

Allied Health-Services Limited

# Allied Health-Services Durham

## Inspection report

Humber House Unit 7  
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Durham  
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Tel: 01913864975

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15 January 2020  
29 January 2020

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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

Allied Health-Services Durham is a domiciliary care service providing personal care to people in their own homes. 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 the service was providing personal care to 25 people.

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

People told us they received a good service and felt safe with the support they received from staff. Accidents and incidents were recorded and investigated. Risk assessments were in place. The registered manager and staff understood their responsibilities about safeguarding. Arrangements were in place to protect people from the risks associated with the management of medicines and the spread of infection.

Effective recruitment procedures were in place and there were enough staff employed to meet people's needs. Staff received appropriate training and supervision to provide care in a person-centred way.

People's care and support plans were detailed, regularly reviewed and updated. People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible. The policies and systems in the service supported this practice.

Staff had developed caring relationships with people they supported. People were supported to take part in decisions about their care and treatment. Their views were listened to. Staff respected people's independence, privacy and dignity. People and their relatives were aware of the provider's complaints procedure and felt confident to raise concerns.

The service was managed by a registered manager who had a clear vision about the quality of care they wanted to provide. There was an effective quality assurance system in place to monitor the quality and safety of the service. There was a focus on continuous improvement.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

### Rating at last inspection

This is the first inspection of this service which registered with CQC on 18 January 2019.

### Why we inspected

This was a planned inspection based on the date the service first registered with CQC.

### Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-

inspection programme. If we receive any concerning information we may inspect sooner.

## The five questions we ask about services and what we found

We always ask the following five questions of services.

### Is the service safe?

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.

# Allied Health-Services Durham

## **Detailed findings**

### Background to this inspection

#### The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection checked whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide 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 experience of using or caring for someone who uses this type of care service.

#### Service and service type

Allied Health-Services Durham is a domiciliary care service. It provides personal care to people living in their own homes.

The service had a manager registered with the Care Quality Commission (CQC). They and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

#### Notice of inspection

We gave the service 24 hours' notice of the inspection. This was because it is a small service and we needed to be sure the provider or registered manager would be in the office to support the inspection.

Inspection activity started on 15 January 2020 and ended on 29 January 2020. We spoke with people and relatives on the telephone on 15 January 2020 and visited the office location on 29 January 2020.

#### What we did before inspection

We reviewed information we held about the service and the provider, for example, statutory notifications

and complaints.

We contacted professionals involved in caring for people who used the service, including commissioners and social workers. We contacted the local Healthwatch. Healthwatch is the local consumer champion for health and social care services. They give consumers a voice by collecting their views, concerns and compliments through their engagement work. Information provided by these professionals was used to inform the inspection.

The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report.

During the inspection

We spoke with three people who used the service and eight relatives. We spoke with the registered manager, regional director, head of complex needs, care co-ordinator and administrator.

We reviewed a range of records. This included three people's care records. We looked at the personnel files for three staff and records related to the management of the service.

After the inspection

We received written feedback from five staff members and one health care professional. We sought clarification from the registered manager to validate evidence found.

# Is the service safe?

## Our findings

Safe – this means people were protected from abuse and avoidable harm.

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

Systems and processes to safeguard people from the risk of abuse

- The provider had effective safeguarding systems in place. Staff were well trained and knowledgeable about potential abuse. They knew how to safeguard people.
- People told us they felt safe. One person told us, "I feel 100% safe with the carers."

Assessing risk, safety monitoring and management

- There were effective risk management systems in place. People's care plans included risk assessments about individual care needs. Control measures to minimise the risks identified were clearly set out for staff to refer to.
- Assessments of specific risks within people's homes had been completed and staff were provided with guidance on how to manage these risks.
- The provider had a business continuity plan in place to cover emergency situations, so people would continue to receive safe and effective care.

Staffing and recruitment

- The provider had effective recruitment procedures in place. Pre-employment checks and risks assessments ensured only suitable staff were employed. The registered manager told us some people who used the service joined in the interview process.
- Rota planning was well managed. There were enough staff employed to meet people's needs. People and their relatives told us staff arrived on time and did not rush them. One relative said, "They [staff] are always on time and they never miss a visit."
- Effective out of hours arrangements were in place and staff worked well to cover unexpected absences as a team. One staff member told us "On call is 100% effective."

Using medicines safely

- Medicines were managed safely and audits were completed regularly.
- Staff were knowledgeable about people's medicines and were suitably trained.
- People were happy with the support they received to take their medicines. One relative said, "We have never had any issues with medication."

Preventing and controlling infection

- People were protected from the risk of infection.
- Staff were suitably trained and followed good infection control practices. Staff used personal protective equipment to help prevent the spread of healthcare related infections.

### Learning lessons when things go wrong

- Accidents and incidents were appropriately recorded and reviewed to identify any lessons that could be learned.



# Is the service effective?

## Our findings

Effective – this means 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 was 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

- Staff carried out comprehensive assessments of people's needs before they started using the service. Assessments were continually evaluated and reviewed to ensure people received the care that met their changing needs.

Staff support: induction, training, skills and experience

- Staff were well supported and received the training they needed. One member of staff said, "I have been happy with the level of training given to me. I have received regular supervision which I have found valuable. All staff who work with the customer I support are well trained with the necessary skills needed to care effectively for them and are very supportive of each other." One health care professional told us, "The staff are well trained and have excellent support from the lead nurse and branch nurse."
- People and their relatives were confident the staff had the right skills to provide the care and support they needed. One person told us, "They [staff] are well trained, they are always going on courses and doing e-learning." One relative said, "The carers are very competent."

