

A & C Home Care Ltd

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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 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

A & C Home Care Ltd provides domiciliary services to 7 people who require support in their own home at the time of our inspection. The service supports a wide range of people seven days a week. The office is based in Blackpool town centre.

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

The provider trained and regularly updated staff to protect people from harm and abuse. People asserted staff skilfully and safely managed their medicines. A relative stated, "Nothing is too much trouble. I would be lost with my medication if it wasn't for the carer, they are very good at reminding me." The provider deployed sufficient staffing levels to ensure care packages met people's needs.

The registered manager was fully inclusive of people and relatives in discussing their care packages. They provided extensive training to enhance staff skills and knowledge. People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice. The registered manager developed care plans to ensure staff understood each person's nutritional needs. A relative said, "Time was taken to find out [my relative's] usual eating habits, likes and dislikes, and what she could manage herself."

Without exception, people and relatives told us staff were very caring and went above and beyond to optimise their independence. Staff had detailed information to assist each person to maintain their dignity and individuality. One person commented, "They are my guardian angels."

Staff demonstrated a detailed understanding of people's individuality and how they wished to be supported. The registered manager ensured each person had detailed information in their own home about how to make a complaint. They engaged with them and relatives to understand their backgrounds and social needs.

The registered manager checked service quality and safety to maintain everyone's welfare. A relative told us, "[The registered manager] is a fantastic manager. It's not a business, it's a vocation to her." Staff worked closely with partner agencies to ensure continuity of people's care.

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

This service was registered with us on 01/08/2019 and this is the first inspection.

Why we inspected

This was a planned inspection based on the service's registration date.

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 effective?

Good ●

The service was effective.

Details are in our effective findings below.

Is the service caring?

Good ●

The service was exceptionally 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.

A&C Home Care Ltd

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.

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

Inspection team

This inspection was carried out by one inspector.

Service and service type

A & C Home Care Ltd is a domiciliary care agency. It provides personal care to people living in their own houses and flats.

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

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.

What we did before the inspection

We reviewed information we held about the service. We sought feedback from the local authority commissioning team. 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 A & C Home Care Ltd and made the judgements in this report. We used all of this information to

plan our inspection.

During the inspection

We spoke about A & C Home Care Ltd with four people, 6 relatives, a staff member and the registered manager. We looked at records related to the management of the service. We checked care records and looked at medication procedures; staffing and recruitment; infection control protocols; environmental hygiene and safety; people's feedback; leadership; and quality oversight.

Is the service safe?

Our findings

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

This is the first inspection for this newly registered service. This key question has been rated good. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- The registered manager developed the service focused on people's safety and welfare. A staff member explained, "We have a range of equipment in our cars for visits. Like a thermometer so we can check shower water is at a safe temperature for people to use." There has never been an accident, but the registered manager had a clear process to assess safety of control measures.
- People and relatives confirmed they felt safe when supported by staff. A person commented, "I am delighted they have been able to provide the extra care I need to stay safe." A relative added, "I've been immediately reassured and relaxed. It is very reassuring they have [my relative]'s safety at heart."

Systems and processes to safeguard people from the risk of abuse

- The provider trained and regularly updated staff to protect people from harm and abuse, including reporting procedures. Staff demonstrated a good awareness of related principles. A staff member commented, "No matter how small the concern may be I report it because you just never know what might be going on."

Using medicines safely

- People asserted staff skilfully and safely managed their medicines, when this formed part of their care package. A relative stated, "When A&C took over [my relative]'s care they immediately got the [medication] system sorted and she has been safe ever since. No issues there." Staff said they completed training and the registered manager competency-checked their skills.

Preventing and controlling infection

- We were assured that the provider was meeting shielding and social distancing rules.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was accessing testing for people using the service and staff.

Staffing and recruitment

- The provider deployed sufficient staffing levels to ensure care packages met people's needs. A relative said, "There's never been issues with staffing. They have never missed an appointment and in these last two years they have rarely been late. Their promptness is excellent."
- The provider developed good procedures and oversight systems in recruiting suitable staff to work with vulnerable people. Those we spoke with told us they felt new staff were properly inducted. One person told us, "When new staff start, they work with the older carer for a few what they call shadow shifts. That was great because I got to meet them and when they started, I knew they were skilled enough to support me."

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.

This is the first inspection for this newly registered service. This key question has been rated good. This meant 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; Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- The registered manager was fully inclusive of people and relatives in discussing their care packages. A relative said, "Right from the start they went through what my [relative] wanted and involved us in getting to know what she needed." They told us staff were keen to review people's needs and added, "They've been excellent in checking what else she needs as we've gone along."
- Care planning focused on assisting people to live healthy lives and reflected input from partner agencies. A relative told us they changed providers to A & C Home Care Ltd because of concerns about medication. They stated, "They worked really hard with the chemists and got [my relative]'s medication changed to a safer system."

