

Agincare UK Limited

Agincare UK Leominster

Inspection report

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service caring?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Agincare UK Leominster is a care at home service providing personal and nursing care to 159 people aged 65 and over at the time of the inspection.

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.

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

People were safe and supported by staff who cared for them. Staff recognised different types of abuse and how to report it. The registered manager understood their safeguarding responsibilities and how to protect people from abuse. Potential risks to people's health and wellbeing had been identified and were managed safely. People, and where appropriate, their relatives, had been involved with decisions in how to reduce risk associated with people's care. There were sufficient staff to keep people safe and meet their needs. People's medicines were managed in a safe way. Safe practice was carried out to reduce the risk of infection.

People were supported by staff who treated them well. Staff treated people as individuals and respected the choices they made. Staff treated people with respect and maintained their dignity.

All people, relatives and staff felt the registered manager had made positive improvements to the way the service was run. The registered manager listened to people and staff's views about the way the service was run. The provider had put checks into place to monitor the quality of the service provision.

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 good (published 23 November 2018).

Why we inspected

The inspection was prompted in part due to concerns received about staff culture. A decision was made for us to inspect and examine those risks.

We found no evidence during this inspection that people were at risk of harm from this concern. Please see the safe, caring and well-led sections of this full report.

We received concerns in relation to staff culture. As a result, we undertook a focused inspection to review the key questions of safe, caring and well-led only.

We reviewed the information we held about the service. No areas of concern were identified in the other key

questions. We therefore did not inspect them. Ratings from previous comprehensive inspections for those key questions were used in calculating the overall rating at this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Agincare UK Leominster 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 re-inspection 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 caring?

Good ●

The service was caring.

Details are in our caring findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

Agincare UK Leominster

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 one inspector.

Service and service type

This service is a domiciliary care agency. It provides personal care to people living in their own houses and flats and specialist housing.

This service provides care and support to people living in specialist 'extra care' housing. Extra care housing is purpose-built or adapted single household accommodation in a shared site or building. The accommodation is bought or rented and is the occupant's own home. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for extra care housing; this inspection looked at people's personal care and support service.

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 unannounced.

Inspection activity started on 05 July 2021 and ended on 13 July 2021. We visited the office location on 08 July 2021.

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 authority and professionals who work with the service. 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. We used all of this information to plan our inspection.

During the inspection

We spoke with four members of staff including the, registered manager, field supervisor, care coordinator and the administrator. 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. Along with a variety of records relating to the management of the service, including staff and service user surveys.

After the inspection

We spoke with five people who used the service and two relatives about their experience of the care provided. We spoke to three care staff including a care support worker, senior care worker, and team leader. We looked at the providers quality assurance audits and documentation relating to work completed with the community. We continued to seek clarification from the provider to validate evidence found.

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 good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- All people we spoke with told us they continued to feel safe by the staff who supported them. One person said, "I feel very safe with the staff who come here."
- Relatives also felt their family members were kept safe from harm. One relative told us how staff had guided them to other services to ensure the right equipment was in place to keep the person safe.
- Staff demonstrated a good understanding of the different types of abuse and what approach they would take in the event of any concerns.
- The registered manager understood their responsibilities regarding the action to take to protect people from harm.

Assessing risk, safety monitoring and management

- People's individual care and support risks had been assessed and care plans had been developed with the person, and/or their family involved. The risk assessments were up to date with people's current care and support needs.
- People told us staff understood their care and support needs and had the help and support from staff when they needed them. One person explained how staff understood what they could do themselves, and what support they needed from staff to live independently, but also remain safe.
- Relatives felt their family member was safe and had been involved in conversations with the staff team about how to maintain the person's safety.
- Staff knew people well and were aware of people's individual risks and how best to support them. There was good communication between the staff supporting people and the staff who worked in the office. For example, where staff felt a person needed more time for support, this was fed back to the office staff. A relative confirmed that extra time had been given for a care call, so their needs could be met fully.

Staffing and recruitment

- People told us they had support from regular staff, who arrived at their expected time that was in line with their preference. Two people told us that if staff were running a little late, they were always notified.
- A relative confirmed there was always two staff to support their family member with their care, as required to keep them safe.
- Staff told us there were sufficient numbers of staff and they had time to meet people's needs. Staff also confirmed they had regular routes and knew the people well.
- The registered manager carried out safe recruitment practices before employing staff to work at the service, such as reference checks and a Disclosure and Barring Service (DBS) which helps employers make safer recruitment decisions..

