

Anglian Care and Domestic Support Services Limited

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Inspection report

1 Darthill Road March Cambridgeshire PE15 8HP

Tel: 01354705012

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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

Anglian Care and Domestic Support Services Limited, provides personal and domestic care and support in people's own homes. At the time of the inspection 52 people were 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. At the time of our inspection 45 people were receiving a regulated activity.

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

The provider had improved their governance systems since the previous inspection in August 2018. The management team completed regular checks and monitoring of the service. People's risks to their health and welfare were re-assessed when their needs had changed, care plans were reviewed and revised appropriately to ensure improvements were sustained.

People received safe and effective support from staff who received appropriate training and support. The provider had a robust recruitment process and staff received training in how to recognise and report abuse. People told us they received good support and care in areas such as health needs, medicines management and meals.

People were supported by staff to take their medicines safely where required. Staff promoted people's choice and independence. People were involved with decision about their care and support.

People and relatives were happy with the care provided by Anglian Care staff. People told us the care staff were kind, caring and compassionate. People's care was tailored around their identified needs. This was reviewed and updated when required. People had the opportunity to express their views and had developed caring relationships with staff.

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

Rating at last inspection and update

The last rating for this service was Requires Improvement. (last report published August 2018)

The provider completed an action plan after the last inspection to show what they would do and by when to

improve. At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

Why we inspected

This was a planned inspection based on the previous rating.

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.

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.	



Anglian Care and Domestic Support Services Limited

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

The inspection was undertaken by one inspector.

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 person is also the provider for Anglian Care and Domestic Support Services Limited. This means that they 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 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 27 August 2019 and ended on 20 September 2019. We visited the office location on 16 September 2019.

What we did before the inspection

The provider was 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. We reviewed information we had received about the service since the last inspection. We sought feedback from professionals who work with the service. We used all of this information to plan our inspection.

During the inspection

We spoke with five people who used the service and two relatives about their experience of the care provided. We spoke with five members of staff, this included the registered manager and the care manager. We spoke with one health care professional.

We reviewed a range of records. This included two people's care records and medication records. We looked at three staff files in relation to recruitment and a variety of records relating to the management of the service.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at training data and quality assurance records.



Is the service safe?

Our findings

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

At the last inspection this key question was rated as Requires Improvement. At this inspection this key question has now improved to Good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People felt safe at the service. One person told us, "They make me feel comfortable, staff are really lovely"
- Staff had a good understanding of safeguarding and reporting concerns. One staff member told us, "I would always report any concerns and document them."
- Staff received safeguarding training and safeguarding was discussed with staff in supervisions.
- There were effective safeguarding systems in place to make sure people were protected from the risk of harm or abuse. Staff had access to external professional telephone numbers such as social services and were aware of how to escalate concerns if required.

Assessing risk, safety monitoring and management

- People had appropriate risk assessments in place, these were reviewed to ensure people's changing circumstances were risk assessed. Staff received appropriate training and competency assessments to ensure people's needs were met.
- People's risk assessments contained guidance in how to mitigate risks in areas such as moving and handling, medication and other identified risks to people's well-being.

Staffing and recruitment

- Staffing levels met the needs of people using the service. People and relatives told us they felt there were enough staff to meet people `s needs. One person said, "The service is really good, the staff turn up on time."
- The provider regularly audited the time sheets to ensure people received their calls on time.
- Safe and effective recruitment practices were followed to help ensure staff were of good character, physically and mentally fit for the roles they performed.

Using medicines safely

- People's medicines were managed safely. We noted that medicine administration processes were completed in accordance with good practice. Medicines records were completed accurately. Staff received appropriate training. This helped to ensure that people received their medicines as prescribed.
- Where issues were identified, the registered manager took actions to ensure staff understood and followed best practice.

Preventing and controlling infection

• Staff received infection control training and wore personal protective equipment such as gloves. Staff understood the importance of good hand hygiene practice to aid infection control.

Learning lessons when things go wrong • The registered manager took appropriate actions following incidents and learning was shared with staff. Risk assessments and care plans were reviewed after accidents and incidents to ensure measures in place were effective.



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

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 undertook pre-assessments prior to care delivery starting to establish if people's needs could be fully met and worked with people and their families if appropriate to develop their care plans.
- Assessments included people's choices and preferences.
- Care plans were regularly reviewed to help ensure if people's needs changed this was appropriately reflected in care records as well as in the care they received.
- People were happy with the care and support they received. One person said, "Staff are wonderful, I have had a great experience. I would recommend them to anyone."

Staff support: induction, training, skills and experience

- Staff were positive about their induction into their role and told us that it involved lots of training and shadowing more experienced staff members. One staff member said, "I have done my induction, very professional and informative. I met with other staff and we complete regular training."
- Staff told us training included moving and handling, administration of medicines, and safeguarding people.
- Staff confirmed they received regular supervisions and competency assessments to ensure they remained competent in their job roles.

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

- People were supported with food if appropriate. One person said, "I needed support with my breakfast and tea."
- People were supported with their meals by staff where required to ensure people remained independent.
- Information about the care and support given was documented in people`s care plans by staff appropriately.

