

Agrade Community Care Services Limited

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Inspection report

Unit 128, Coney Green Business Centre
Wingfield View, Clay Cross
Chesterfield
Derbyshire
S45 9JW

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13 March 2019

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Website: www.agradecare.co.uk/

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:

Agrade Community Care Services is a domiciliary care service providing personal care to people in their own homes in and around the Chesterfield area. The service is registered to provide personal care. Not all people who used the service received personal care. At the time of the inspection the service was providing personal care to 28 people.

People's experience of using this service:

Feedback about the service from people and their relatives was positive. People received support which was tailored to their needs, delivered by staff who treated them with respect and understood their goals and aspirations. People and their relatives told us they felt the care staff were gentle and caring. People received care and support in a way which suited them. Staff we spoke with were passionate about this work.

The provider ensured care was delivered in a safe way. People were protected against the risk of abuse. Risks were assessed and well managed. Staff had received appropriate training in relation to health and safety and the prevention and control of infection. Staff followed protocols for the safe management of medicines. Staff underwent pre-employment checks to make sure they were of good character and suitable to work with adults and children.

Where part of their care package, people were supported in eating a healthy diet and maintaining good health. People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service supported this practice. Staff told us they received training and support to make sure they had the skills and knowledge to carry out their role effectively. Staff received training and support that was effective and equipped them for their roles.

People's feedback was sought, so that they could contribute to ongoing improvements within the service. The registered manager fostered a culture of openness and continuous improvement. There was effective communication between staff and managers. Feedback from other professionals, such as social workers and health care professionals was positive.

More information is in the full version of the report

Rating at last inspection:

At the last inspection the service was rated Good (29 June 2016).

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

Why we inspected:

This inspection was part of our scheduled plan of visiting services to check the safety and quality of care people received.

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 was safe.

Details are in our Safe findings below.

Good ●

Is the service effective?

The service was effective.

Details are in our Effective findings below.

Good ●

Is the service caring?

The service was caring.

Details are in our Caring findings below.

Good ●

Is the service responsive?

The service was responsive.

Details are in our Responsive findings below.

Good ●

Is the service well-led?

The service was well led.

Details are in our Well Led findings, below.

Good ●

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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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Inspection team:

The inspection was carried out by an adult social care inspector.

Service and service type:

This service is a domiciliary care agency. It provides personal care to people living in their own homes. Not everyone using the service receives regulated activity; CQC only inspects the service being received by people provided with 'personal care'; help with tasks related to personal hygiene and eating. Where they do we also take into account any wider social care provided.

The service 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 this inspection visit to be sure that managers would be available.

What we did:

Before the inspection we reviewed information we held about the service, which included a review of the previous report for this service and a review of notifications they had sent us. A notification is information about important events which the provider is required to send us by law.

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. The PIR also provides data about the organisation and service. We reviewed this information as part of our inspection planning.

On 13 March 2019 we visited the office location to see the registered manager and staff; and to review care records and policies and procedures. At the inspection visit we looked at four people's care plans and records, three staff member's personnel files and at the provider's audits and quality assurance reports. We spoke with two members of care staff and a care coordinator, the registered manager, who is a director of the company, and another company director who jointly manages the service.

After the inspection visit we spoke with three people who used the service and, as we were unable to gather some people's views by telephone, we spoke with three people's relatives and representatives. We received feedback from five other professionals who had some involvement with the service. This included social workers and specialist healthcare staff.

Is the service safe?

Our findings

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

People were safe and protected from avoidable harm. Legal requirements were met.

Systems and processes to safeguard people from the risk of abuse

- People and their relatives told us they felt the service was safe.
- The service was provided to adults and children and staff received appropriate training to understand and properly apply safeguarding policies and procedures.
- The provider followed local safeguarding reporting protocols and had systems in place that helped reduce the risk of harm to people.
- Staff were aware of their role in safeguarding people.

Assessing risk, safety monitoring and management

- Risks relating to people's care and support were assessed and appropriately managed.
- People's care records included risk assessments which were used to assist in the reduction of potential risks.
- People's risk assessments were regularly monitored, reviewed and updated to keep pace with people's changing needs.
- Staff and managers were aware of how to manage risk within the service.

