

Arch Healthcare Ltd

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Inspection report

595 York Road Leeds LS9 6NW

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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

Arch Healthcare Ltd is a domiciliary care agency providing personal care to people in their own homes. The service provides support to people with a learning disability and autistic people. At the time of our inspection there were 5 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 consider any wider social care provided.

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

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

Right support:

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 right staff were recruited to support people to stay safe and they had the skills, knowledge and competency to deliver effective care.

Right Care

People were very happy with their care and support. Relatives praised staff and were complimentary about the care provided. People were involved in developing their care and support plans. Arrangements for supporting people with their interests and social activities enabled people to live a fulfilling life and maximise their independence. The service involved people in a meaningful way. People were supported safely with their medicines and received appropriate support to make sure their health and nutritional needs were met.

Right Culture

People said the service was consistently well-led. The registered manager engaged with people who used the service, their relatives and staff. The service's culture and values of providing high quality care was embedded in everything it did. Staff had a good understanding of care principles such as privacy, dignity and confidentiality. The service had received many compliments which evidenced staff and management worked effectively with other professionals and agencies.

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

Rating at last inspection

This service was registered with us on 15th February 2021 and this is the first inspection. The last rating for

the service at the previous premises was good, published on 11 September 2018.

Why we inspected

This inspection was prompted by a review of the information we held about this service.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

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 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.	



Arch Healthcare 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 Health and Social Care Act 2008.

Inspection team

The 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 houses. This service also provides care and support to people living in 2 'supported living' settings, so that they can live as independently as possible. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for supported living; this inspection looked at people's personal care and support.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

Notice of inspection

We gave the service short notice of the inspection; we informed them on Friday 18 November 2022 that we would visit the office on Monday 21 November 2022. 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 had received about the service since it was registered. We sought feedback from Healthwatch, the local authority and professionals who work with the service. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England. The provider was not asked to complete a Provider Information Return (PIR) prior to this inspection. A PIR is information providers send us to give some key information about the service, what the service does well and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with 3 people who used the service, 2 relatives and 7 members of staff including, the registered manager, team leader, senior support workers and support workers. We reviewed a range of records. This included people's care records and medicine records. We looked at 3 staff recruitment files. A variety of records relating to the management of the service were reviewed.



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 of this newly registered service. This key question has been rated good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were safe and protected from the risk of abuse.
- Everyone told us they felt safe when support workers visited. One person said, "Yes, I feel safe here, I lock the doors on a night. I like my house, I like my staff, I like who I live with."
- All staff had a good understanding of safeguarding procedures and were confident any concerns would be dealt with appropriately and promptly.

Assessing risk, safety monitoring and management; Preventing and controlling infection

- Risks to people were managed safely in a person-centred way. Everyone was involved in managing their own risks along with their family and support staff.
- Staff had an enabling approach that encouraged people to manage risk and stay safe. A member of staff said, "We have to document and understand everything. Risk is really well managed."
- Risks were assessed continuously to make information was up to date.
- The service had effective systems for managing infection risks including those presented during the COVID-19 pandemic.

Staffing and recruitment

- People received care and support from a reliable and consistent team. One person said, "I like all my staff they are chatty. Nothing I would change." A relative said, "Staff members are always on time and never let us down. We feel they are part of the family and trust them to care for [name of person]."
- All staff said there were enough staff to meet people's needs. Staff told us they worked with the same people so got to know them well and staffing was always well planned. A member of staff said, "When I first started, I received so much training and support. The registered manager made sure I was very confident before I worked on my own. It is a great place to work."
- Recruitment was managed safely. Robust systems were in place to check staff were suitable before they started work.

Using medicines safely

- Medicines were managed safely. The provider had systems in place to support the management of medicines. Staff who supported people with their medicines were trained and had their competency checked.
- The registered manager had a good understanding of current safe medicine practice including STOMP (Stopping over medication of people with a learning disability, autism or both) which is about helping people to stay well and have a good quality of life.

