

Alina Homecare Ltd

Alina Homecare Devizes

Inspection report

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Alina Homecare Devizes is a domiciliary care agency providing personal care to people living in their own homes. At the time of the inspection the service was supporting 21 people.

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

People's medicines were managed safely. Systems were in place to make sure staff had guidance for 'as required' medicines. The provider used an electronic medicines management system which enabled office staff to receive an alert when a medicine was not administered. Action could be taken immediately to make sure people had their medicines on time.

At our last inspection we found quality monitoring had not identified some shortfalls with clinical training for staff. At this inspection we found improvement had been made. Staff working with people with specific clinical needs had received the training they needed and been assessed for competence.

Quality monitoring systems were in place at the branch level and at a higher provider level. Office staff carried out various checks to make sure staff were working to the provider's standards. This included unannounced checks in people's homes and telephone calls to people and their relatives.

Risk management plans were in place to give staff personalised guidance on how best to support people safely. Plans had been reviewed and updated when needed. Incidents and accidents were recorded and reviewed by the management to make sure any action needed was taken. The provider also had oversight of incidents to help with identifying any patterns or trends.

People were supported by enough staff. Some comments about staffing demonstrated some people felt there was a shortage of staff. The registered manager told us they had enough staff for current packages but were in the process of recruiting more staff. They told us they would like to meet the local demand for care at home but were not able to take on any new people at this time. There had been no missed visits and people and relatives told us they felt the service was safe.

Staff had been recruited safely and provided with training and support for their roles. Staff told us they felt well supported by the provider and there was good teamwork. Staff could attend meetings and visit the office when they needed to. The provider had a range of staff rewards on offer including 'carer of the month' and financial bonuses.

People were able to share their views regularly. The provider carried out quality calls via the telephone and

an annual survey. Results from 2021 demonstrated that across the provider's services people were happy with their care worker. Audits were completed regularly, and the branch had a twice-yearly full audit carried out by the provider's quality team.

Overall comments about the management of the service were positive. People, relatives and staff said the management were approachable and would deal with any of their issues. Some people and relatives preferred to communicate with the deputy manager as they appreciated her depth of knowledge for their particular care situations and commented positively on her timely responses.

Staff had access to personal protective equipment (PPE) and received training and guidance on working safely during COVID-19. Staff were testing for COVID-19 following the current government guidance. People told us staff wore their PPE when needed and kept their homes clean during their visits.

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

The last rating for this service was requires improvement (published 13 March 2020). 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.

At our last inspection we recommended that the provider considered best practice about management of 'as required' medicines. At this inspection we found the provider had acted on the recommendation and made the improvement required.

Why we inspected

We carried out an announced comprehensive inspection of this service on 14 January 2020. 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 good governance.

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. This is based on the findings at this inspection.

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

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?

Good ●

The service is well-led.

Details are in our well-led findings below.

Alina Homecare Devizes

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 carried out by two 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 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

This inspection was announced. We gave the service 48 hours' notice of the inspection. This was because we needed to be sure that the provider or registered manager would be in the office to support the inspection.

Inspection activity started on 31 May 2022 and ended on 20 June 2022. We visited the location's office on 31 May 2022 and 8 June 2022.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We used information

gathered as part of the monitoring activity that took place on 9 February 2022 to help plan the inspection and inform our judgements. 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 four people and seven relatives about their experiences of using this service. We spoke with eight members of staff, the registered manager and head of quality and assurance.

We looked at care and support records including medicines records for nine people. We also reviewed records for compliments, complaints, accidents and incidents, staff recruitment files for four member of staff, quality monitoring, staff meeting minutes, newsletters for people and relatives. Various records for the management of the service were reviewed including policies and procedures.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At 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.

Using medicines safely

- At our last inspection, we made a recommendation about medicines management. We recommended the provider considered best practice for the recording and managing of people's 'as required' medicines.
- When people had 'as required' medicines prescribed there was guidance for staff on how to give this type of medicine. During our inspection the electronic system was updated to further improve records for 'as required' medicines. The registered manager told us all 'as required' medicines were reviewed so that the update could be implemented for everyone.
- Since the last inspection the provider had moved medicines recording onto an electronic system. This had improved record keeping and oversight of people's medicines. One relative said, "They [staff] do give [relative's] medication on time and when it is needed, and they record what they have given and when. Any creams they need to use are always applied appropriately and should [relative] require pain relief then information on exactly what they give and at what times are on their [electronic system]."
- Staff had training on medicines administration and their competence checked. Systems were in place to make sure people had their medicines as prescribed.

Systems and processes to safeguard people from the risk of abuse

- People and relatives told us they felt the service was safe. Comment included, "So far I do feel my [relative] is safe with the carers and we have no problems to date", "I have no qualms about my safety with the carers who come to me. They know I have to use a walker and ensure I have it to hand all the time" and "I do think my [relative] is safe with the carers whilst they are with [relative] and they ensure all is safe on leaving."
- Staff received training on safeguarding and told us they would not hesitate to report any concerns to the management. They were confident the management would appropriately deal with any concern raised.