Staffing and recruitment

- People and their relatives told us their family members consistently received care from the same staff. This helped to build positive relationships and provided consistency of support. One person said, "I have team of staff who I know. The odd time, due to staff being ill, I get someone I don't know so well, but they [office staff] always let me know who it will be."
- Safe recruitment procedures helped make sure people received care and support from staff who were of good character and suitable to work with adults and children.
- The recruitment process included checks of applicants' work history, references, Disclosure and Barring Service (DBS) checks.
- One social worker told us, "I have been really pleased with the service. When setting up the package they were helpful and responsive, they went out to meet the client and introduce themselves. Since starting, each week they provide the client with a rota of which carer is coming on which day for the next week."

Using medicines safely

- People said they were happy with the support they received to take their medicines.
- Where possible, staff promoted people independence. For instance, one person said, "I manage my own

medication. Staff remind me."

- People's plans included information about the medicines they were prescribed and clear guidance about the support they required from staff.
- Staff received training in medicines and followed protocols for the safe management of medicines.
- Managers carried out audits of medicines records to check people received their medicines as prescribed.
- Staff were subject to regular checks, when managers observed their practice when dealing with medicines, to make sure they were competent and followed good practice guidelines.

Preventing and controlling infection

- People and their relatives said staff used disposable gloves and aprons when needed. This helped prevent the spread of infection.
- Staff received training in infection prevention and control and showed a good awareness of good practice.
- Managers regularly observed staff's practice, to make sure they followed infection control guidelines.

Learning lessons when things go wrong

- Accidents and incidents were reviewed by the managers to look for trends and lessons learned, helping to reduce the risk of reoccurrences.
- The registered manager encouraged staff to reflect and consider lessons learnt after any accident or incidents.

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

- People's care and support was planned in partnership with them.
- People's needs and preferences were assessed and staff had time to get to know people before providing their care.
- People were happy with the way care and support was assessed and delivered. For instance, one person's relative said, "We usually have the same staff and they have got to know [family member] and are aware of [family member's] needs." One person said, "[Staff] arrive on time and stay the right times. You can guarantee that."
- Some people had complex physical and/or mental health needs and these, and the care and support they received were well reflected in people's plans.
- Support plans were person-centred. This meant care was planned and delivered in line with people's individual needs.
- Staff we spoke with had a good knowledge of the needs of the people they supported.

Staff support: induction, training, skills and experience

- People were happy with staff's training and competence. For instance, one person's relative said, "The staff are well trained. They are always doing training."
- Staff we spoke with had undergone a comprehensive induction programme and, where necessary, had received additional training specific to the needs of the people they were supporting.
- Staff also said they had been encouraged, supported and funded to undertake additional training to enhance their skills.
- Staff praised the standard of support they received from their managers and said they had regular opportunities to review their individual work and development needs in one to one staff supervision sessions and appraisals. The records we saw confirmed this.

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

- Where people needed support with food and drink they were supported to have a balanced diet, which took their preferences and dietary requirements into consideration.
- People were happy with the support they received with meals and drinks.
- People's support plans included their needs and preferences in relation to food and drink.

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

- People and their relatives told us the staff were good at helping people to gain access to services, such as health care.
- Advice provided by healthcare professionals, such as occupational, and speech therapists was incorporated into people's care and support plans, to help staff to provide care and support which met people's health needs
- One person's representative said, "[Person's] health has improved since receiving support from Agrade, because the staff have built good relationships with [person] and are able to encourage a diet suitable for their needs."
- One social worker told us, "[The service] have alerted me when the client has received letters that I need to be aware of and are flexible in arranging carers to attend health related appointments."

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 with appropriate legal authority. The service provides support to people within a community setting therefore, any decision to deprive a person of their liberty within the community must be legally authorised by the Court of Protection.

We checked whether the service was working within the principles of the MCA, whether any restrictions on people's liberty had been authorised and whether any conditions on such authorisations were being met.

- We found that people's capacity to make decisions was assumed unless there was evidence to suggest otherwise.
- The service obtained and evidenced people's written consent to their care.
- Where people did not have capacity to make a particular decision, decisions were made in people's best interests in line with the MCA.
- Staff had received appropriate training on the MCA.
- The staff we spoke with gave good examples of how they gained people's consent when providing them with day to day 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

People were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; equality and diversity

- People and their relatives gave positive feedback about the staff. One person's relative said, "They [staff] are gentle and kind." Another relative said they were "[Family member] really likes [staff member's name]."
- Staff received training in equality and diversity, and records showed that people's equality, diversity and human rights were considered when their care and support was being assessed and planned.
- Staff promoted equality and human rights in how people from different backgrounds were supported. For example, people who identified as lesbian, gay, bisexual or transgender. The inclusive and supportive approach of the service was evident throughout people's records.
- All members of the team we spoke with showed a passion for their roles and spoke about people with warmth and respect.

