

Beverley Ainsworth

Ainsworth Care

Inspection report

Unit 15 Sunderland Estate, Church Lane Kings Langley Hertfordshire WD4 8JU

Tel: 01923269877

Date of inspection visit:

11 October 2018

16 October 2018

18 October 2018

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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

Ainsworth Care is a domiciliary care agency. It provides personal care to people living in their own houses and flats in the community. It provides a service to older adults. At the time of the inspection 62 people were supported by Ainsworth Care.

Not everyone using Ainsworth Care 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.

At our last inspection we rated the service good in safe, effective, responsive and well-led and outstanding in caring. At this inspection we found the evidence continued to support the rating of good there was no evidence or information from our inspection and ongoing monitoring that demonstrated serious risks or concerns.

This inspection report is written in a shorter format because our overall rating of the service has not changed since our last inspection.

Further information is in the detailed findings below

The registered manager is also the provider for this location.

The service was safe. Staff received training about safeguarding and were competent to report any concerns they had. People were supported to take their medicines safely by competent staff that were trained, and received competency checks to ensure best practice. There were enough staff to deliver people their support at a time they wanted. Safe recruitment practices were in place to employ suitable staff. Staff understood the importance of good infection control and wore appropriate equipment provided to keep people safe. □

The service was effective. New staff completed induction and training to meet people's needs effectively. Staff had access to regular supervision and meetings. The registered manager and staff worked in line with the Mental Capacity Act 2005 (MCA) principles, staff understood the importance of promoting people's choice. People care needs were assessed and reviewed. Staff supported people with their nutritional and hydration requirements.

The service was caring. Staff knew people well and staff cared for them in a compassionate way. Staff respected people's privacy and dignity and supported people to maintain relationships. Staff delivered care that was supportive, kind and caring. People were involved in deciding how their care was provided.

The service was very responsive. People`s needs were assessed to ensure people received the support they required. People and relatives where appropriate, confirmed they were involved with their care reviews.

People received support that promoted their independence and staff supported people with end of life care. People were supported to raise concerns and complaints if required. There was an electronic call monitoring system to ensure people received their calls at the appropriate time for them.

The service was well-led. Staff understood their roles and responsibilities. The registered manager was clear about their vision and values for the service and what they wanted to achieve. There were effective systems to monitor the quality of the service, identified issues were actioned. Regular surveys and quality checks were completed to ensure people's views were sought.

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 remains Good | |
| Is the service effective? | Good • |
| The service remains Good | |
| Is the service caring? | Good • |
| The service was caring | |
| Is the service responsive? | Good • |
| The service remains Good | |
| Is the service well-led? | Good • |
| The service remains Good | |



Ainsworth 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 was planned to check 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.

The inspection took place between 11, 16 and 13 October 2018. On the 11 October 2018 we visited the office. On the 16 and 18 October 2018 we contacted people and their relatives to get feedback about their experience of the service. We gave the provider 48 hours' notice of our intended inspection to make sure that appropriate staff were available to assist us with the inspection.

Before our inspection we reviewed information, we held about the service including statutory notifications relating to the service. This included the Provider Information Return (PIR). This is a form that requires them to give some key information about the service, what the service does well and improvements they plan to make.

During the inspection We spoke with three people, four relatives, five staff, the deputy manager and the registered manager.

We looked at two care plans, three employment files, quality monitoring records and other relevant documents relating to how the service operated.



Is the service safe?

Our findings

People and relatives told us they felt safe and supported by the staff from Ainsworth Care. One person said, "Yes I feel safe, I feel comfortable the staff are very kind." A relative said, "[Name] is safe, they are in good hands."

Staff were knowledgeable about signs and symptoms of abuse and how to report and escalate their concerns. Staff received training about safeguarding people from the risks of harm and abuse. One staff member commented, "I would always report any concerns to the office."

Risks to people `s well-being were identified and discussed with people and measures were in place to mitigate these risks. For example, where people required additional support to take medicines these risks were identified. Support plans gave guidance to staff, to ensure any risks were managed appropriately. One relative said, "[Name] can't remember to take [their medicine] but the staff make sure [name] has taken them."

Accidents and incidents were reviewed to keep people safe. The registered manager told us they looked for patterns that could highlight emerging risks for people. Lessons were learned, and improvements made to ensure people were safe. For example, issues found were discussed with staff and actions such as training and risk assessments put in place.

There were enough staff to meet people's needs. People and their relatives confirmed staff turned up on time. People had regular staff provide their support. One person said, "[Staff] come regularly, I have the same ones." One relative commented, "[Name and name] are my [relatives] carers. We feel they are part of the family. They always turn up on time." People and their relatives told us if staff were running late they were informed.

Safe and effective recruitment practices were followed to make sure that all staff were of good character, physically and mentally fit for the role. Appropriate checks were in place to ensure people receive safe care.

People were encouraged to manage their own medicines and where they were not able staff administered these. Staff were trained and had their competencies regularly assessed. Spot checks were carried out to ensure staff followed best practice and audits were completed to check people received their medicines as intended by the prescriber.

People were protected from the risk of infections by staff who followed correct infection control procedures. Appropriate equipment such as gloves were provided for staff who delivered personal care in people's own homes.



Is the service effective?

Our findings

People who used the service and their relatives were positive about the staff that provided care and support. One person told us, "The care is very good."

Newly employed staff completed an induction programme during which they received training relevant to their role and achieved a nationally recognised `Care Certificate`. They worked alongside other experienced colleagues until they were competent in their duties.

One staff member told us, "We have regular training and I feel I have the skills to care for people properly. I have a National Vocational Qualification [NVQ] level two in health and social care."

Staff received training in areas such as safeguarding, health and safety, moving and handling and medicines. Staff were encouraged and supported to obtain further qualifications such as the national vocational qualification in social health care.

