

# Altogether Care LLP Altogether Care LLP-Blandford Care at Home

### **Inspection report**

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Ratings

### Overall rating for this service

Date of inspection visit: 05 July 2021

Good

Date of publication: 29 July 2021

### Summary of findings

### Overall summary

#### About the service

Altogether Care LLP- Blandford Care at Home is a domiciliary care agency. It provides personal care to people living in their own homes. 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. At the time of this inspection, 61 people were receiving the regulated activity of personal care from the service.

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

We received positive feedback from people, relatives and healthcare professionals regarding the service and were provided with many examples that demonstrated people were receiving high quality, effective and responsive care from a service that was well-led.

Staff received induction and on-going training and support that enabled them to carry out their roles effectively.

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.

People had access to healthcare services and were involved in decisions about their care and wellbeing. Working partnerships with other agencies and health professionals had been formed which enabled effective outcomes for people.

People were encouraged and supported to eat and drink well. People told us they felt listened to and their views were respected when planning and agreeing what care and support they needed.

People told us they received their care from a team of staff who knew them, and their care needs well. People and relatives told us staff were kind and caring and went above and beyond to ensure they were happy and well cared for.

Care plans were person centred and detailed created with people and updated to ensure they remained current. People and relatives knew how to raise any concerns and told us the service was proactive at resolving any concerns and worked well as a team to improve the service.

There was a system of ongoing monitoring through audits and spot checks to review the quality of the service provided.

There was an open, transparent supportive culture that empowered staff and people who use the service to put forward their ideas for improvement that enabled people to receive quality, individualised care that impacted positively on their lives.

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People, relatives, health and social care professionals. and staff consistently spoke of the effective and clear communication they had with the service.

The policies and systems in the service supported this practice.

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 12 November 2019 and this is the first inspection to rate the service.

#### Why we inspected

This was a planned inspection to provide a rating for a recently registered service. The ratings from the previous inspection for those key questions not looked at on this occasion were used in calculating the overall rating at this inspection.

#### 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.

<b>Is the service effective?</b> The service was effective.	Good •
Details are in our effective findings below.	
<b>Is the service caring?</b> The service was caring. Details are in our caring findings below.	Good ●
Is the service responsive? The service was responsive.	Good ●
Details are in our responsive findings below.	
Is the service well-led? The service was well-led. Details are in our well-Led findings below.	Good •



# Altogether Care LLP-Blandford Care at Home

**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 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 homes. 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 5 July 2021 and ended on 9 July 2021. We visited the office location on 5 July 2021.

#### What we did before the inspection

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

#### During the inspection

We spoke with 14 people who used the service and seven relatives about their experience of the care provided. We spoke with nine members of staff including the registered manager, care co-ordinator, field care supervisors and care workers. We sought feedback from the local authority and professionals who work with the service.

We reviewed a range of records. This included four people's care records and medication records. We looked at three staff files in relation to recruitment and staff supervision. 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. We spoke with two professionals who regularly have contact with 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.

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

- People's care needs and choices were assessed before the service started to provide any care or support and were then regularly reviewed. One relative told us, "They came out at the beginning and assessed [person] and talked about what we needed and wrote it all down."
- These assessments were used to build people's care plans in line with standards, guidance and the law. People told us their care needs were met. Comments included, "Well I think it's very good really, they come twice a day", "Well we couldn't do better" and, "It's very good, I am very satisfied with it, they come four times a day."
- The service used a computerised care planning, recording and communication system. Information on the system was kept up to date and was readily available to staff.

Staff support: induction, training, skills and experience

- People told us staff had the skills to meet their needs. Comments included, "They all seem to know what they are doing and are quite competent", "Yes they do know what to do, very much so, occasionally there is a new one but they learn quick" and "The new ones that come are sometimes a bit lost, but they come with the older ones until they know what to do."
- Staff told us they received an induction including shadow shifts. One staff member said, "[The induction] was informative. I did do shadow shifts and they asked me if I was comfortable before I went out on my own."
- New staff told us they were expected to attain the Care Certificate if they were new to care work. The Care Certificate represents a nationally accepted set of standards for workers in health and social care. One staff member said, "I've been working towards my Care Certificate, I had to do a lot of amendments. I spoke to them in the office about it and they are going to arrange for someone to sit with me and go through it."
- Staff received regular refresher training and told us they felt supported by the management. One staff member said, "I have received very good training both written and practical. I also know that if I require any additional individual training, I can just ring the office."
- Staff received regular supervisions and found these useful. One staff member said, "I can just tell them [anything] they are very helpful" and another staff member said, "I have a supervision every 6 months, I feel I can always put my point across or say if I have any concerns."

