

Approvez Medi-Care Ltd

# Approvez medi-care Ltd Newham

## 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

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

At the time of the inspection, the location did not care or support for anyone with a learning disability or an autistic person. However, we assessed the care provision under Right Support, Right Care, Right Culture, as it is registered as a specialist service for this population group.

### About the service

Approvez medi-care Ltd Newham is a domiciliary care service providing personal care support to people in their homes. At the time of our inspection 1 person was using the service.

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

#### Right Support

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 using the service told us they felt safe receiving care and support. Staff had received safeguarding training and knew how to report allegations of abuse. People had appropriate risk assessments in place to reduce the risk of harm they faced. The service monitored these risks and would update accordingly should people's needs change.

At the time of the inspection, the person was not being supported with their medicines. However, staff still checked medicines to ensure they had not expired. Systems were in place to assess and reduce risks people faced when taking medicines and staff had received training. The risk of infection was reduced, and staff wore personal protective equipment to keep people safe. Independence was encouraged to help people maintain the skills they had.

#### Right Care

People told us staff were kind and caring and staff respected people's privacy and dignity. Staff respected people as individuals and did not discriminate. Equality and diversity training had been completed. Care plans were personalised, and people told us the care received met their needs. People's preferences were respected. Communication needs were assessed, and information could be provided in alternative formats for people to understand.

People told us staff were on time and stayed for the full duration of their call. People were pleased they had a consistent team of staff to provide them with support. Staff were recruited to the service following the providers policy and procedure and appropriate checks carried out to ensure staff suitability. An assessment of needs was carried out before care was given and people felt involved in this process. Consent to care was requested before care began and people told us staff asked for their permission at each stage of care delivery. People were supported to have enough to eat and drink.

#### Right Culture

People and staff were complimentary of the support available from the registered manager. The registered manager was aware of being open and transparent and welcomed opportunities to learn after any accident or incident. Systems were in place to monitor the quality of the service and feedback was requested from people, relatives and staff.

Staff were supported with a full induction and training programme which involved shadowing an experienced member of staff. Records confirmed staff received supervision and systems were in place to provide staff with an appraisal.

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 service was registered with us on 13 November 2021 and this is the first inspection.

#### 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?

The service was safe.

Details are in our safe findings below.

Good ●

### Is the service effective?

The service was effective.

Details are in our effective findings below.

Good ●

### Is the service caring?

The service was caring.

Details are in our caring findings below.

Good ●

### Is the service responsive?

The service was responsive.

Details are in our responsive findings below.

Good ●

### Is the service well-led?

The service was well-led.

Details are in our well-led findings below.

Good ●

# Approvez medi-care Ltd Newham

## **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

The inspection was carried out by 1 inspector.

#### Service and service type

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

#### Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

#### 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 that the provider or registered manager would be in the office to support the inspection.

Inspection activity started on 12 July 2023 and ended on 25 July 2023. We visited the location's office on 12

July 2023.

#### What we did before the inspection

We reviewed information we had received about 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 this information to plan our inspection.

#### During the inspection

We spoke with the registered manager, 1 member of staff and 1 person who received a service. We viewed 1 care plan and associated risk assessments and 1 staff member's recruitment, training and supervision records. We viewed quality assurance documents and policies and procedures related to the management of the service.

# Is the service safe?

## Our findings

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

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

Systems and processes to safeguard people from the risk of abuse

- People using the service were protected from the risk of potential abuse.
- People told us they felt safe while receiving care and support from staff. One person said, "I feel safe when they [staff] come around."
- Staff had received safeguarding training and were aware of the different forms of abuse and how to report it to be investigated.
- A member of staff said, "I never open the door for anyone I do not know and I will ask the person if they know who it is and can I open it. If someone was being abused I would tell [registered manager]. I can also report to social services, the police and CQC."

Assessing risk, safety monitoring and management

- Risk was assessed to keep people safe from potential harm.
- The registered manager performed an environmental risk assessment as part of their initial assessment to ensure people were safe and that they could work and support people in their home safely. The registered manager said, "I've done so many things to keep people safe, I've purchased a temperature gauge for [person's] fridge and a temperature gauge to check for when we prepare food."
- A member of staff said, "When I greet people I always ask how they are and I then check around their environment to make sure they are safe."
- Records confirmed measures were put in place to reduce people's known risks and where new risks were identified. For example, where diabetes was a known risk the service performed regular blood sugar checks to monitor people's health so appropriate health support could be provided to people.
- Staff were advised to observe people's oral health, any falls and whether they observed any pressure sores. This meant people's health was being monitored and any risks could be updated.

