

Anglia Living Care Services Ltd

Anglia Care

Inspection report

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Date of inspection visit:
06 September 2017

Date of publication:
29 September 2017

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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

Anglia Care provides a personal care service for people living in their own homes. At the time of this announced inspection of 6 September 2017 there were 92 people who used the service. We gave the service 48 hours' notice of our inspection to make sure that someone was available.

At our last inspection of 22 January 2015 the service was rated Good. At this inspection we found the service remained Good.

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 2008 and associated Regulations about how the service is run.

The service continued to provide a safe service to people. This included systems designed to minimise the risks to people, including from abuse. There were systems in place to make sure that there were enough care workers to cover people's planned care visits. Robust recruitment procedures were in place. Where people required support with their medicines, this was done safely.

Care workers were trained and supported to meet people's needs. The service understood the principles of the Mental Capacity Act 2005 and people were supported to have maximum choice and control of their lives and care workers cared for them in the least restrictive way possible; the policies and systems in the service supported this practice. Systems were in place to support people to eat and drink enough, where they required support. People were supported to have access to health professionals where needed.

Care workers had good relationships with people who used the service. People's views and preferences were listened to and acted on about how they wanted to be cared for and supported.

People received care and support which was planned and delivered to meet their individual needs. A complaints procedure was in place and complaints were acted upon and used to improve the service.

The service continued to have an open and empowering culture and quality assurance systems supported the management to identify shortfalls and address them promptly. As a result the quality of the service continued to improve.

Further information is in the detailed findings below.

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 remains good.	Good ●
Is the service effective? The service remains good.	Good ●
Is the service caring? The service remains good.	Good ●
Is the service responsive? The service remains good.	Good ●
Is the service well-led? The service remains good.	Good ●

Anglia Care

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.

This announced comprehensive inspection was carried out by one inspector on 6 September 2017. We gave the service 48 hours' notice of our inspection to make sure that someone was available.

Before our inspection the provider completed a Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service: what the service does well and improvements they plan to make. We looked at information we held about the service including notifications they had made to us about important events. We also reviewed all other information sent to us from other stakeholders for example the local authority and members of the public.

Prior to our inspection we received completed questionnaires from two people who used the service, one care worker and two community professionals. These questionnaires provided their views of the service provided.

We visited the service's office and spoke with the registered manager, a staff member who coordinated recruitment and training and two care workers. We reviewed the care records of 12 people who used the service and records relating to the management of the service, including the recruitment records of six care workers.

Following our visit to the service we spoke with 11 people who used the service, seven relatives and one care worker on the telephone.

Is the service safe?

Our findings

At our last inspection of 22 January 2015 the service was rated Good. At this inspection we found the service remained Good.

Risks to people's safety continued to be managed well. People's care records included risk assessments which identified how risks were minimised, this included risks associated with mobility, and in their homes. People told us that they felt safe. A comment from a relative made in a compliment received by the service was, "[Person] absolutely loves [care workers] and feels very safe around them."

All of the questionnaires we received from people, a care worker and community professionals agreed that people were safe from the risk of abuse and harm. People continued to be protected from the systems in place designed to keep people safe from abuse. People received care from care workers who were trained and understood how to recognise and report abuse. Where incidents had occurred the service's management took swift action to report them appropriately. Actions were taken to reduce future incidents, such as taking disciplinary action and reporting to the Disclosure and Barring Service (DBS). The DBS keeps a record of criminal convictions and people who may be unsuitable to work in this type of service.

People and relatives told us that there had never been any instances of missed care visits and if the care workers were going to be late, they were informed and received an apology. One person said, "They [care workers] are usually bang on time." Another said, "Sometimes it has to be expected such if someone before me has a funny turn, or road works." People and relatives told us that their care workers always stayed for the agreed length of time. The service operated an electronic system where care workers logged into and out of their planned visits. This allowed the service to monitor all visit times.

The registered manager told us that the staffing level continued to be appropriate to ensure that there were enough care workers to meet people's needs safely. Records confirmed what we had been told. The registered manager told us about how they were in the process of recruiting care workers to ensure that vacancies were filled quickly to reduce the risks of missed and late visits to people. The registered manager told us that they only took on new people to receive care if they could ensure that their visits could be staffed. This was confirmed by a community professional who stated in their questionnaire, "In my view Anglia Care only provide services where they are confident that the service can be adequately covered."