Assessing risk, safety monitoring and management

- Risks to people's safety had been assessed. This including assessments of people's internal and external environments. Management plans were in place and reviewed regularly.
- People had risk assessments in place where needed for a range of areas including skin care, choking and moving and handling.
- People with more complex clinical needs had their care packages reviewed by clinical staff employed by the provider. They provided training and support for the staff and monitored people's outcomes.

Staffing and recruitment

- Staff had been recruited safely. All pre-employment checks had been carried out including a check with the disclosure and barring service.

- People had sufficient staff to support them safely. People and relatives told us they had a continuity of staff visit them and at times they saw new staff shadowing their experienced staff.
- Comments from people and relatives included, "[relative] mostly gets the same carers occasionally someone new. Usually the new one has shadowed one of the experienced ones first. They are on the whole punctual and so far have never been really late" and "[relative] does have carers [relative] knows any new ones always shadow first so familiar when they come on their own and [relative] is not then faced with a stranger. Whilst timing varies, they [staff] always call if they are going to be very late."
- Some people felt the service was short of staff which they had raised with the registered manager. One relative said, "We have new carers coming consistently on trial and then leave, I know they are short of staff."
- The registered manager told us they had enough staff for the care packages commissioned and there had been no missed visits. There was an office team of staff who could cover visits if needed. The registered manager said they were recruiting more staff and had recently appointed new care workers.

Preventing and controlling infection

- Staff had been trained in infection, prevention and control good practice. They had stocks of personal protective equipment (PPE) available and had been shown how to use this safely. One relative told us, "They [staff] always wear masks, aprons and gloves. They wash their hands on arrival and leave the bathroom clean and tidy. They [staff] always appear clean and well presented."
- Staff were testing regularly for COVID-19 and systems were in place to manage any positive test results. The service knew where to go for additional advice and guidance on COVID-19.

Learning lessons when things go wrong

- Incident and accidents were reviewed, and any lessons learned shared with staff. The provider had good oversight of all incidents and made sure all possible actions had been carried out before closing any records.
- The head of quality and assurance told us the senior management regularly reviewed incidents across the organisation to identify any wider trends. All relevant information was cascaded down to staff through provider systems.

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 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

At our last inspection the provider had failed to have effective systems in place to monitor the clinical skills of staff which placed people at risk of harm. This was a breach of regulation 17 (Good governance) 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 17.

- At our last inspection we found the provider systems for monitoring clinical competencies for staff had not been effective. This meant records were not available to demonstrate staff had been trained to carry out some clinical activities.
- Since that inspection new systems had been put in place and records clearly demonstrated staff had received training and been assessed for their competence.
- A member of staff with clinical training had responsibility for keeping good records for clinical competence and carried out assessments for the staff when needed.
- There was a staffing structure in place which staff were aware of. Staff knew who to go to for any support or to raise a concern.
- Notifications had been submitted to CQC as required by law.

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

- People were happy with the care they received. Comments included, "The carers are well trained to look after my [relative] and I cannot think of anything that requires improvement" and "My carers do understand their responsibilities and carry out their role really well."
- Staff told us they enjoyed their jobs and found working with people rewarding. Comments included, "I do actually enjoy it and I like working with people. They [people] like having someone around to talk to" and "I love it, I love the fact I am involved with lots of different people, feeling like I am helping them stay at home, I love working in the community rather than residential, different people all day long. You can build a nice relationship with them."
- Comments about the overall management of the service were positive. Comments from people and relatives included, "I have never had to make a complaint but I am sure that if I had any issues they would sort it out to my satisfaction" and "Both the manager and the deputy are approachable. I have no

complaints regarding my [relative's] care and am extremely positive with the service given."

- Some people and relatives preferred to communicate with the deputy manager. We were told the deputy responded in a timely way and were easy to get hold of. We shared the feedback we received with the provider.

- All the staff we spoke with told us the management of the service was good and they felt valued.

Comments included, "I feel like we are really good team, we are all on the same level, we are respected and treated well, always supported. If there is a query, they [management] always respond" and "They [office staff] are all friendly and organised. If I have any problems, I can speak with them."

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

- People were able to share their views through various quality assurance activities. Office staff regularly telephoned people to check they were happy with their care and the provider carried out annual surveys.

- The registered manager gave us examples of how people's feedback made changes to the service. They told us where people shared feedback about staff they did not get along with, changes were made so they were happy with their staff. Also, people had been involved in developing training for the staff.

- Staff had meetings and told us they felt able to share any ideas for improvements. One member of staff said, "There is always opportunity to send quick messages before meetings to discuss any ideas for improvement, or I can raise a concern if needed."

- There were various rewards and schemes in place to reward staff and thank them for their hard work. For example, there was a carer of the month scheme, a financial incentive for recruiting a friend scheme and staff had been provided bonuses. One member of staff told us, "I feel really supported by Alina, I feel very supported, I want to stay with them. They have done well; we have all pulled together."

Continuous learning and improving care

- Quality monitoring was in place and various audits were carried out on a regular basis. This included monitoring at service level and at provider level.

- The registered manager told us there was a commitment to continually developing the service and they were always trying to help people achieve good outcomes.

Working in partnership with others

- Staff worked with a range of professionals to make sure people's health needs were met. The registered manager showed us many compliments they had received from professionals about the staff and their work.