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

• People told us staff supported them to eat and drink to maintain a balanced diet. Comments included, "They make my meals, just what I ask for", "They are all very nice, they do put my meals out" and, "I say to them, I'll have a beef hotpot today or whatever and they do it for me."

- Staff received training in nutrition, hydration, food hygiene and food safety.
- Care plans set out people's dietary needs and preferences. Staff told us they were fully aware of people's dietary needs due to care plans being updated when required and any changes communicated via an encrypted messaging system.

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

• The service worked with other agencies to deliver consistent, effective and timely care. For example, care staff worked alongside end of life nurses and support workers to provide end of life care and the service worked with the local authority to provide urgent care to assist people out of hospital, often at short notice.

- People were supported to access healthcare services when they needed additional support. This included support from GPs, community nurses and occupational therapists.
- We received positive feedback from healthcare professionals. One said, "They are reliable with anything that I request." Another said, "Altogether Care are easy to work alongside and the team are patient focused and able to work with therapists to ensure therapy goals are met."

• One healthcare professional told us care staff had worked with therapists to rehabilitate a person who had little to no mobility to now being able to walk short distances with a walking frame. The healthcare professional said, "This was a [person] who had been declared by a previous therapist as having no rehabilitation potential. Carers listened and did not try to deskill the individual."

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 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 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.

• People told us they were encouraged to make decisions for themselves and felt involved in making choices wherever possible.

- The registered manager and staff had received training about the Mental Capacity Act 2005 and spoke knowledgeably about how it applied to the people they cared for. Staff knew about people's individual capacity to make decisions and understood their responsibilities for supporting people to make their own decisions.
- Where there were concerns about a person's ability to consent to their care, and they had no legally authorised representative, the service had assessed their mental capacity to consent to care. Where the person was found to lack capacity, the service recorded a best interests decision about how to provide the necessary care in the least restrictive way possible.

### 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

- People told us they were treated well by staff who were kind and caring. People felt supported to express their views and make decisions about their care. Comments included, "[They] are very kind and polite", "They are all very nice, they talk to you and ask about things" and, "They are alright, they look after me."
- Staff knew people well and provided us with examples of how they treated and supported people with kindness and respect. Staff had supported people with haircuts when they were unable to visit the hairdressers during lockdown, had provided Christmas lunch to a person who was unable to see family and friends at Christmas and shared photos of the people they had visited with cards and balloons for their birthday. One person told us, "I didn't expect to have them for so long but things kept going wrong with me, they got me through it and they got me through the year of lockdown because I never got out. I would never have managed otherwise, they have been very good to me. I really like them, they have been so kind."
- Relatives told us their loved ones were safe and well cared for. One relative said, "[Person] loves them, they are very good with [them]. Another relative said, "Well we couldn't ask for better, they are lovely, just lovely." A further relative told us, "[They are] so nice to [person] [they] even go and get the knitting wool for [them]. I think they have been brilliant; they chat and do little jobs for [them], I have no worries at all."

Respecting and promoting people's privacy, dignity and independence

- Staff told us they were proud to work for the Altogether Care LLP- Blandford Care at Home because the service treated people equally regardless of their circumstances. One member of staff said, "They have a good policy to make sure all people are treated equally and fairly."
- People told us staff treated them with dignity and respect and promoted their independence. One person said, "They talk to me and help me do things so I can manage myself" and another person said, "They give excellent care, the service always does what I ask of them, it is just fantastic."
- Relatives told us they were happy staff treated their loved one with dignity and respect. A relative told us, "There was, every morning, laughter and they all had a friendly word for me, too, which was very kind and meant a lot, I would happily recommend them." Another relative said, "I have met several of the carers during my visits and what strikes me is that they always have a smile on their face and are happy in their work. My parents are very pleased with the service they receive which has enabled them to stay together in their own home."
- One healthcare professional told us, "Altogether Care have been respectful, proactive and empathic to patients' needs. Carers who I have worked alongside have good clear communication and are very respectful to patients' wishes and also respectful to other healthcare professionals."

## 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

• People told us they were involved in the creation of their care plans and regularly took part in reviews to ensure the care plans were kept up to date. Comments from people included, "I have got a care plan, all the things what is wrong with me and phone numbers, that's all here. I have spoken to the office and [the care plan is] always alright" and, "There is a plan thing and someone comes from the office sometimes to see me and ask me things [to make sure it's right]."

• Care plans were electronic and care staff could easily access them from encrypted apps on their phone. Staff told us they had time to read people's care plans and were provided with updates to people's care via an encrypted messaging system.

• Care plans were person centred and provided staff with enough detail to meet the needs of people who use the service.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- People's communication needs were assessed and set out clearly in their care plans. This included any impairments that could affect communication, how people preferred to communicate and the support they needed from staff with this.
- One relative told us, "[Person] is very deaf, [they] can't hear at all, so they can't talk to [them]. We do have a board and they write on it when they have to ask [them] things."