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

- People were involved in making decisions about their care.
- The records we saw showed that people's views were central to how their care was assessed, planned, and delivered.
- Those who were important to people, such as close relatives were involved, where appropriate. People's relatives confirmed they and their family member had met with the staff to put together their family member's care plan.
- When managers carried out checks during people's care calls, they asked the person for their views about how their care and support was being delivered.

Respecting and promoting people's privacy, dignity and independence

- People's plans placed a strong emphasis on treating people with dignity, respecting their privacy and encouraging people to be as independent as possible.
- Care staff we spoke with gave good examples of how they promoted people's privacy, dignity and independence.
- Managers checked whether staff members upheld people's privacy and dignity when they observed staffs' practice during spot checks.

Is the service responsive?

Our findings

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

People's needs were met through good organisation and delivery.

- The care and support plans we looked at showed each person's needs and preferences were taken into account.
- Staff we spoke with gave good examples of how they promoted choice when caring for people, to enable people to have control over the care they received.
- Managers obtained people's views of the service during their observations of staffs' practice.
- One person's representative said, "Independence is important to [person] The staff are aware of that and promote that."
- A social worker told us, "All care staff have a good understanding of working with [the person's specific needs] and are person centred in their approach.
- A health care professional told us, "I have no concerns about the care provided by Agrade, the [person using the service] is always very complimentary about the support. I have met with a couple of the team and they have always been friendly and approachable. They work well with health and social care and offer an above and beyond attitude in supporting the [person]. They communicate well and involve us with any concerns at an appropriate time frame. They also work well with family and friends, which is paramount in providing a safe care package."

Improving care quality in response to complaints or concerns

- The provider had clear policies and procedures about receiving and managing complaints.
- Information about how complaints had been dealt with showed complaints were taken seriously, thoroughly investigated, analysed for themes and patterns, and used to improve the service.
- Feedback from people and their relatives was that they knew who to complain to. They said staff and managers were very approachable and they would be confident to raise any concerns, should they need to.

End of life care and support

- The service provided care to people at the end of their life. Their needs and wishes for this time of their lives were set out in their care plans.

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

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

- Everybody we spoke with felt the service was managed well and had a good opinion of the management team.
- Staff had clear job descriptions for their specific roles.
- Staff we spoke with had a good understanding of their roles and responsibilities.
- The registered manager was knowledgeable about regulatory requirements and their responsibility in ensuring they were complied with.

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

- The provider had a clear set of principles and values. These included enabling choice, encouraging people's independence and individuality. The service placed an emphasis on offering a reliable service with continuity of care, respecting people's rights and ensuring care delivery was non-discriminatory.
- Staff we spoke with answered our queries in an open, helpful and professional way. They demonstrated a good understanding of the provider's values.
- The people and relatives we spoke with said care was tailored to people's individual needs.
- The provider had systems in place to monitor the quality and safety of the service.
- Care was audited by means of spot check observations and audits of documentation.
- Actions were taken to address any shortfalls or areas for improvement identified by these audits.

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

- People were asked to complete a survey regarding their satisfaction with the service and their feedback was used to improve the service.
- It was evident that the management team fostered a culture of openness and there was effective communication between staff and managers.
- Staff told us they felt valued and supported by the management team, who sought and valued their views.
- Staff meetings took place.

Continuous learning and improving care

- The provider was keen to promote a learning culture and staff we spoke with were very appreciative of the individual training opportunities they said managers had organised for them.
- There was a culture of learning from incidents, complaints and feedback, which staff contributed to.
- Managers told us they encouraged staff development and training, and records of staff supervision showed this.

Working in partnership with others

- The service worked well in partnership with other organisations to make sure they met people's needs.
- We received positive feedback about the service from other professionals. For instance, one social work professional said the service had had a very positive effect on the life and health of one person who used the service. Another social worker told us, "I am working with two clients who have Agrade as their support agency at present. They have been flexible, supportive and joint worked with myself and the other professionals and agencies involved. The feedback from the clients has been very positive about the carers and the company.
- We were told of examples of the service working with others to make sure people's whole care and support package helped them to remain in their own homes and maintain their independence.