of significant events had been submitted to CQC and the local authority.

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

characteristics

- People had opportunities to give feedback about their care and said their views were listened to and acted upon. Relatives told us their views about their family members' care were encouraged and taken on board.
- Staff said they received good support from their managers and that they worked well as a team. They told us their managers were available for support and advice when they needed this. One member of staff told us, "They are brilliant at supporting and valuing their carers, and although the role is lone work, I feel very much part of a team." Another member of staff said, "I have been well supported by the management team, and in particular the senior carer. I feel she has always been a huge support to me and provided me with advice and guidance when needed. I feel comfortable contacting any of the management team with any questions I have."

Working in partnership with others

- The agency had established effective working relationships with other agencies and professionals involved in people's care. For example, the service had worked with healthcare professionals and local authorities that commissioned care to ensure people's needs were met.
- We received positive feedback from professionals about the way in which the agency worked with them and the quality of care people received. One professional told us, "Apex are very good at communication. If there is a change in care need, they will contact us to discuss, whereby we will carry out an assessment or review of the individual's care needs." Another professional said, "Apex Prime Care Ashted is very good at communicating with adult social care, both when they have concerns or to give positive feedback when care is working well."