Improving care quality in response to complaints or concerns

- People told us they knew how to raise complaints or concerns if they had any. Comments included, "I don't have any complaints but I could tell them if I did", "I have had nothing to complain about but I know who to ring if I did" and, "If I had a complaint and I haven't had any, I would ring the office." A relative said, "I can ring them, but I don't need to, we have never had a complaint."
- At the time of our inspection the service had not received any official complaints. The registered manager told us any concerns received were discussed as a team and changes were made to improve the service. One relative told us, "[They are] very proactive and helpful in caring for my elderly mother. [They are] always trying to find solutions to any problems that might arise."

End of life care and support

• At the time of our inspection no person using the service required imminent end of life care. However, the service had worked closely with community end of life teams in the past to provide consistent and effective end of life care.

• Staff told us they had brief end of life training during their induction. We asked staff, "What does good end of life care look like?" Comments included, "I would make the client as comfortable as possible, see they have everything they need and respect any wishes they gave", "Make sure the person is as comfortable, mentally, physically, and spiritually" and "No end of life is the same but giving time to listening to them about their needs and wishes and also involving family is important."

• The service had received thank you cards from relatives of people who had been cared for at the end of their lives. One relative said, "Thank you so much to all the carers who cared for [person]. Their visits were always something to look forward to, not only for the care given to [person] but also for their company." Another relative said, "Thank you all so much for the care you gave [person] over the last few months. [Person] enjoyed your visits and I appreciated the excellent care and attention you gave [them]."

### 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 good. At this inspection this key question has now remained the same. 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; Continuous learning and improving care

- The registered manager told us how they met their regulatory requirements. We discussed with the registered manager their approach for making notifications to CQC to ensure they met their legal obligation to act in an open and transparent way in relation to care and treatment.
- People benefitted from a clear management structure which meant people's care was monitored by senior staff to ensure care was delivered safely and effectively as per people's wants and wishes.
- The service had robust quality assurance systems which focussed on outcomes for people to ensure highquality care was provided. Senior staff completed spot checks to people's homes to check on their welfare and monitor staff performance. In addition, audits were completed to monitor quality and identify any shortfalls where areas of improvements were required. Audits included all types of record keeping and medicines administration.
- Changes were communicated effectively via an encrypted text messaging service or through the care planning app. One member of staff said, "I always get updated and informed from the office either via text, phone call or face to face in the office. My manager and care coordinators are extremely competent in keeping us all updated with vital information so we can go into people's houses, new or existing, with confidence and give the best care."

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

• People, relatives and healthcare professionals told us the service achieves good outcomes for people. One person said, "I have no issues, it's a good service and does what I want." One healthcare professional said, "Altogether Care provide a service that I would recommend to my family members and would be happy for them to care for my relatives if required."

- Staff consistently told us of the positive, open, honest and supportive management structure that was in place. Everyone we spoke with described how people were very much at the heart of the service and how this culture came from the passion and drive showed by the registered manager and their commitment to provide the very best, person centred care for people. A member of staff said, "This is the best company I've worked for. Really nice, they put the clients first and the staff member opinion counts. I think they have got it right; I can't complain."
- Staff felt well supported in their roles; this created a happy and confident workforce. People, relatives and healthcare professionals told us they felt confident in the staff and well cared for. One member of staff told us, "I've never had such amazing support from a manager and team as I have from Altogether Care

Blandford. This support has made me continue to love my 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 service had appropriately raised concerns with the local authority safeguarding team when they needed to do so.

• The registered manager and staff were open and transparent. People and relatives told us they felt the manager was approachable, open and honest. One relative said, "They let me know if anything has happened".

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

• People's views were sought, and they were asked for suggestions for how the service could be improved. We observed senior members of staff going out to visit people in their homes to ensure they were able to communicate their views. The results of the feedback surveys were reviewed, and actions plan put in place to improve any shortfalls that were identified.

• Records of satisfaction conversations with people showed people were happy with the care they received.

• Staff had been well supported and felt valued by the provider. People were cared for by staff who worked as a team to share ideas and good practice. Staff prided themselves on providing a very high-quality service. One member of staff told us, "This is a great place to work. Everyone is so friendly and supportive, I instantly felt welcome when I first started my job role and in my eyes we are like one big family who support each other on a daily basis and this is why I continue to love what I do and in return give clients the best care they deserve."

• Staff worked in partnership with other agencies and professionals to make sure people's needs were met. We received positive feedback from health and social care professionals. Comments included: "Altogether Care have supported us as a team with care for patients with dementia, long term conditions, end of life care and frailty. We are overall happy with the service that Altogether Care provide, they engage with us well and are very caring" and, "They are very accurate and reliable."