

## **A&R Guardian Services Limited**

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## **Inspection report**

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## Ratings

Overall rating for this service	Good •
Is the service safe?	Good
Is the service well-led?	Good

# Summary of findings

## Overall summary

About the service

A&R Guardian Services Limited is a domiciliary care service. The service provides care and support to people living in their own homes. At the time of the inspection there were 40 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 considers any wider social care provided.

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

People and relatives told us they would recommend the service to others. People were supported by sufficient numbers of reliable staff to meet their needs. This contributed towards them feeling safe.

Risks to people had been assessed including the environment in which they were cared for. People's care plans had been personalised, provided clear guidance for staff to promote their safety and were kept under review. People were supported with their medicines safely whilst promoting maximum choice and control of their lives.

Staff recruitment processes had been strengthened. Staff training had been updated in relation to promoting people's safety and wellbeing and the infection prevention and control procedures.

The provider's business continuity plan had been updated in response to the COVID-19 pandemic and had adopted the government guidance to operate a safe service. Staff were trained in the correct use of personal protective equipment (PPE). People were informed about the actions being taken and their individual needs had been considered and kept under review.

The provider had made improvements to the quality assurance systems and processes. The changes to the managerial structure provided clearer responsibilities to monitor the quality of service and to drive improvements. People's views about their care and the service were sought in a variety of ways. Systems were in place to monitor people's care, staff performance and safety including incidents, accidents and complaints so action could be taken. The provider had invested in electronic call monitoring system and care planning, accessible to staff using their hand held devices and provided real-time monitoring.

People spoke positively about the registered manager who they found to be responsive, supportive and approachable. The registered manager and provider were aware of their responsibilities in meeting their legal obligations. They worked in partnership with health care professionals and local authorities responsible for monitoring people's packages of care.

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

#### Rating at last inspection

The last rating for this service was requires improvement (published 26 March 2020).

We carried out an announced comprehensive inspection of this service on 17 February 2020. A breach of legal requirement was found. At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

#### Why we inspected

We undertook this focused inspection to check improvements had been made and that they now met the legal requirements. This report only covers our findings in relation to the Key Questions of Safe and Well-led which contained the requirements.

The ratings from the previous comprehensive inspection for those key questions not looked at on this occasion were used in calculating the overall rating at this inspection. The overall rating for the service has changed from Requires Improvement to Good. This is based on the findings at this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for A&R Guardian Services Limited on our website at www.cqc.org.uk.

#### 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 well-led?	Good •
Is the service well-led? The service was well-led.	Good



# A&R Guardian 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

This inspection was carried out by two inspectors.

#### Service and service type

This service is a domiciliary care agency. It provides personal care to people living in their own home.

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

This inspection was announced. We gave the service 48 hours' notice of the inspection and provided an explanation as to the inspection process, and to assure ourselves effective implementation of COVID-19 guidance when visiting the office.

The inspection activity started on 16 December 2020 and ended on 18 December 2020. We visited the office on 17 December 2020.

#### 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 authorities. We used all this information to plan our 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 seven people who used the service and seven relatives about their experience of the care provided. We spoke with six members of staff including the nominated individual, registered manager and care workers. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

We reviewed a range of records. This included four people's care records and multiple medication records. We looked at two 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, policies and procedures, and quality assurance records. We sought additional clarification in response to the information we had reviewed and feedback received from people and their family members. We also spoke with the brokerage team at the local authority responsible for commissioning packages of care.



## 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.

### Staffing and recruitment

- Staff recruitment process had been strengthened. Staff records contained a full employment history and evidence of a satisfactory references and a Disclosure and Barring Service check.
- Staff spoke about the training completed as part of their induction and how they had worked alongside experienced staff until they were confident and competent to support people. All staff completed regular refresher training related to people's care, enabling them to meet people's care needs whilst promoting their safety, welfare and independence.
- There were enough staff to support people. A person said, "I have the same carer in the week and a different carer at the weekends. They've never been late as the manager is very strict about time-keeping."
- Continuity of care was promoted as each person was supported by a dedicated staff team. Staff told us they had sufficient time to provide the care people needed. Rotas were planned and any changes communicated with staff and people in a timely way. Staff punctuality was monitored using the new electronic system so action could be taken.

#### Using medicines safely

- People were supported with their medicines when they or their family members were unable to do so. A relative told us they felt assured that their family member was taking their medicines as prescribed as they checked the dosset box and records completed by staff.
- Staff told us they were fully aware of the provider's medication policy and procedure, they had been trained in the safe management of medicines and their competency was checked. Staff demonstrated they followed the correct procedure when supporting people with their medicines and the action taken when people declined to take their medication.
- People's care plans provided clearer guidance for staff to follow as to the level of support needed. The registered manager, as part of their quality assurance process, carried out audits and checks to confirm people had been supported with their medicines.

Systems and processes to safeguard people from the risk of abuse

- People's wellbeing and safety was promoted. They told us they felt safe with the staff and the care provided. A relative said the registered manager provided additional care visits during this pandemic to ensure their family member had enough to eat and drink.
- Staff received safeguarding training to protect people from the risk of abuse and how to report abuse. Staff were confident the registered manager would act on concerns about people's safety and knew they could report concerns to the Care Quality Commission (CQC).
- Policies and procedures in relation to safeguarding and whistleblowing were in place which staff could

access. The registered manager was aware of their responsibility for making safeguarding referrals and reporting concerns to CQC.