Staffing and recruitment

- People were supported by staff who were recruited following the provider's policy and procedure.
- People told us they received care on time. One person said, "They [staff] are always on time, very efficient."
- There were enough staff to provide safe care and treatment. The registered manager provided support and had another member of staff who was also available.
- Staff were recruited safely and there was an ongoing recruitment drive. Records confirmed staff were interviewed and their suitability for the job was assessed.
- Staff had to provide evidence to confirm their identity, right to work documents, references from previous employers and complete a disclosure and barring service check (DBS). DBS checks provide information

including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.

#### Using medicines safely

- At the time of the inspection people were not being supported with their medicines. However, staff had completed the relevant training if this support was going to be provided.
- As an extra safety measure, the registered manager informed us they checked people's medicines to ensure they had not expired.

#### Preventing and controlling infection

- 'People were protected from the risks of acquiring an infection. Staff completed infection control training and people told us staff wore the appropriate PPE'
- The registered manager told us they had a good supply of PPE which included gloves, aprons and masks.

#### Learning lessons when things go wrong

- Systems and processes were in place to learn after any accidents or incidents.
- The provider had a clear policy and procedure in place to guide them in recording the incident and learning for staff to prevent it happening in the future.
- At the time of the inspection no accidents or incidents had taken place. The registered manager said, "If there were any accidents I would investigate to see what happened and why, I would write a report and report it to the relevant authority"



# 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.

This is the first inspection for this newly registered service. This key question has been 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

- A thorough assessment of people's individual needs took place before care began.
- People told us the registered manager came and completed an assessment. One person said, "[Registered manager] asked me what I needed and what I need help with."
- Records confirmed the registered manager arranged a convenient time to meet people and asked them what they needed from their care package and provided people with an information booklet explaining the services provided. Relatives were also involved to offer additional information.
- Initial assessments showed people were asked a number of questions, this provided the service with detailed knowledge about people and their current health needs. For example, we saw people were asked whether they had any allergies, communication needs, issues with breathing, mobility, dental and oral care, pain management, mental health personal care and physical well-being and nutrition needs.

Staff support: induction, training, skills and experience

- People received care and support from staff who had been trained appropriately.
- One person said, "Staff know what they are doing. [Registered manager] is very talented."
- Staff received a full induction to the service and completed a period of shadowing to provide them with practical support and the confidence to support people effectively .
- Records confirmed staff had completed the Ccare Certificate. The Care Certificate is 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 they received good training support which made them feel competent to perform the role. Records confirmed staff received supervisions and an annual an appraisal to monitor the quality of their work.

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

- People were supported to have enough to eat and drink to stay healthy.
- Staff did not perform any food preparation at present but ensured people were supported to eat the meals already prepared by giving them on time and heating them to a safe temperature.
- People were encouraged to have plenty of fluids to stay hydrated .

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

- People's health needs were regularly monitored and the service worked well with people's health

professionals.

- Records confirmed details of the health professionals involved with people's care, these included their GP and community nurse.
- The registered manager supported people to receive health care by making health appointments as required. The service had an appointment sheet to record details of health appointments booked.
- Staff had received training and knew how to identify and respond if someone needed extra support with diabetes care.

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 MCA 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 .

- Mental capacity was understood by staff and the registered manager completed assessments to determine what decisions people were able to make for themselves or where they may have to hold best interest meetings to provide people with care and support. Consent was requested before care was provided, records confirmed this.
- People told us their permission was asked at the start of the care package and before any care was provided. One person said, "[Staff] always ask for my permission."
- Staff told us they asked for consent. A member of staff said, "Before I do anything I have to ask if it is ok to do it, if not then I wait."
- The registered manager was aware to have the correct consent forms in place and the legal documents required if someone else was providing consent on behalf of people.

# 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.

This is the first inspection for this newly registered service. This key question has been 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; Supporting people to express their views and be involved in making decisions about their care

- The care people received was from staff who showed compassion for their job and enjoyed supporting people .
- People using the service spoke highly of staff who supported them. One person said, "They [staff] are absolutely brilliant, [registered manager] is very caring."
- Staff told us they wanted to get to know people and enjoyed spending time talking with them. A member of staff said, "I found out what [person] likes to talk about and I ask them if they would like to talk and we spend time laughing. I took this upon myself and I can see it makes [person] smile ."
- Staff received equality and diversity training. The service was inclusive and welcomed people irrespective of their ethnicity, health condition, gender, sexuality, race or religion.
- People were involved in decisions about their care and people confirmed this to us.
- Staff involved people in making decisions about their care, by asking them what they wanted and offering choices .