The service continued to maintain recruitment procedures to check that prospective care workers were of good character and suitable to work in the service. This included checks from previous employers and with the DBS. One care worker said, "I was not allowed to work until I had my DBS."

People told us that they were satisfied with how their care workers supported them with their medicines. One person said, "They [care workers] take one [tablet] out for me it is really tiny and I would drop it if I did it myself." Medicines continued to be administered safely. Care workers were trained in the safe management of medicines. Records included the support that each person required with their medicines and that medicines were given to people when they needed them.

Is the service effective?

Our findings

At our last inspection of 22 January 2015 the service was rated Good. At this inspection we found the service remained Good.

The service continued to provide care workers with training and support to meet people's needs effectively. One person said, "They [care workers] are very well trained, I have a lot of experience of different agencies and these [care workers] are the best I have ever had." Records showed that training provided included safeguarding, infection control, health and safety and medicines. Before they started working in the service care workers were provided with an induction which provided them with the training they needed to meet people's needs and shadowed more experienced care workers. Care workers were assessed on the care certificate, which is a set of induction standards that care workers should be working to.

Records and discussions with the registered manager and care workers showed that care workers continued to receive one to one supervision and annual appraisal meetings. These provided care workers with the opportunity to discuss their work, receive feedback on their practice and identify any further training needs they had.

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. We checked whether the service was working within the principles of the MCA. People's care records identified their capacity to make decisions and included signed documents to show that they consented to the care provided in the service. Care workers had been trained in the MCA. People told us that they felt that the care workers asked for their consent before they provided any care or support. One person said, "They [care workers] always ask for my consent and check before they leave if anything else needs doing."

The service continued to support people to maintain a healthy diet, where required. Records demonstrated that people were provided with the support they needed in this area. The registered manager told us how they had supported care workers to prepare foods that people preferred, including giving them recipes and guidance on using a microwave to prepare pre-cooked meals. One person told us how their care worker prepared their breakfast each morning, "I get the bowl ready and they mix it [porridge] to perfection."

People continued to be supported to maintain good health and had access to health professionals where required. People's records included information about treatment received from health professionals and any recommendations made to improve their health were incorporated into care plans. One person told us how they had felt unwell and their care worker had, with their permission, called an ambulance. They said that they were happy with this action and the care worker had acted quickly.

Is the service caring?

Our findings

At our last inspection of 22 January 2015 the service was rated Good. At this inspection we found the service remained Good.

People told us that their care workers treated them with kindness and respect. One person said, "They [care workers] are always very respectful." Another person told us about their regular care worker was a, "Ray of sunshine, comes in the door with a big smile, if I am in the doldrums [care worker] cheers me up." One person's relative commented, "They [care workers] are extremely respectful, considerate and caring, it is wonderful." Compliments received by the service from people and relatives included comments about how the care workers were respectful and caring. For example, "[Care worker] is a breath of fresh air and makes [person's] morning great," and, "Thank you for all you care and kindness shown to [person]."

The registered manager and care workers continued to speak about people in a compassionate manner. For example, one care worker told us how they usually supported the same people which provided consistency of care, and said, "I love my clients." Another care worker said, "I love my job with all my heart."

Care workers understood why it was important to respect people's dignity, independence, privacy and choices. Care workers were also provided with guidance on how people's rights were respected in their care plans. One person told us how their care workers respected their independence, "They always check if I can do it myself, they never take over if I don't want them to." Another person said, "If they [care workers] see a movement [of a part of their body] they have not seen before, they praise me and encourage me." One person's relative said that they felt that their spouse's privacy was respected by the care workers, "They always make sure the bathroom door is closed when they are seeing to [person]."

People told us that the care workers listened to them and acted on what they said. One person commented, "They [care workers] listen to what I want, I cannot find fault with them at all." One person's relative said, "We were consulted throughout the assessment and the drawing up of the care plan." Records and discussions with the registered manager demonstrated that people continued to make decisions about their care and that their views were listened to and used when planning people's care. People's care records clearly identified that they had been involved throughout their care planning. This included their choices about how they wanted to be cared for and supported. They had signed documents to show that they agreed with the contents.