Staff working with other agencies to provide consistent, effective, timely care

- Staff and the management team worked well with other professionals to ensure that people received appropriate care.
- We spoke with one professional who confirmed they were very happy with the care and support provided by the staff from Anglian care. They confirmed that staff had enabled one person to remain in their own home independently. They also told us that Anglian Care had made a real positive impact on the way the person lived their life.

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.

- We found that the registered manager was documenting people's capacity needs and working with families and people to ensure people were safe and decisions made in their best interest. However better documentation was required. The registered manager had implemented this with immediate effect.
- People told us staff always asked for their consent before they supported them with their daily care.



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.

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same. 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 and their relatives told us the staff team were kind and caring. One relative said, "I couldn't ask for anything more, they are a good company." One person told us, "I have regular staff who visit me. We have a good giggle and a good laugh. We swap books and I look forward to their visit. We have a good chat and they always ask me is there anything else they can do."

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

- People and relatives told us they were involved with decisions about their care. One person said. "Staff have spoken with me about my care and if I need any changes, I can just speak with them."
- People had the opportunity to complete annual surveys about the quality of service they received, we noted people's responses were positive about their care and support.

Respecting and promoting people's privacy, dignity and independence

- People told us that their privacy and dignity were promoted. Staff told us they communicated what they were doing and always checked they had people's consent. One person said, "Staff are very professional, can't fault them." Another person told us, "Staff are wonderful I look forward to them coming. They are lovely, and they always take time to chat."
- Staff told us they promoted people's independence. One staff member said, "We promote people to be independent, encourage them to do what they can."



Is the service responsive?

Our findings

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

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same. This meant people's needs were met through good organisation and delivery.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control

- The service responded to people's changing needs and offered a flexible service where possible. One person said, "I have their phone number and the communication is good."
- Staff supported people to access the community for shopping and to attend appointments where requested.
- People told us they received care and support as they wished.
- Care plans contained people's care needs, preferences, likes and dislikes with guidance for staff. Care plans were regularly reviewed to help ensure they continued to accurately reflect people's needs. One person said, "I am really happy with 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 told us they were able to understand information from Anglian Care. Where required staff took the time to sit down to read and discuss the policies to ensure people understood.

Improving care quality in response to complaints or concerns

- Staff were responsive to any concerns people raised.
- People told us they knew how to complain if something was not right. One person said, "I know who to contact but I haven't had a reason to."
- We found where people had raised issues these were responded to in line with the provider's complaints policy.
- We also noted in the annual surveys, a couple of people who used the service stated they were not aware of the complaints policy. The action taken by the registered manager was to ensure the team leaders discussed the policy with the people to ensure they understood what to do should they need to raise any concerns. We noted this action had been completed.
- People had also taken the time to write and compliment the staff on the service they were providing.

End of life care and support

• The service did not provide end of life care. People's preferences around this were not sought. However, staff received appropriate training in this area to enable them to correctly identify when people were nearing their end of life.



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 Requires Improvement. At this inspection this key question has now improved to 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

At our last inspection the provider's systems to monitor the quality of the service were not adequate. People's risks to their health and welfare were not re-assessed when their needs had changed, care plans were not reviewed and revised accordingly, and incidents, accidents were not analysed to identify any trends and themes that may need addressing. This was a breach of Regulation 17 of the Health and Social Care Act (Regulated Activities) Regulations 2014. Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 17.

Planning and promoting person-centred, high-quality care and support; and how the provider understands and acts on duty of candour responsibility

- The registered manager and care staff were passionate about the care provided. The registered manager said, "We provide good care, and this is really important."
- The registered manager kept up to date with current legislation around how to give the best care to people.
- The registered manager, deputy manager and team leaders discussed different topics with staff to promote staff learning and good practice. One staff member said, "[Name of registered manager] is very supportive and if you need guidance they will make time to support you."
- Staff received training to ensure staff delivered person centred care that met people's needs.
- People told us staff provided care that met their needs. One person said, "Staff are very helpful and always help with whatever you need."

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

- The registered manager and the staff understood their roles and had a good understanding of their responsibilities. Staff were aware of their rota schedules.
- Audits were routinely completed to ensure the quality of the service, any issues found were discussed and actions taken to resolve.
- The registered manager understood when to reported notifiable incidents to the proper authorities.

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

characteristics

- People and their relatives gave positive feedback about the registered manager and staff. One person said, "I am happy with the care. Staff come on time."
- Staff felt supported by the management team. One staff member said, "We have good team work. We support each other, and cover shifts when we can. It's a good place to work."
- Staff had the opportunity to express their views and received updates from the registered manager.
- Improvements had been made with the implementation of a new medicine administration record (MAR) chart to improve the way information was documented.
- There was an emphasis on improving staff skills and knowledge. The registered manager said, "We ensure the staff have the right skills needed to provide good care. And we support them to develop themselves.

Working in partnership with others

- The registered manager worked with other professionals to achieve good outcomes for people.
- We saw evidence of involvement from health care professionals and social workers to support people's needs.