Staff received supervisions where they had the opportunity to review and discuss their performance. One staff member told us, "I feel very supported, I have supervisions and staff meetings." Staff confirmed the registered manager was approachable. They had the opportunity to attend meetings and staff felt they had a voice. One staff member commented, "I feel [registered manager] listens."

We found that the registered manager and staff were working within the principles of the MCA where necessary and appropriate to the needs of the people they supported. Staff told us they obtained people 's consent before they offered any support. One staff member said, "I assume people have capacity. I always offer people choice, it's important."

People's care needs were assessed, these assessments supported people's choices and preferences and were reviewed regularly to ensure people received the care and support they wanted.

Staff supported and encouraged people to eat a healthy balanced diet. We found some people needed very little support from staff, while others required staff to cook their food. One person said, "The care is very good. [staff] put out the rubbish, wash up and prepare my meals. They always make me a cup of tea." A relative said, "[Staff] make [name] lunch."



Is the service caring?

Our findings

At our last inspection we rated the service outstanding in caring. At this inspection we found the service had not demonstrated any further improvements in this area. However, we found staff provided a good caring service.

People and their relatives confirmed staff provided support in a kind, compassionate and caring way. One person said, "I am happy with the care. The girls that come are lovely people." One relative commented, "[Staff member] is extremely helpful and understanding. Staff go over and above ensuring [name] is comfortable. I am happy with the care."

Staff showed compassion and made people feel they mattered. For example, staff put a little Christmas stocking together for one person who had no family. The person loved to listen to music on their CD player but unfortunately it stopped working. The provider from their own funds bought them a new one as a Christmas present.

People confirmed staff promoted their independence, treated them with respect and supported them to live at home. One person said, [Staff] are very kind. They talk to me whilst doing their jobs and take time to chat. I treat them like my family, I ask about their family."

Staff developed relationships with people they cared for on a regular basis. One relative said, "There is a good relationship between [name] and staff. They are part of the family." Another relative said, "I am there when staff come to care for [name]. It's lovely to see the interaction, we feel comfortable. The communication is good. [Staff] have time to chat to [name], it's a pleasure to have [staff] round."

People and where appropriate their relatives, were involved in the planning and reviews of their care and support. People confirmed they were involved with the reviews of their care. One person commented, "[Staff] come regularly to talk about my care needs. They ask if I am happy with the service." We found that care plans contained good guidance for staff about people's support.

Records were stored securely, staff understood the importance of respecting confidential information. They only disclosed it to people such as health and social care professionals on a need to know basis.



Is the service responsive?

Our findings

People's identified needs were documented and reviewed to ensure they received appropriate care. Staff had access to good guidance on how to deliver the care and support people wanted. One person said, "They respect my way of doing things they listen to me."

People received an initial assessment to ensure their support needs could be met. They received regular reviews of their care and support. People confirmed they were involved with and contributed to their assessments. People's views were listened to and people were supported to follow their interests and maintain relationships. This included support with getting out into the community for shopping or attending social events. People were also supported to attend appointments.

People received support to enable them to live independently. One person who had capacity but could not communicate verbally was supported to have a voice. The person sent an email to Ainsworth Care stating who they wanted to speak with and what they wanted to say. Staff made the call for them, this gave the person the support they needed to maintain their independence.

People were supported with their end of life care. We saw examples of support and care provided for people and their families. One family member had contacted the office to say how kind staff had been and how they had bought life back into their [relative's] life. They heard their relative laughing and couldn't thank staff enough. Another person wrote, "I often think of you all at Ainsworth Care and will always be so grateful for the help and support and kindness you showed to both [name]and I at the end of their illness. I would never have been able to do it without you."

There was an electronic monitoring system to ensure people received their calls on time. Call times were audited regularly to check people received their calls at the correct time. The registered manager told us that any regular late calls would be discussed with staff. One person said, "Staff are always on time."

There was a complaints procedure in place. People were aware of how to make a complaint should they need to. People told us they were very happy with the care and support they received. One person said, "I have nothing to complain about." We noted complaints received had been appropriately dealt with in line with the provider's complaints policy. The registered manager confirmed people were made aware of how to make a complaint, they commented, "We tell people if things aren't right, talk to us."



Is the service well-led?

Our findings

People who used the service told us that the service was well led, they felt listened to. One person said, "I am happy with the service, the communication is good."

The provider had 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.

There were systems to monitor the quality of the service. The registered manager completed audits in areas such as: care plans, medicines and call monitoring of the service to identify where improvements were needed. There was action taken to make improvements. For example, care plans were updated with peoples identified changing needs. Risk assessments had all recently changed to ensure people were supported with positive risk taking.

Staff completed at least Four quality checks per year with people who used the service. To ensure people's views were sought. Annual surveys were also completed for staff and people to gather their views. People's responses were positive about the service and care they received.

The registered manager was knowledgeable about people who received support. They ensured that staff had the tools, resources and training necessary to meet people`s needs. The registered manager was clear about the values and the purpose of the services provided One staff member said, "I feel [Ainsworth Care] are a good service they are highly recommended. We get a lot of referrals."

The registered manager told us they felt supported. They confirmed they had daily contact with the deputy manager and discussed any relevant issues daily. There were links with the local authority that supported with training and best practice. The registered manager had completed their champions pathway training in dementia to support staff knowledge and learning. They were members of other professional bodies that provided links to best practice. They used web site such as CQC for information.

We saw that the registered manager worked with other professionals such as GPs, safeguarding officers and social workers to ensure good outcomes for people. One quote we read from one professional stated, "Just wanted to say don't you ever change the way you work. I watched you with [name] and thought you had a lovely manner and rapport with them."