Assessing risk, safety monitoring and management

- People said they felt safe when staff provided care they needed. A person said, "I feel safe. Staff know how to use my equipment [used to move them]." A relative said, "We're really happy with our two regular carers; [named] because they are reliable, on time and friendly."
- People and their relatives were happy with how risks were managed whilst enabling them to maintain safety and independence as far as possible. Risk associated with people's care, support and environment were assessed and kept under review. Measures to reduce risks were detailed within people's care plans. This included the use of equipment to support people with personal care tasks such as a hoist.
- Staff updated the electronic monitoring and care planning system to identify concerns about people's health and care. This enabled the registered manager and the office based staff to identify when additional support was needed.

#### Preventing and controlling infection

- People and relatives told us they were contacted via letter and telephone, at the beginning of the COVID-19 pandemic and had been provided with information about the actions being taken including the use of personal protective equipment (PPE), such as face masks, gloves and aprons. A box containing PPE was kept in people's home for staff to use and stocks were replenished regularly. A relative said, "The manager visits to top up the box with PPE."
- Everyone we spoke with said they had complete confidence in staff as they all wore the required PPE, washed their hands and cleaned surfaces to reduce the risk of cross infection.
- The provider had a COVID-19 contingency plan, outlining the plans to ensure essential care continued to be provided based on people's individual needs through a risk based approach. People were involved in this process.
- The infection prevention and control policy and procedure had been updated. Staff were trained in this area which included the correct use of PPE and monitoring the symptoms of COVID-19. Staff had sufficient supply of PPE, and could access regular COVID-19 testing.

#### Learning lessons when things go wrong

- People's care plans were kept under review to ensure staff had clear guidance to follow.
- A system was in place to analyse falls, accidents and incidents so action could be taken to promote people's safety. This information was used to inform the review of people's needs and any leaning was shared with the staff team and to drive improvements to the service.



## 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 our last inspection the provider had failed to fully implement effective quality assurance systems to monitor the quality and safety of the service. This was a breach of regulation 17 (Good Governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of Regulation 17. 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

- Improvements had been made to the quality assurance systems and processes which have been used effectively to identify shortfalls. For example, we saw swift action had been taken to ensure staff completed people's care records in full and accurately to confirm the care and support provided.
- The registered manager understood their legal obligations, they notified the Care Quality Commission (CQC) about events they were required by law and had displayed the last inspection rating on their website and within the service.
- People and relatives knew the registered manager and provider by name as they were involved in providing care and support. People told us communication with them was very good.
- People were involved and remained at the heart of their care. Care plans, both paper and electronic, were personalised to reflect people's individual preferences and diverse needs, which staff could access via their hand held devices.

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

- People's views were mixed as to whether they received a copy of the staff rota, although the majority said they received care from the same group of staff. The new electronic call monitoring system had replaced the paper records in response to COVID-19, to reduce the potential spread of infection.
- Staff received the training they needed and were well supported with regular supervisions and feedback on their performance. Staff meetings were held regularly in a safe small group.

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 and the provider understood their role and responsibilities. Notifiable incidents had been reported to CQC and other agencies such as the local safeguarding authority. The duty of candour requires the provider to be open and honest with people when things go wrong with their care, giving people support and providing truthful information and a written apology.

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

- People and relatives said their views about the quality of care provided were sought regularly. A person said, "Management seek my views. They supplied a written survey and I had a visit from the manager." We saw the results of the recent satisfaction survey were positive.
- People said communication with the registered manager and the office-based staff was good.
- A relative said, "The manager has told me to raise concerns and to say if there's a problem so it can be addressed." Concerns and complaints reported verbally, in writing and electronically were recorded and investigated. We saw examples of how concerns had been addressed and communicated with the complainant via email and text about the actions taken. The registered manager assured us a formal written response would be sent to complainants with immediate effect.
- Staff told us the registered manager was approachable and supportive. A staff member said, "I've got confidence in the manager, she understands what it means to care. She wants us all to provide the best care we can give."

#### Continuous learning and improving care

- The provider had made improvements to the service. For example, the changes to the management structure provides a clear oversight and responsibilities in relation to monitoring the quality of care and the service.
- The business continuity plan took account of the COVID-19 pandemic to ensure people continued to receive the care they needed. Staff training was based on good practice to ensure safe care and support was provided, and to comply with regulations.
- The provider had invested in the service. A new electronic call and care planning system was implemented in December 2020. This enabled staff to have access to real-time rotas, people's care plans and could request urgent support in an emergency using a hand held device. Additional vehicles had been purchased to transport staff, which had improved punctuality.
- People, relatives and staff spoke positively about the ease of contacting the office based staff, the registered manager and the provider. A relative said, "They are kind and caring towards my [family member] and always very respectful. I would recommend them without hesitation."

#### Working in partnership with others

- The registered manager has continued to maintain their knowledge, kept their professional registration up to date, and work in partnership with health care professionals and agencies.
- We received positive feedback about the registered manager, provider and staff, and the quality of care provided from the local authority with the responsibilities for monitoring the packages of care. They told us the registered manager was responsive and has continued to provide care and support to people safely. This has been achieved through effective implementation of policies, procedures and guidance in response to the COVID-19 pandemic.