- People were involved in the management of their medicines. The service recognised when people could manage their own medicines. Support plans were detailed and medication administration records (MARs) were well maintained. One person did not have the full information on their MAR which was addressed by the registered manager as soon as we brought it to their attention.
- People told us they received their medicines on time and these were administered safely. One person said, "I take medication and I know what I take it for, staff help me with this."

Learning lessons when things go wrong

- Accidents and incidents were closely monitored and analysed. The service identified lessons learned and took action to help prevent repeat events. A recent incident had been recorded on an incident form, but it was difficult to establish from this what actually happened. The registered manager said they would review their process to ensure full information was provided in future.
- The service consistently communicated important information to staff, so they understood learning gained through experience.



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

- Robust systems were in place to make sure the service could meet people's needs. Assessments were comprehensive and outcomes for people were clearly identified.
- Referrals were made to other services to make sure people received the right support.
- The service worked effectively with others to make sure people's needs were met. The provider had received several compliments from other agencies and professionals about the quality care provided by Arch Health Care Ltd. One professional said, "I think the staff, particularly the registered manager, is doing an excellent job."

Staff support: induction, training, skills and experience

- Staff received appropriate training and support which equipped them with the skills to do their job well.
- Staff told us the training they received was good quality and covered all key areas. Records we received confirmed this. New staff received a comprehensive induction and shadowed experienced staff before supporting people on their own. A member of staff told us, "I had training for 3 months and then [name of registered manager] asked if I was happy to work on my own."
- Staff received regular supervision and spot checks were carried out to make sure staff were delivering appropriate care to meet people's needs.
- Staff felt well supported in their role. A member of staff said, "We are definitely well supported. [Name of registered manager] not only looks after people we are supporting but knows who we [staff] are as individuals."

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

- People's nutritional needs were met. Staff told us they encouraged people to eat and drink well and provided the right support to make sure the food people ate was safe.
- People felt actively involved with planning and preparing meals. One person said, "I cook my own food, choose what I want to buy. I often eat with my housemates. I have what I want, when I want it."

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 MCA 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 service always operated within the legal framework of MCA.
- The registered manager and staff made sure people were involved in decisions about their care. They provided many examples of how choice and decision making were promoted in their day to day work. A member of staff told us, "[Name of person] loves spending, we advise and explain how much they have to spend, but they make their own decision."
- Where people lacked capacity, decisions were made in the person's best interest.
- Staff had a good understanding about the principles of MCA and knew to involve others, including other professionals, when needed.



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.

Ensuring people are well treated and supported; respecting equality and diversity

- People were always treated with kindness and respect.
- People and their relatives were consistently positive about the care and support they received. Everyone was very complimentary about the registered manager and staff. One person said, "I would describe my staff as fantastic. They know me and what I like to do."
- Staff knew people very well and knew how to support them in line with their preferences. A member of staff said, "Staff get to know people. The manager knows people well. They are hands on and do care. It is a nice atmosphere to work."

Supporting people to express their views and be involved in making decisions about their care; Respecting and promoting people's privacy, dignity and independence

- People were involved in all aspects of their care and supported to express their views. This included regular reviews of their care and support plans. One person said, "I am involved with everything about my support. I like to go to bed at 10 and sometimes go later."
- The service made sure staff had detailed information to provide person-centred care, such as guidance around routines. Staffing arrangements ensured people had the right support. For example, rotas enabled staff to spend appropriate time with people.
- People were encouraged to maintain and develop their independence. Staff told us this was something the service did consistently well. A relative said, "[Name of person] is supported to be as independent as they can be, they do rely on staff to do most things, but when possible, staff do encourage."
- The service's culture and values of providing high quality care was embedded in everything it did. Staff had a good understanding of care principles such as privacy, dignity and confidentiality. A member of staff said, "Care is very person-centred, it's people's home and we respect that. Care wise, we promote independence and fulfil people's needs. [name of person] used to have their hair washed and now they are independent."