Using medicines safely

- People who required assistance with their medicines told us staff supported them well, for example, ensuring they took the right medicine at the right time.
- Staff received training to support people to have their medicines safely and helped people to collect their medicines.

Preventing and controlling infection

- People and relatives told us staff followed safe practice to protect them from risk of infection.
- All people we spoke with confirmed staff wore their Personal Protective Equipment (PPE) to keep them safe.
- Staff confirmed they had adequate supply of PPE and had relevant training to ensure they followed safe infection control practices.

Learning lessons when things go wrong

- The management team completed checks to ensure that staff were providing care and support in line with best practice. Senior staff would complete care calls and worked alongside staff to ensure a good quality of care was maintained.
- Where incidents had taken place, these were reviewed so that learning could take place to prevent them from happening again.

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 were treated as individuals and staff upheld their protected characteristics. One person told us, "I just think of them as someone I can turn too."
- Relatives spoke highly of the staff. One relative told us that when the care package started for their family member, it was a great relief, they continued to tell us how staff had settled in well, and they were "able to have lots of laughs and banter."

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

- People were able to speak with staff about their care needs and felt listened to and involved in the decision-making process.
- Relatives were involved and felt their views were listened to and respected about the care and support needs of their family member.
- Staff recognised what was important to people and ensured they supported them to express their views and maintain their independence as much as possible.

Respecting and promoting people's privacy, dignity and independence

- People told us they were treated in a dignified and respectful. One person said, "They are very good to me. They are first class." While going onto say how staff paid attention to detail, in supporting them to live a well in their home.
- People shared examples of how staff promoted their independence, for example, with maintaining their personal care or managing chores around their home.
- Relatives confirmed their family member were treated well by staff and their privacy was maintained.
- Staff told us they respected people's privacy by ensuring information about their care and support was only shared with their consent.

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 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.

Working in partnership with others

- The registered manager and their staff team worked with people, relatives and healthcare professionals to provide the best outcomes for people. For example, Agincare had supported the Local Authority response at the beginning of the pandemic, to provide care and support to people who had been discharged from hospital to a temporary step-down facility. The Local Authority told us the service was a valued provider partner who provide a high standard of consistent of care.
- Agincare involved themselves with the local community, such as donating food and toiletries to the local food bank, raising money for charity and holding a Christmas event for the local children in 2019.
- The registered manager told us how some of the people they supported enjoyed gardening, so an allotment plot had been secured, so people could use this area. While this had not been utilised as planned due to the pandemic, they were hoping to open up the area to people over the coming months.
- The registered manager worked in partnership with external agencies to ensure they kept up to date with changes within the health and social care sector.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics;

- People and relatives we spoke with knew the registered manager and found them approachable and responsive to their requests.
- Staff told us there was a good morale and a stable staffing team who worked well together. Staff felt the registered manager was approachable and listened to their ideas or suggestions for the way the service was run.
- There was a good approach to teamwork. The management team had good oversight of the care and support people needed and supported care staff with care calls. Management staff worked with care staff to help continue meet people's needs. Communication was effective between each staff group and each shift to ensure people received a consistent and co-ordinated service.
- Staff felt valued and appreciated for the work they did. They were proud to work at Agincare and of the positive outcomes they achieved for people.
- The registered manager was supported by the provider, who listened and acted upon their requests.

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; Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

- People and relative's felt the service continued to be well run; they all felt that if they had any concerns or queries, the registered manager would address these promptly.
- Staff were clear about their roles, and the values upheld by the provider and registered manager. The registered manager ensured they continued to promote a culture that delivered good quality care.
- The provider monitored performance of staff through supervisions, spot checks of staff practice and sharing information in team meetings to ensure all staff were consistent in their approach to the care and support provided.
- Checks of care records and medicines took place to ensure the paperwork reflected people's good quality care. Where shortfalls were identified, the registered manager addressed this with their staff team to drive improvement.
- The registered manager understood their responsibilities to be open and transparent with people, where events had happened, we saw this was communicated with the appropriate people and external agencies.
- The provider understood their responsibilities for reporting events and incidents that were legal required to the CQC.