

Alpha Care and Support Services Limited

Ealing, London

Inspection report

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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

The inspection took place on 10 October 2017. The provider was given 48 hours' notice because the location provides a domiciliary care service and we needed to make sure someone would be available.

The last inspection took place on 3 November 2016 when we rated the service Requires Improvement in the key questions of Safe, Effective, Responsive, Well-Led and overall. At this inspection we found that improvements had been made in all areas.

Ealing, London is a domiciliary care service registered to provide personal care to people living in their own homes. It is the only branch of Alpha Care and Support Services Limited, a privately run organisation. At the time of the inspection there were two people using the service. They were adults with a learning disability who lived in supported living services managed by another provider. The staff from Alpha Care and Support Services Limited supported the people with personal care and worked alongside staff employed by the provider who ran the supported living services.

Alpha Care and Support Services Limited did not have any other registered services, but also ran a business supplying care staff to registered nursing and care homes from the same address. This other service does not require registration with the Care Quality Commission.

There was a registered manager in post. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act and associated Regulations about how the service is run.

People's needs were being met by staff who were appropriately trained, supported and supervised. Representatives for the people said that they were happy with the service.

People were being safely cared for. The risks to their wellbeing had been assessed and there was information for the staff on how to keep them safe. The provider had appropriate procedures around safeguarding people from abuse. There were enough staff to meet people's needs and they had been recruited in a way to ensure they were suitable. The staff arrived on time and stayed for the agreed amount of time to support people.

The staff were well supported and had the information they needed to care for people. They took part in regular training which was relevant to their role.

The provider was acting within the principles of the Mental Capacity Act 2005.

The staff were kind, caring and had good relationships with people.

People's care needs were recorded in plans and the staff followed these. There were records to show how care had been provided and these reflected the care plans.

There was an appropriate complaints procedure.

The provider had systems for monitoring the quality of the service and making sure improvements were made where needed.

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.

The risks to people's wellbeing had been assessed and planned for.

There were procedures to keep people safe and protect them from the risk of abuse.

There were enough staff to support people and meet their needs.

The procedures for recruiting staff were designed to make sure only suitable staff were employed.

Is the service effective?

Good ●

The service was effective.

The provider was acting within the principles of the Mental Capacity Act 2005 and people gave their consent to the care provided.

The staff were appropriately trained, supported and supervised.

Is the service caring?

Good ●

The service was caring.

People had good relationships with the staff who were caring for them.

The staff respected people's privacy and dignity.

Is the service responsive?

Good ●

The service was responsive.

People's needs were being met. Care had been planned in a way to meet these needs and reflect people's preferences.

There was an appropriate complaints procedure and people knew who to speak with if they had any concerns.

Is the service well-led?

Good ●

The service was well-led.

There was a positive and open culture at the service where stakeholders and staff felt able to approach the provider and talk about their experiences.

There were systems for auditing the quality of the service and making improvements.

Ealing, London

Detailed findings

Background to this 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.

The inspection took place on 10 October 2017. The provider was given 48 hours' notice because the location provides a domiciliary care service and we needed to make sure someone would be available.

This was a comprehensive inspection carried out by one inspector.

Before the inspection we looked at the information we had on the provider. This included their last inspection report and communication with the provider since then. We looked at the provider's website.

People who used the service had complex needs and were not able to tell us about their experiences. So we spoke with a representative for the two people who used the service and asked them for their feedback. We spoke with one of the two care workers who worked for the service to ask them about their experiences.

During the inspection we met with the managing director. We viewed the care records for both people and the records for both members of staff, which included their recruitment records and information about training and support.

Is the service safe?

Our findings

The professional involved in coordinating the care for both of the people who used the service told us that the people trusted the care workers. They told us that they felt confident in the way care was provided and felt that the care workers upheld people's rights and cared for them safely.

At the inspection of 3 November 2016 we found that the risks to the health and safety of people who received treatment had not been assessed and there was no information about how to manage these risks.

At the inspection of 10 October 2017 we found that improvements had been made. The provider had recorded the risks associated with caring for people, which included risks associated with their physical and mental health. The documents included information on how to support people to minimise these risks and referred to guidance which was held at people's homes and which the staff could access for further information.

At the inspection of 3 November 2016 we found that the systems for administering medicines were not safe.

At the inspection of 10 October 2017 we found that the two people who used the service were not receiving support with their medicines from the service. The staff had received training about managing medicines so were ready if people required this support in the future.

The provider had procedures for safeguarding people and protecting them from abuse. There was evidence that these had been shared with the staff and that the staff had been trained in this area. The managing director demonstrated an understanding of safeguarding procedures and told us what they would do if there was a safeguarding alert, although there had not been any since the service started operating.