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

- People received person-centred care. Support plans were detailed and other care records included important information such as people's history, goals and aspirations which enabled staff to understand and meet people's needs.
- Care records were reviewed regularly to ensure they captured changes in people's needs and wishes.
- Daily notes showed care was delivered in a respectful way and people received appropriate support.
- Everyone told us the service was responsive to people's needs. One person said, "Staff talk to me about what I like, what I do and when I do it." One relative said, "We have regular meetings regarding care planning and reviewing. They are fantastic and know [name of person] very well."

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

• People's communication needs were met. People had good access to information in appropriate formats to aide communication. Pictures and symbols were used in people's care records which helped them plan and understand their care.

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

- Arrangements for supporting people with their interests and social activities enabled people to live a fulfilling life. People's care records had good evidence to support this. One person said, "My staff take me to places I want to go." A relative said, "My daughter is out and about all the time."
- People were encouraged to engage in daily living skills such as household shopping, cooking and cleaning.
- Staff were confident people received opportunities to engage in a broad range of activities and recognised the importance of spending quality time with people. A member of staff said, "I feel very lucky to be able to sit down and spend time with people, playing games, chatting, watching TV and doing activities." They also gave examples of accessing the local and wider community such as using local shops, parks, pubs, cafes as well as days out further afield including Chester zoo and the trips to the coast.

Improving care quality in response to complaints or concerns

- The provider had a system to deal with complaints and concerns. The registered manager told us they had not received any formal complaints. They maintained a log of concerns which showed action was taken to resolve any issues raised.
- People and relatives told us they could confidently discuss concerns and complaints with the registered manager or staff. One person said, "If I was unhappy, I would tell my staff."



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.

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 were very happy with the service and their relatives praised staff and were complimentary about the care provided. A relative said, "We can't believe how lucky we are and would recommend it to anybody."
- The service involved people in a meaningful way. People told us they were asked by the provider to give feedback about their experience. One person who lived in a supported living setting said, "We have meetings and talk about what we are doing and want to do. It's amazing living here." Another person said, "I have received questionnaires, I filled it in myself. I am honest with what I say in the questionnaires."
- Staff felt valued, well supported and enjoyed working at Arch Healthcare Ltd. They told us the registered manager focused on safe, quality care. A member of staff said, "I am supported well by my manager she is fantastic; I love my job. She's the best boss. I am really happy here and love the variety and the people we care for."
- Care records were detailed and evidenced people received person-centred care.
- We saw evidence of many compliments the service had received for their compassionate care and personcentred approach. Comments included, 'You are wonderful' and 'Thank you for everything you do'.

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

- Systems and processes for monitoring quality and safety were effective. The service carried out a range of checks such as financial, medication and IPC audits.
- The registered manager was engaging and very knowledgeable about the service. They had good oversight of the service and closely monitored service delivery. They were recently nominated for the 'Leeds Quality in Care Awards 2022- Registered Manager of the Year'. The nomination came from staff and some people who used the service.
- The registered manager visited people in their homes frequently and observed the care being delivered to make sure staff had the right skills, knowledge and competency. They also held regular quality review meetings with people.
- Staff understood their role and responsibilities and had confidence in their leader. A member of staff said, "[Name of registered manager] is 100% and takes care of everyone."
- Communication was effective and ensured everyone was kept up to date. Regular team meetings were held, and staff told us they were always informed when any changes were made. A member of staff told us, "Communication is really good. We have monthly meetings and talk about what can improve and if anyone

needs extra support."

Working in partnership with others; 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 shared feedback from other professionals that evidenced the service was focused on providing person-centred care which achieved good outcomes for people.
- Notifications about significant events were submitted to CQC. These showed the service was responsive and took appropriate action, which included reporting information to external agencies when required. No notifications were received in 2022. The registered manager confirmed this was correct because no notifiable events had occurred.