Respecting and promoting people's privacy, dignity and independence

- People told us they were made to feel comfortable while receiving personal care and their privacy and dignity was respected .
- Staff told us it was important to always respect people's privacy and dignity. A member of staff said, "I make sure the door is closed and do not expose people at all. It's important for people to feel comfortable. If a relative wanted to stay while personal care was being delivered, I would always ask our client first, if they asked them to leave, I would politely ask the relative to go."
- Staff encouraged people to be as independent as they could be and people's care records clearly stated the tasks they were able to do for themselves and where they needed support from staff .

# Is the service responsive?

## Our findings

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

This is the first inspection for this newly registered service. This key question has been 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 was planned in a way to meet people's individual needs and choices. Care records were reviewed every 6 months or sooner if there were changes in people's needs .
- One person said, "They provide care very well they know how to wash me well."
- Records clearly stated people's preferences, the care people needed and how it was to be delivered. For example, information on people's preferred name, where people preferred to receive their personal care, toiletries they liked to and how staff were to safely bathe people who had dressings was provided. This meant staff were clearly directed to on how to deliver personalised care.
- Staff found the care plans very clear, a member of staff said, "The care plan is clear on what to do, it is easy to understand and how to put care in order."
- Care records were reviewed every 6 months or sooner if there were changes in people's needs .

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard [AIS]. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- People's communication needs were documented in their care plan.
- People told us information was provided in a format they understood.
- The provider assessed people's communication needs before the care package began and was assessed again at people's review of care.
- The registered manager was aware of the AIS and the need to ensure people were involved in understanding information presented to them. The registered manager said, "We can support people by translating information if they need it in another language or we can provide pictures."
- Where people did not use words to communicate, the registered manager told us they could use Makaton to support communication. Makaton is a communication programme for adults and children with learning or communication difficulties. It combines signs, symbols and speech to give different options for people to communicate .

Improving care quality in response to complaints or concerns

- Systems were in place to support people make a complaint about the service. The provider had a complaints policy and procedure explaining how a complaint would be responded to and where to go if

people were not satisfied with the providers response

- People knew how to make a complaint and told us they had no complaints about the service. No complaints had been received at the time of the inspection .

End of life care and support

- Systems were in place to plan and provide end of life care if the service was required to and staff were trained.
- Records confirmed as part of the initial assessment people were asked about their end of life wishes. Where people did not wish to discuss this, the service respected people's decision.

# 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.

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

- The service focused on providing people with a personalised service to support them living healthy lives.
- Feedback from people using the service was positive, and they felt their lives were being made easier due to the support from the service. One person said, "I'm very pleased with everything. They [staff] have been wonderful. [Registered manager] has left me their contact number if I need them for anything."
- Staff told us they liked working at the service and had good leadership from the registered manager. A member of staff said, "[Registered manager] is understanding and very good and what she does."
- The registered manager told us they wanted people using their service to receive good health outcomes irrespective of their background or health needs. The registered manager said, "I treat people with dignity, we have a duty of care and we always have them at the centre of everything we do."

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 fully understood their responsibilities under duty of candour and the need to be open and transparent when things went wrong.
- The registered manager was aware of what they legally had to report to the Care Quality Commission.

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

- The provider had systems in place including a quality monitoring policy to ensure people were receiving quality care and support.
- Records confirmed the registered manager performed random spot checks to check staff were providing care on time and as stated in people's care plans.
- The registered manager had good oversight of the service and had systems in place to monitor as service required.
- Staff were aware of what was expected of them as this was discussed during team meetings and supervisions, which records confirmed this. Staff were provided with a copy of their job descriptions so they were aware of their duties and responsibilities.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Continuous learning and improving care; Working in partnership with others

- People, their relatives and staff feedback was requested to enable the service to improve.

- People told us they liked being asked if the care was up to standard and welcomed the opportunity to provide feedback.
- Staff surveys were completed for the provider to know how their staff felt in their job role.
- The registered manager and staff appreciated the benefits of continuous learning. The registered manager said, "We are talking about people's health, if we don't have the skill we would seek training for staff. If we couldn't meet people's needs I will support people to find someone to help them."
- The registered manager attended additional courses in social care to support them in their role and attended a dementia care road show to provide them with further insight.