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.

- The registered manager and staff had a good understanding of the MCA.
- People confirmed staff sought their consent before providing personal care.

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

- Staff supported people with their dietary and nutritional needs. Care plans detailed people's needs, preferences and how staff were to support them. One relative told us, "They [staff] can get [Name] to eat and drink, which is always tricky, so that is the main thing."

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

- Staff worked well with external health and social care professionals.
  - Records showed referrals were appropriately made to health care services when people's needs changed.
- One health care professional told us, "Since [Registered Manager] commenced in the service the communication, professionalism and overall service has improved. Staff regularly contact our teams. I have no concerns with this service. They fulfil the shifts commissioned."

# Is the service caring?

## Our findings

Caring – this means 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 was 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

- Staff spent time to get to know people and used this knowledge to care for them in the way they liked. One relative told us, "We have a consistent team of ten carers. It's very good because they [staff] all know [Name]'s needs and all bring a different quality to their life."
- People and relatives were complimentary about the care provided. One relative told us, "They [staff] are like an extended family. They always think about [Name]. If they go on holiday, they send them post cards and sometimes bring them back a small present, like a key ring. They send birthday cards and things like that."
- Staff understood the importance of treating people as individuals with rights. They were aware of equality and diversity issues and recognised each person was unique with their own lifestyle and needs.

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

- People were empowered to make choices and have as much control in the delivery of their care, as possible. One person told us, "I can't fault my carers. They treat me with respect." One relative said, "The support workers treat [Name] as a person."
- Staff involved people and their relatives in day to day discussions about their care. They directed people and their relatives to sources of advice, support or advocacy. One relative told us, "They give my husband and I the chance to have a life."

Respecting and promoting people's privacy, dignity and independence

- People's right to privacy and confidentiality was respected. Staff promoted people's independence, without compromising safety. One relative told us, "The staff we have are so respectful and they promote [Name]'s independence."
- Staff treated people with dignity and provided compassionate support in an individualised way. One relative said, "The service is very compassionate and they respond to [Name]'s individual needs. It is very reassuring."

# Is the service responsive?

## Our findings

Responsive – this means that services met people's needs.

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

- Care plans were person-centred and regularly reviewed. They contained detailed information about people's daily routines and specific care and support needs. One professional told us, "The care plans are updated regularly."
- Staff knew people's preferences well and were responsive to their changing needs.

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

- Staff supported people to participate in activities which were meaningful to them. One relative told us, "They take [Name] out every day to walk about the village. [Name] has a free bus pass and they take them out on the bus, when the weather is good."

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.

- Care plans contained detailed information about people's communication needs. People could be provided with information in different formats if required. One relative told us, "They [staff] are brilliant. They are a great bunch of carers. [Name] is happy with the carers. They always ask them what they want, [Name] can communicate with the computer and by eye movements."
- Where people were unable to express their needs and choices, staff understood their way of communicating. One relative told us, "[Name] has lovely carers, [Name] can't talk but they make eye contact with them to judge their mood." Another relative said, "[Name] has bonded with the carers, [Name] cuddles them and reacts in their own way with them."

Improving care quality in response to complaints or concerns

- The provider had a complaints policy in place to ensure complaints were acknowledged, investigated and responded to.
- People and relatives knew how to make a complaint should they need to. They were confident if they had any concerns they would be addressed promptly.

End of life care and support

- People received personalised end of life care and support. The registered manager described how people

were supported to make decisions about their end of life preferences.

- Staff received training and were aware of good practice in end of life care. Professionals were involved, as appropriate, to ensure people were comfortable and pain free.

# Is the service well-led?

## Our findings

Well-Led – this means 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 was rated good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- The registered manager and staff clearly understood their roles and responsibilities to ensure people received the care they needed. They were proactive in submitting the required notifications to CQC following significant events at the service, such as accidents and incidents.
- People and their relatives were complimentary about the registered manager. Comments included, "I speak regularly with the manager. The manager often rings me to see if things are going alright. The manager is always there, making sure everything is as it should be."

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- People were central to the culture of the service.
- The registered manager effectively supported the delivery of person-centred care.
- Staff worked well as a team to deliver high quality care. One staff member said, "I am very happy to represent Allied as I know the company's core values are to care for and protect its clients."

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

- The provider and registered manager positively encouraged feedback about the service.
- People and their relatives were regularly given opportunities to comment on the care provided. This included formal reviews and surveys as well as informal feedback. They were kept up-to-date with information about the service through a quarterly newsletter.
- Staff received informative monthly newsletters and attended regular staff meetings where they had opportunities to discuss their views. Staff told us they felt listened to and the registered manager was approachable and supportive. One staff member said, "We are more informed and work life balance is so much better."

Continuous learning and improving care

- The provider had an effective quality assurance system which successfully identified areas for improvement and lessons learned. This included quality audits and safety checks.
- The registered manager completed regular 'spot checks' to monitor the quality of the service delivered by staff.

#### Working in partnership with others

- The provider worked with local commissioners and key organisations to promote good outcomes for people. One health care professional told us, "The staff provide a safe, effective and responsive service which is well led to a high standard by [Registered Manager] and her team."