The provider's systems for recruiting staff ensured that they were suitable. They undertook checks on their identity, employment history, references from previous employers, eligibility to work in the UK and the Disclosure and Barring Service checks which highlighted any criminal records. We saw evidence of these checks in both staff files.

There were enough staff employed to meet people's needs. There were two people using the service and two members of staff supported them on a rotational basis. The professional representative for both people told us that the staff always arrived on time and stayed for the agreed length of time.

Is the service effective?

Our findings

People who lack mental capacity to consent to arrangements for necessary care or treatment can only be deprived of their liberty when this is in their best interests and legally authorised under the Mental Capacity Act 2005 (MCA).

At the inspection of 3 November 2016 we found that people's capacity to make decisions about their care had not been assessed or recorded and there was no evidence that they had consented to their care and treatment. The provider and staff did not understand their responsibilities under the Mental Capacity Act 2005.

At the inspection of 10 October 2017 we found improvements had been made. The provider had recorded information about people's capacity and the way they consented to care and treatment. The records included information about others who were involved in making decisions in people's best interest. The representative for the people using the service told us that the staff always made sure people understood the care they provided and had opportunities to refuse this.

The managing director and staff had undertaken training in respect of the Mental Capacity Act 2005 and had completed assessments of their knowledge as part of this training to demonstrate their understanding.

People were cared for by staff who were well trained, supported and supervised. The professional involved in coordinating the care for both of the people who used the service told us that they felt the staff had the skills and knowledge to care for people effectively. They felt the staff were well trained.

The staff member who we spoke with confirmed they had attended a range of training courses. We saw evidence of these in both staff members' files and saw that training had been updated annually, with both staff members having attended training the provider considered mandatory in 2017.

The staff member who we spoke with told us they felt well supported and could contact the managing director at any time. They said that they had opportunities to discuss their work and any concerns they had.

We saw records of supervision and appraisal meetings which indicated that the staff had been observed in the work place undertaking a variety of tasks.

People using the service were not supported by the staff with their healthcare needs. The care plans included essential information about these so that the staff could ensure people received the right support if they became ill whilst being cared for.

The staff supported people with some meals and they had information about their preferences and nutritional needs available at people's homes.

Is the service caring?

Our findings

The professional involved in coordinating the care for both of the people who used the service told us the staff worked really well with people. They said that they had developed good relationships with the people. Both people had very limited verbal communication, but the professional told us that the care workers had managed to get people to say some words and one person asked for the care workers by name.

The professional told us that the care workers had a good understanding of the needs of the people. They said that they had established positive and trusting routines where people felt comfortable and happy. They said that incidents of challenges had reduced since people had been supported by the care workers.

The professional also said that the care workers were kind, considerate, polite and friendly. They said that they worked with people in a compassionate and caring way, responding to people's individual needs each day.

The professional representing people also told us that the staff respected people's privacy, providing their care behind closed doors.

Is the service responsive?

Our findings

At the inspection of 3 November 2016 we found that people's needs were met, however the plans which outlined these needs were incomplete and did not provide enough detail for the staff.

At the inspection of 10 October 2017 we found improvements had been made. The provider had created assessments and care plans which gave information about people's needs. In addition, the provider of the service where the people lived had created care plans which the staff used alongside the ones created by Alpha Care and Support Services Limited.

The professional representing the people who used the service told us that the staff always followed their care plans and met people's needs. They told us the staff worked closely with their own staff making sure changes in needs were clearly communicated and acted upon.

The staff recorded the care and support they gave each day and the provider collected these records to audit them. The records showed that the staff had provided care as planned and that they checked on people's wellbeing.

There was an appropriate complaints procedure and the professional representing people told us they knew who to contact and what to do if they had any concerns.

Is the service well-led?

Our findings

At our inspection of 3 November 2016 we found the provider was not meeting all the required Regulations. At the inspection of 10 October 2017 we found that improvements had been made in all areas.

The professional involved in coordinating the care for both of the people who used the service told us that the provider was easy to work with and positive. They said that they could contact the provider's management team whenever they needed and always got a response. They said they worked with them well and were happy with the support provided by the agency.

The provider asked for feedback from the representatives of people using the service and used this to help audit the quality of the service provided. They also met regularly with staff to discuss their work and offer them support. The staff member we spoke with told us they felt supported by the agency.

The day to day management of the service was undertaken by the managing director. They told us that they were in the process of applying to be the registered manager. They applied for their Disclosure and Barring Service check, which they needed to do before they applied to the Care Quality Commission. The current registered manager was no longer involved in the daily management of the service. We advised the managing director that this person would need to apply to cancel their registration.

The provider's website included a link to the Care Quality Commission inspection reports.

The provider had a range of policies and procedures which they regularly reviewed and updated.