Staff support: induction, training, skills and experience

- The registered manager provided extensive training to enhance staff skills and knowledge. Staff said they had good levels of training. One staff member commented, "We have lots of guidance to keep us up-to-date, like with COVID." A relative added, "Oh gosh, yes, [staff] are very well-trained. It's very reassuring to see they know what they're doing."

Ensuring consent to care and treatment in line with law and guidance; Adapting service, design, decoration to meet people's needs

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

- The registered manager provided staff training to develop their awareness of the principles of consent and the MCA. Without exception, people and relatives said staff supported them to make their own decisions. One person stated, "They know the care plan well, they know me well and they never do anything I don't

want them to. I am very much in control of my care."

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

- The registered manager developed care plans to ensure staff understood people's nutritional needs where this formed part of the agreed care package. This included mitigating the risk of malnutrition and offering each person choice of meals.
- People and relatives confirmed they were supported to have nutritious, wholesome food. One person told us, "They kindly cook my meals and check first what I want." A relative added, "They're great with the meals, always asking [my relative] what she wants, rather than deciding for her."

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.

This is the first inspection for this newly registered service. This key question has been rated good. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

Respecting and promoting people's privacy, dignity and independence; Ensuring people are well treated and supported; respecting equality and diversity

- The registered manager created care plans with people and their relatives to ensure support met their needs. Staff had detailed information to assist each person to maintain their dignity and individuality.
- Without exception, people and relatives told us staff were very caring and went above and beyond to optimise their independence. One person said, "I can honestly say they break their backs to provide my care." A relative added, "[My relative] is respected as an individual whose support and personality is different to everyone else. I like that." A third relative commented, "[My relative] always says they have always treated her with great dignity and respect."
- Staff had a range of training to underpin their skills, including equality and diversity. They demonstrated a caring and kind attitude. One staff member explained, "I spend a lot of time just talking things through, giving empathy to their fears of losing independence and so on."

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

- People and relatives confirmed the registered manager fully engaged with them before commencing care packages. They added review of their care plans and any associated decision-making was undertaken jointly. One person stated, "Yes, they are always offering me a choice. They ask rather than just take over and insist. They are extremely caring and kind."
- Staff demonstrated a good awareness of involving people and their relatives and how this was essential to good outcomes. One person told us, "What's important to me is having a good working relationship and knowing that when the carer comes in, they can just get on with it."

Is the service responsive?

Our findings

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

This is the first inspection for this newly registered service. This key question has been rated good. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- The registered manager created person-centred care plans with people and relatives to meet the needs of their care packages. One person told us they looked forward again to a shower after many years of being unable to adding, "[The staff member] is gentle, but also forward thinking. We tried everything, but she never gave up and now I am really enjoying it again."
- Staff demonstrated a detailed understanding of people's individuality and how they wished to be supported. A staff member stated, "Would I want to be cared for by someone who didn't really care? No, so it's essential I develop a respectful and caring relationship." A relative added, "The care is second to none."

Improving care quality in response to complaints or concerns

- The registered manager ensured people and relatives had detailed information in their own home about how to make a complaint. They had not received any complaints, but those we spoke with confirmed they had advice and guidance about feeding back concerns to the management team. A staff member explained, "It's about listening to people and if I can resolve it then and there it contains the issue."

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.

- The registered manager developed effective communication systems and told us they would invest in equipment and training if required. A relative told us, "They communicate very well with us and let us know if [my relative] needs anything."

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- The registered manager engaged with people and relatives to understand their backgrounds and social needs. This included their life history, preferences and favourite activities. One person said, "I am so grateful for their love and dedication. We chat all the way through. She'll ask how I am and tells me about her life, not too much, just enough to feel like she is a friend helping me out."

End of life care and support

- The provider did not provide end of life care packages at the time of our inspection. Staff had detailed information about supporting people in an emergency and were clear about their duties.

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.

This is the first inspection for this newly registered service. This key question has been rated 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; Continuous learning and improving care; 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 checked service quality and safety to maintain everyone's welfare. They implemented quality assurance systems and then developed them as the service grew. For instance, they created and evolved the daily log sheet to acquire good levels of detail about each person's general progress. They communicated changes with staff to keep them updated.
- Everyone we spoke with commented the registered manager engaged transparently and kept them informed about service changes. A relative said, "I'm always kept up-to-date because I get an email every couple of weeks telling me how [my relative] is." Another relative added, "It's a quality service run by quality managers who care about [my family member] like their own."

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

- The provider promoted a compassionate service and inspired staff to keep people at the heart of their support. Those we spoke with confirmed staff treated them as equals and respected their individuality. One person stated, "The support is highly personalised. I can't explain it, but when they leave I always feel uplifted, like I am a really important person, I'm not forgotten."
- Staff told us they felt confident and reassured by strong leadership at A & C Homecare Limited. One employee told us, "[The registered manager] is so knowledgeable. When I have a question, I learn something new. She's a font that helps me to understand and be the best I can."

Working in partnership with others

- Staff worked closely with partner agencies to ensure the continuity of people's care. For example, they engaged with local pharmacies, GPs, hospital and other community health and social care services.