

One by One Care Ltd

Visiting Angels Central Lancashire

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

About the service

Visiting Angels Central Lancashire is a domiciliary care agency providing support, including personal care. The service provides support to people living in their own homes in the community.

At the time of our inspection there were 24 people using the service. 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. 9 people were receiving personal care at the time of our inspection.

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

People using the services of Visiting Angels Central Lancashire, benefited from a service that was safe, effective, caring, responsive and well led.

Health and safety checks were carried out to help ensure any risks in people's homes were minimised. Risks to people were identified, managed and mitigated by staff to lessen the risk of harm to people.

People told us they felt safe when receiving care and support from staff and that staff treated them with kindness and respect. People had choice in which staff provided their support.

Where people required support with taking their medicines, this was provided by staff who were trained and competent.

Staff recruitment processes ensured staff were safe to work with people. In addition to mandatory training, staff received more specialised training to help deliver care to people which was tailored to their specific health care needs.

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.

The registered manager was described by staff as being dedicated, approachable and helpful. Both the registered provider and the registered manager promoted a positive culture which was committed to delivering high-quality and individualised care to people. Staff understood, shared and practiced these values.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection

This service was registered with us on 24 May 2022, and this is the first inspection.

Why we inspected

We carried out this inspection to provide the service with a rating.

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 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.

Visiting Angels Central Lancashire

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 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.

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 48 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 25 April 2023 and ended on 4 May 2023. We visited the location's office on 25

April 2023.

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 (PIR) prior to this inspection. A PIR is information providers send us to give some key information about the service, what the service does well and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with the registered provider, the registered manager and the care co-ordinator.

We looked at records in relation to people who used the service including 3 care plans, medication records and systems for monitoring the safety and quality of the service provided. We looked at staff training and quality assurance records.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We spoke with 3 people on the telephone to help us understand their experience of the care and support they received. We also spoke with 2 members of care staff.

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.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- The service worked hard to ensure care and treatment was provided in a safe way for people. Risk to people had been assessed and risk management plans were in place to help guide staff on how to support people against risks which were individual to them.
- People told us they felt safe when receiving care and support from staff. One person told us, "I definitely feel safe with staff, they are trained and know what they are doing."
- Staff had received training in how to record accidents and incidents. Although not many incidents had been recorded, the registered manager had oversight of them. This meant patterns and trends could be identified and appropriate action taken to help minimise the risk of recurrence.

Staffing and recruitment

- People had a say in which staff they wished to support them. Wherever possible, people were matched to staff based on shared interests and similarity of character. People were provided with a staff file which provided key information about the staff member, such as their likes, past times, background and what was important to them. People were then able to make an informed choice about which staff member they would like to support them.
- One person explained, "I have the same staff team, this is crucial as I have young children and they get anxious if strangers are in the house, so the service have made sure I have the same staff. Staff truly go above and beyond."
- Recruitment of new staff was safe. Pre-employment checks were completed to help ensure staff members were safe to work with vulnerable people.

Preventing and controlling infection

- People were adequately protected against the risk of infections. Staff had received training in infection control.
- We were assured that the provider was using PPE effectively and safely. People were able to choose whether or not they preferred staff to wear masks when visiting their homes. This helped people who were deemed to be more vulnerable to infections such as COVID-19, feel safe and less anxious.

Using medicines safely

- For people who required support with taking their medicines, people received their medicines from staff who were competent to administer them.
- Staff were guided by a medicines policy which contained reference to best practice guidance.

Systems and processes to safeguard people from the risk of abuse

- Systems and processes were in place to protect people from the risk of harm and abuse. Staff had received safeguarding training and understood how to safeguard people from abuse and how to report any safeguarding concerns.

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 of 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

- The provider followed national guidelines to ensure care was delivered in line with standards, to help ensure staff had adequate skills to meet the standards.
- Records showed people's needs, risks and choices had been assessed before they started using the service to ensure staff were able to meet their needs. The registered manager told us, "We work to ensure we meet people's preferences."

Staff support: induction, training, skills and experience

- The provider had established a system for ensuring staff were provided with induction and training to meet the specific needs of people using the service. Staff underwent a 6 week-long induction programme, which included a mix of face to face and online training. Staff were also introduced to the people they would be supporting in the future.
- Staff were also supported via supervisions and appraisals to help ensure they had the right skills for their role.

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

- For people who required support with eating and drinking, staff supported them to ensure they received sufficient nutrition and hydration to meet their needs and preferences.

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

- The service supported people to live healthier lives. People were supported to access external healthcare professionals where necessary. The registered manager shared with us an example where they had supported a person to attend a hospital appointment. But for the manager's support, the person would not have had the confidence to attend on their own.

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.

- Staff recognised the importance of seeking a person's consent before starting to provide any care or support. Records of consent were completed to show people had agreed to their support plans.

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

- People were treated well and supported in line with their needs. People were actively engaged with their care and support.
- People were keen to tell us how well staff treated them. Comments from people included, "Staff are so kind and they help me keep as independent as possible, they treat me as an equal" and "Staff are just wonderful, I wouldn't change any of them. They treat me with respect."
- The service considered people's human rights, equality and diversity. Any limitations on people's abilities due to their care and support needs, were not treated as barriers to people accessing support and opportunities.

