

Artius Care Ltd Artius Care Ltd

Inspection report

The Bull Pen Manor Farm Barns Chichester West Sussex PO20 7PL Date of inspection visit: 23 April 2021

Good

Date of publication: 11 May 2021

Tel: 01243533605 Website: www.artiuscare.com

Ratings

Overall rating for this service

Summary of findings

Overall summary

About the service

Artius Care Limited is a domiciliary care agency providing personal care to adults living with families or in their own homes in the community. 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 our inspection the service was supporting 47 people living with frailty and other health related conditions, with the regulated activity of personal care.

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

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.

People were encouraged to make decisions about the care they received and were treated with dignity and respect by compassionate caring staff.

Care was delivered by staff who were trained and understood their roles and responsibilities. The registered manager and senior staff carried out spot checks on staff to monitor the quality of the service provided and to seek people's views. People, relatives and staff were encouraged to offer feedback. Staff felt well supported and people were confident in the service they received.

Quality assurance systems and practice identified potential issues, enabling prompt actions to be taken.

People were supported to access health care in a timely way and guidance for staff was available in care plans for known health conditions.

People who needed it were supported to eat and drink enough and their preferences were respected.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk Rating at last inspection The last rating for this service was requires improvement (published 17 October 2019).

Why we inspected

We undertook this focused inspection to follow up on the two key questions which were judged requires improvement from the previous report. This report only covers our findings in relation to those Key Questions, Effective and Well-led. The ratings from the previous comprehensive inspection for the key questions not looked at on this occasion were used in calculating the overall rating at this inspection. The overall rating for the service is now 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 Artius Care Ltd on our website at www.cqc.org.uk.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our reinspection 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 effective?	Good •
The service was effective. Details are in our effective findings below.	
Is the service well-led?	Good



Artius Care 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 Care Act 2014.

Inspection team This inspection was carried out by two inspectors.

Service and service type

This service is a domiciliary care agency. It provides personal care to people living in their own houses and flats.

The service had a manager registered with the Care Quality Commission. 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.

Notice of inspection

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 23 April 2021 and ended on 29 April 2021. We visited the office location on 23 April 2021.

What we did before the inspection

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

This information helps support our inspections. We used all of this information to plan our inspection.

During the inspection

We spoke with two people who used the service and two relatives about their experience of the care provided. We spoke with six members of staff including the registered manager, care coordinator, senior care worker, care workers and the nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

We reviewed a range of records. This included three people's care records. A variety of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at training data and quality assurance records. We spoke with one professional who regularly visits the service.

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 the last inspection this key question was rated as Requires improvement. At this inspection this key question has now improved to 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 support: induction, training, skills and experience

- People's needs were assessed prior to receiving the service and regularly afterwards. This meant their preferences were known by staff. This involved meeting with the person and if appropriate, their relatives.
- •The service had policies and procedures to support the principles of equality and human rights Consideration was given to protected characteristics including sexual orientation and religion or belief. Records showed the registered manager's assessment had suitably considered any additional provision that might need to be made to ensure people did not experience discrimination. For Example, a person whose first language was not English, had guidance in care plans for staff about how to communicate effectively with the person. Another example, staff had clear guidance in care plans about specific support required for a person to practice their religion.
- Staff undertook training that the provider considered essential. The registered manager monitored this to ensure staff's knowledge and skills were up to date, enabling them to provide effective care. Staff received training in specific conditions such Catheter care, dementia and had recently started diabetes care. Staff received on-going refresher training to keep their knowledge and skills up to date. The registered manager used a training system that allowed both staff and management to receive alert messages when refresher training became due.
- Staff spoke knowledgably about the needs of the people they support and confirmed the training and learning they had undertaken to gain the knowledge. One staff told us, "If a person is coming to us with a new condition, they put training on for us."

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

- People were supported to maintain a balanced diet. Staff were aware of people's individual dietary needs, their likes and dislikes and this was reflected in people's care plans.
- Staff used professional guidance to safely support people's nutritional needs.

