

Global Access Limited

GA24Care

Inspection report

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27 February 2023

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Ratings

Overall rating for this service	Good ●
Is the service safe?	Good ●
Is the service well-led?	Good ●

Summary of findings

Overall summary

About the service

GA24Care is a domiciliary care agency that provides personal care to people living in their own homes in the community. At the time of the inspection the agency was supporting 32 people, 25 people were receiving support with personal care.

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

Since the last inspection, the provider had taken appropriate action to ensure staff were safely recruited. Appropriate recruitment checks had been completed before care workers started working with people.

Systems to monitor the quality of the service included regular contact with people, their relatives and staff seeking their views on the quality of the service. Staff performance was monitored to ensure they were working in line with the provider's expectations through regular supervision and spot checks of their work.

People and their relatives spoke positively about the care workers that supported them. They did say that there had been some concerns in respect of late visits, which the provider was addressing. The provider had employed a driver enabling care workers to arrive on time and they had reviewed the allocation of care workers to ensure visits were in close proximity.

People told us they felt safe. Staff felt confident to raise concerns with the registered manager and were aware of external agencies where they could report concerns. Staff supported people to manage their medicines safely where this was needed.

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.

People had individual plans of care based on their needs and wishes. These were reviewed with the person to ensure the care was appropriate. Staff provided personalised care and support, enabling people to continue to live in their own homes.

Staff spoke positively about the support from the management team. The provider was passionate about ensuring staff had the skills and knowledge to support people. They were investing in courses for some staff to complete a vocational course in health and social care. Champion roles had been developed within the team enabling them to build on their skills and knowledge and drive improvements to 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

The last rating for this service was requires improvement (published 24 October 2018). There was a breach of regulation. The provider completed an action plan after the last inspection to show what they would do and by when to improve in respect of the recruitment of staff. At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

Why we inspected

We undertook this focused inspection to check they had followed their action plan and to confirm they now met legal requirements. This report only covers our findings in relation to the Key Questions Safe and Well-led.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating. The overall rating for the service has changed from requires improvement to good based on the findings of this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for GA24Care on our website at www.cqc.org.uk.

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 well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

GA24Care

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

This inspection was completed by one inspector and an Expert by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

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

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 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.

Inspection activity started on 22 February 2023 and ended on 27 February 2023. We visited the location's office/service on 22 February 2023.

What we did before 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. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with 6 people and 4 relatives about their experience of the care provided. We spoke with 5 care workers, the registered manager and the complex care manager. We sought feedback from 4 health and social care professionals about their experience of working with GA24 Care.

We reviewed a range of records. This included 2 people's care records. We looked at 3 staff files in relation to recruitment, training and staff supervision. A variety of records relating to the management of the service.

Is the service safe?

Our findings

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

At our last inspection we rated this key question requires improvement. At this inspection the rating has changed to good. This meant people were safe and protected from avoidable harm.

At our last inspection the provider had failed to follow their recruitment process and ensure adequate checks were in place for new care workers. This was a breach of regulation 19 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 19.

Staffing and recruitment

- Safe recruitment practices were being followed. The provider ensured safe recruitment decisions were made. This included completing Disclosure and Barring Service (DBS) checks which provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.
- The provider told us at the last inspection they were experiencing some workforce pressures in respect of recruitment. In response they were now employing some overseas care workers. They had been granted a Home Office Sponsorship Licence.
- Recruitment was ongoing as the provider was building up the business. People would only commence a service once suitable staff were appointed.
- People were cared for by suitable numbers of staff. People were supported by a small consistent team of staff. New staff worked alongside the established team to enable them to understand their role and get to know people.
- People were overall satisfied with the care workers that were supporting them but did tell us that on occasions staff were late and they did not always know who was supporting them.

Systems and processes to safeguard people from the risk of abuse

- Systems were in place to keep people safe from the risk of abuse. This included clear policies and procedures to guide staff on what they should do if they suspect abuse was occurring.
- People were provided with a service user guide, which clearly outlined the role of the care worker. This included information about handling money, gifts and wills and how people could raise concerns to either the registered manager or the local authority safeguarding team if there was an alleged abuse taking place.
- Staff confirmed they would escalate any concerns to their team leader in the first instance or the registered manager. The service continued to raise safeguarding alerts to the local authorities safeguarding team and concerns were shared with social workers in respect of self-neglect or where there were concerns about a person's welfare.
- People and relatives told us they felt safe when being supported by GA24. Comments included, "I have no safety issues both from the care I get and how the carers handle me", "I have no safety issues with the carers

being in my home and they keep me safe" and "My relative is feeling very safe and liking the carers in his home".

Assessing risk, safety monitoring and management

- Systems were in place to ensure information was gathered before people started a service. The registered manager or a team leader met with people and liaised with the funding authority to ensure they could meet the person's individual needs. This was an opportunity to discuss any risks and any support needed.
- Environmental risk assessments were completed to ensure people's homes were safe. These were kept under review. The provider was in the process of transferring people's records to a new electronic care planning system. Since the last inspection people's risk assessments now included information about how staff could turn off water, gas or electricity supply in the event of an emergency.
- Care workers described to us how they kept people safe and the communication that was in place to support them in their roles, including policies and procedures and training. Care workers said, if they were concerned about a person's safety the management team would respond either in person or provide telephone advice.
- There was a business continuity plan that covered emergencies, such as systems failure, flooding or staffing. People were prioritised in respect of visits such as time specific medication, no family support and their dependency on the staff to provider care and support. This would enable the provider to plan, ensuring all critical visits were completed.