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

- Staff supported and encouraged people to express their views and make decisions about their care and support.
- People's feedback regarding their care and support was sought via phone calls from the registered manager and questionnaires. Regular assessments of people's care were also used as opportunities to gain people's views.

Respecting and promoting people's privacy, dignity and independence

- Staff were able to describe how they protected people's dignity and privacy. People were supported in a way which maintained and encouraged people's independence, to help people achieve their goal of living independently at home.

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.

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

- Where necessary, staff supported people to access the community and take part in activities of their choice, such as supporting people to go shopping and to restaurants. We saw how staff had facilitated new opportunities for people, such as access to local community events and introductions to new leisure pursuits and work opportunities.
- People were supported with their social and cultural needs. We saw an example of where the registered manager had researched a person's religious beliefs and written guidance for staff to ensure staff were mindful of the person's beliefs during care. The manager had also allocated staff of the same faith to support the person, as the person had expressed that they wanted the service to not only meet their care needs, but their spiritual needs too.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- People's care records took account of people's needs and preferences. People and their relatives were encouraged to take an active role in review of their care records.
- Peoples' care was planned and promoted to help ensure people received person centred and high-quality care. Staff demonstrated a good knowledge and understanding of 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. 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.

- Staff were trained to communicate with people in a way they could fully participate and understand. People could be provided with information and reading materials in a format which suited their communication needs.

Improving care quality in response to complaints or concerns

- At the time of our inspection, the provider had not received any complaints. An accessible complaints procedure was in place to enable people and their relatives to raise any concerns.
- People told us that although they had never had cause to complain, they wouldn't hesitate to speak up if they had to.

End of life care and support

- At the time of our inspection, there was no one receiving end of life care. People and their relatives were given the opportunity to make decisions about their end of life care wishes and staff were able to support both people and their relatives at this time.

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.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- The registered manager demonstrated an understanding about risk and performance. Effective systems for monitoring the quality of the service and meeting regulatory requirements was established. Audits and governance tools were effectively implemented to provide an honest scrutiny of the service.
- Processes were in place to ensure any incidents or safeguardings were uploaded to an electronic system which enabled them to be reviewed by the registered manager. Regular meetings were held with the provider to ensure incidents were discussed and reviewed and any findings and best practice guidance was shared with the staff team.
- Staff told us they felt the culture of the service was one which was caring and focused on delivering high-quality person-centred care and support. Comments included, "The culture of the place is very caring, it's a good company to work for and I feel very valued" and "[Manager] is so lovely and happy to help. [Manager] is a such a hard worker and loves their job, we all feel that."
- Positive feedback was received about the registered manager from people and staff. The registered manager operated an open-door policy. Both people and staff were welcome to drop into the office at any time. One person told us, "[Manager] is so open and approachable, always there for help and advice." A member of staff confirmed, "I can ask [Manager] anything, they are very dedicated to their job."

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 demonstrated an understanding of their duty of candour, and the importance of keeping peoples' next of kin informed. The registered manager encouraged feedback and adopted a transparent and open approach.
- The registered manager was aware of their responsibilities in line with regulatory requirements. They knew to notify CQC of incidents and events that occurred at the service.

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

- Staff were involved and engaged in the service delivery. Staff told us they were able to share their views on how the service could be improved and they felt listened to.
- There were regular staff meetings where staff were able to air their views and put forward suggestions for consideration. Staff were also invited to complete questionnaires. For example, some staff had voiced

challenges associated with travel time between people's homes, the registered manager then implemented ways to make travel time less burdensome for staff.

- The registered provider was keen to recognise and reward positive staff practices. For example, there was a regular newsletter which not only provided updates relevant to the provider's services, but which highlighted and celebrated staff practices which had exerted a positive impact on people. Staff could be nominated for 'Angel of the Month' and were awarded a prize, to help recognise their achievements.
- The registered manager shared with us that they were looking to support a member of staff from overseas by seeking English language courses to help the staff member further develop their language skills, to help them better communicate effectively with people being supported.
- The service welcomed feedback from external visiting professionals and people's family and friends, who were able to give feedback via a questionnaire which was easily accessible via an online link. The service had encouraged people to provide feedback to CQC. Positive feedback had been received.

Continuous learning and improving care

- Systems for promoting continuous learning and improving care were implemented to monitor any shortfalls, learn from previous incidents, and help drive improvements. For example, audits had highlighted that the quality in staff recording of people's daily notes required improving. This was communicated to staff via meetings and additional training was offered.
- Processes were in place to ensure reflective discussion took place after any significant incidents. This aided the development of best practice and helped improve the safety and quality of care and support people received.

Working in partnership with others

- The service worked in partnership with other professionals and agencies to help ensure people received the care they needed, and to help improve standards in the quality and safety of care. Both the provider and the registered manager demonstrated a genuine commitment and dedication to provide high quality individualised care and support for people.
- We saw how the service worked in partnership with people's families, to ensure people received the most appropriate care and support. For example, the service had assisted one family to obtain specialist mobility equipment. This helped ensure the person received the right care whilst also providing much needed support and respite to the family.