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

•People had access to healthcare professionals and the service worked in collaboration to ensure their needs were met. Staff monitored people and identified any changes in their health. Records confirmed people had been supported to meet with a variety of healthcare professionals including the GP, psychologist and mental health team.

• A person told us, "I was unwell when the carer came, he phoned the ambulance and stayed with me until it came, he showed real concern and it was genuine." A relative said, "Once medication did not arrive and the care staff went to the pharmacy to pick it up themselves."

Ensuring consent to care and treatment in line with law and guidance

At our last inspection we recommended the provider seek further guidance on the MCA from a reputable source to improve staff practice and knowledge. The provider had made improvements.

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 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.

• All Staff had received training around MCA, this was refreshed annually. Staff were clear about how the principles of the MCA applied to their day to day work. For example, one staff member said, "I always ask the person's permission before I do anything. I always assume the person has capacity to make the decision." Another staff told us, "I always ask first, if I had concerns that a person's capacity was changing, I would contact my manager."

• People told us they were asked for their consent. One person said, "They come and if they see anything needs doing, they always ask, they are very good, they offer lots of choices, nothing is too much of a bother." A relative told us, "They arrive and sit down to discuss what (name) wishes for the night. I hear them ask (name) permission before they do anything."

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 the last inspection this key question was rated as Requires Improvement. At this inspection this key question has now improved to 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

- People and staff were able to share ideas or concerns with the management. Staff understood their responsibilities and told us that they were listened to and valued. One staff member told us. "Artius is a lovely company to work for."
- The culture was open and inclusive. One relative said, "We have phone call questionnaires and reviews with care staff. I would call up if (name) needed anything." A staff member said, "I can talk to the registered manager, a hundred percent comfortable and we talk a lot, they are very supportive."

• There were systems and processes to monitor and analyse accidents and incidents and analysis was used to identify key issues and mitigate the risk. For example, a person had incidents that reflected a change of need, the registered manager spoke with them and arranged a change of carer so the person could have same gender personal care on afternoon visits. The registered manager told us that staff phone in if there is an incident or change so immediate action can be taken, then they record on the electronic care monitoring system which is checked weekly. There were effective systems and processes for quality monitoring and auditing and ensuring good governance of the service.

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

• The registered manager had a clear vision for the service to deliver support which focused on choice and promoting independence.

• Roles and responsibilities were clearly defined and understood. The registered manager was supported by the nominated individual. Staff were actively involved in people's care planning, this meant care was planned with the involvement of staff that knew people well. Staff had regular one to one supervision that covered topics such as their well-being, needs and wishes of the people they support and they were asked what the company could do better or differently. Team meetings were held and staff were kept up to date with change. During the Covid-19 pandemic video conferencing technology was used to hold these meetings.

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 understood their responsibility to notify us of significant events, as they are required to by law. Notifications had been sent to us in a timely manner and were completed in line with requirements.

The registered manager understood their responsibility to notify local authority safeguarding of concerns. Records showed that this had happened appropriately and in line with safeguarding guidance.

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

•People's views were sought of the care they received. Feedback was also sought from relatives, professionals and staff. The management team analysed the feedback and incorporated this into the daily running of the service.

• People and relatives expressed satisfaction with the engagement they had with the registered manager and the staff.

Continuous learning and improving care

• The nominated individual spoke about lessons they had learnt. This included how they had reviewed the skills and qualities they looked for in management and senior staff when recruiting. This led to a change in approach and the nominated individual felt this had worked well in developing a team of senior carers who had greater responsibilities delegated to them, enabling them to better identify and address the small issues. They felt that communication in the team had improved. Staff confirmed the changes had been positive.

Working in partnership with others

• The registered manager worked professionally with outside agencies. The management team were open to new ideas and had formed good partnership working and relationships. For example, when a person was to receive a visit from a health professional, the care staff visit time was adjusted so they could be with the person to support them with the health professionals visit.

• The registered manager demonstrated they were working with health professionals to where possible reduce the frequency of hospital admissions.

• One health professional told us, "They are excellent at letting us know any concerns. One patient has care from Artius 4 days a week and the patient and family are extremely happy with their care. They will meet us at times if we require help with patients."