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 Mental Capacity Act (MCA). In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS)

- We found the service was working within the principles of the MCA. People's capacity had been considered in line with guidance. Care workers had received mental capacity act training.
- Care records included information on whether a person had a legal representative in respect of decisions about their health and finances.

Using medicines safely

- People's medicines were managed safely. People told us, "I take my medication independently, but the carers remind me" and "They make sure I get my medication safely".
- Care workers received training in medicine management and their competence was assessed.
- Medicine records were recorded electronically. Care workers were unable to log out of the visit if medicine records were not completed. This acted as a reminder for care workers and the management team could monitor in real time. This was because the office received an alert that medicines had either not been given or documented.

Preventing and controlling infection

- The provider had policies and procedures relating to the pandemic and infection control. The provider told us since the last inspection they were getting regular updates from an external company, which had enabled them to update their working practices in line with government guidance.

- Staff received training in infection control and the five principles of handwashing.

Learning lessons when things go wrong

- There had been no accidents since the service started operating. However, it was evident the provider sought the views of people and staff to enable them to make improvements to the service. For example, in response to the late calls a driver was recruited to help care workers get to their visits on time.

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 our last inspection we rated this key question requires improvement. At this inspection the rating has changed to 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

- Improvements had been made since the last inspection to ensure quality checks were in place to ensure staff were safely recruited. New systems had been put in place to capture the evidence enabling the registered manager to ensure all checks had been completed before a care worker started working for GA24.
- There were robust checks completed on care plans, recruitment, staff training and performance. Where shortfalls had been identified, an improvement plan had been implemented.
- Spot checks of staff were completed to ensure they were working in accordance to the company's expectations and providing safe, effective care that was responsive to people's needs. The registered manager told us, they had employed 6 team leaders who were responsible for supporting a small group of staff, which included supervision and support to the care workers. Staff confirmed they received regularly supervision and felt supported in their roles by their team leader and the management team.
- The registered manager met weekly with the team leaders enabling them to have oversight of the care being provided and to discuss any risks to the business.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- The provider was passionate about providing care that was person centred, enabling people to remain in their own homes. Staff described how they supported people in a person-centred way and evidently had built good relationships with the people they were supporting.
- The provider had received a compliment from a social care professional on how they had supported a person when their relative was unwell. The management team and the staff responded to the emergency and ensured staff were with the person until alternative support was sought. This prevented a hospital admission due to the vulnerability of the person.
- A care worker told us they had been an awarded employer of the month for the good work they had done supporting people. It was evident they felt valued and empowered and strived to provide a good service to people. Another member of staff told us, "I always ask people how they want to be supported and before I leave I check if there is anything else I can do. Before I leave I always make sure everything is close to hand that the person wants such as a drink and their walking aids".
- People and relatives we spoke with spoke highly of the staff and the management team. Comments included, "I think the company stands out for the quality of carers they get in", "I would recommend the company as the carers are very nice and genuine", "Also, their attitude to work is excellent" and "I find the

staff naturally polite and some go beyond".

- Feedback from professionals was extremely positive. Comments included, "The carers are caring and the managers communication is great internally and externally", "Never have any negative feedback", and "GA24 made a huge difference in her life, allowing her to stay in her own flat for much longer than expected".

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 provider was aware of the duty of candour and their legal responsibility to report notifiable incidents to the Care Quality Commission.
- Complaints, incidents and risks were clearly identified, and action taken to keep people safe. These were viewable by the management team enabling them to monitor the service provision.

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

- People and their relatives views were sought through regular contact with them. Monthly surveys were completed enabling the provider to monitor the quality of the care provision and make improvements. A professional told us, "They listen to the family and they apply any changes needed to have the best outcome".
- Staff's views were sought through surveys, spot checks and staff meetings. It was evident the provider valued the views in making improvements to the delivery of care. Team leaders were consulted about the new electronic care planning tool to ensure it would work for them.
- Quarterly Team away days were organised, which included an element of training. For example, staff received training in dementia. The provider was planning further training on mental health and supporting people with a learning disability.
- Some care workers had been enrolled on courses to help with English Language and building on their skills to communicate with people they were supporting.

Continuous learning and improving care

- The provider was committed to ensuring staff were trained and had the skills to enable them to work effectively. The provider was investing in vocational courses for staff from overseas that were unable to obtain grants. Five care workers had enrolled on a certified course in Health and Social Care. The provider saw this as an investment in the business and the care workers.
- Care workers confirmed they had key responsibilities in infection control, diabetes, nutrition, medicines, dementia and information technology and had been identified as champions. Staff had completed additional training to enable them to support people and staff in these areas.
- The provider told us there had been no missed care visits, but they had experienced some lateness due to the lack of drivers. In response they had linked non driving staff with a member of staff that drove them to people's homes. The provider had also reviewed the areas staff worked to ensure visits were in close proximity.
- Staff confirmed this arrangement was in place, which had improved time keeping of calls to people.

Working in partnership with others

- The provider, the registered manager and the staff worked with key stakeholders, which included the local authority and health and social care professionals. This was to facilitate the support and care of people using the service.