Is the service responsive?

Our findings

At our last inspection of 22 January 2015 the service was rated Good. At this inspection we found the service remained Good.

People told us how the service responded to their individual needs. One person said that the service was flexible, for example if they needed to attend an appointment, their care visits were provided at a different time to allow them to attend. Another person commented, "They [care workers] always put me first." Another person told us, "I really can't praise them [service and care workers] enough, I get nothing but good care and attention."

The service continued to provide a responsive service which met people's individual and diverse needs. This included asking the authority paying for people's care to allow more time when the person's needs had increased.

The service continued to ensure that people's care was personalised and care records identified how the service assessed, planned and delivered person centred care. The records provided care workers with information about how to meet people's specific needs and preferences. The records and discussions with the registered manager demonstrated that people received care and support which was tailor made to their needs and preferences. One person's relative told us, "[Person's] care plan reflects what [person] needs." Care reviews were regularly held with people and their relatives, where required, to ensure that the records were up to date and reflected people's needs and preferences.

People's daily records included information about the care and support provided to people each day and their wellbeing.

There was a complaints procedure in place, each person was provided a copy with their care plan documents. People told us that they knew how to make a complaint and were confident that any concerns would be addressed. Records of complaints showed that they were listened to, addressed and used to improve the service. For example, meeting with complainants to agree a resolution to improve people's experiences and advising care workers of their responsibilities.

Is the service well-led?

Our findings

At our last inspection of 22 January 2015 the service was rated Good. At this inspection we found the service remained Good.

The registered manager continued to promote an open culture where people and care workers were asked for their views of the service provided. We received positive comments about the registered manager and how they led the service. A community professional in their questionnaire stated, "[Registered manager] in particular has been very approachable, helpful and responsive." People we spoke with were complimentary about the service and how it was led. One person told us, "The organisation is managed very well."

Where comments that needed attention were received from people, the service continued to address them. The service contacted people by telephone to check that they were happy with the service provided. Where people raised any changes in their care needs we saw that care reviews were planned and held to ensure that care records were updated. One person's relative told us, "They [office staff] call every so often and check that we are okay and happy." People also completed satisfaction questionnaires, the most recent completed in August 2017 by people using the service identified positive comments. The registered manager had completed an analysis of these and where improvements were needed, actions were taken. For example, sending information to people and checking their understanding of their rights.

People using the service were encouraged to feed back to the service about the performance of their care workers. Their comments contributed to the employee of the month award and the annual high flyer award. We saw records which showed that people had called the service's office to nominate care workers when they felt that they had delivered good care. This system showed people that their comments were valued and also demonstrated to care workers that their good work was recognised. Records of nominations included comments such as, "I would like to nominate [care worker] for carer of the month as [care worker] is always cheerful, caring and punctual...we always look forward to [care worker's] visits." One person told us that they were made aware that the service had, "Organised some sort of social event [for the care workers]. It is very commendable, they [the service's management] are intent on bonding the [care workers] together."

Care workers told us that they felt supported by the service's registered manager. They were committed to the service's aims and objectives and providing people with good quality care at all times. This was evident in the care worker's understanding of reporting concerning practice, known as whistleblowing. The registered manager told us how whistleblowing concerns were addressed by advising care workers of their responsibilities in caring for people.

The minutes of meetings showed that care workers suggestions, for example, how they supported people, were valued and listened to. For example, the registered manager had completed profiles of people which provided care workers with a summary about the person, such as their specific needs and their preferences. This was to ensure that care workers were aware of people's needs before they visited people.

The registered manager told us how they kept their knowledge updated and researched any changes in the care industry to ensure that they were up to date. For example, regularly checking the Care Quality Commission website for any changes in how the service was regulated.

Care workers were observed by senior staff in their usual work practice to check that they were meeting the required standards when caring for people. The service continued to carry out a programme of audits to assess the quality of the service and identify issues. These included audits on medicines management, health and safety and the care provided to people. We saw that these audits and checks supported the registered manager in identifying shortfalls and take action to address them. This meant that the service continued to improve.