

A & T Caring Services Ltd

A & T Caring Services

Inspection report

Venture House Number 2, Arlington Square, Downshire Way Bracknell Berkshire RG12 1WA

Tel: 01344388061

Date of inspection visit: 11 July 2019

Date of publication: 01 August 2019

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 & T Caring Services is a domiciliary care service providing personal care to people in their own homes. At the time of our inspection there were 23 people receiving a service.

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

People were protected from the risks of abuse and said they felt safe with the staff providing their support and care. Risks to people's personal safety had been assessed and plans were in place to minimise those risks. Staff recruitment and staffing levels supported people to stay safe while living as independent a life as possible.

People received effective care and support from staff who knew them well and were well trained. People received effective health care and support where needed. Medicines were handled correctly and safely. People's rights to make their own decisions were protected. They 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 were treated with care and kindness. They were consulted about their care and support and could change how things were done if they wanted to. People were treated with respect and their dignity was upheld. This was confirmed by people and their relatives who provided feedback. People's diverse needs were identified and met and their right to confidentiality was protected.

People received care and support that was personalised to meet their individual needs. Staff worked well together for the benefit of people and were focused on the needs of the people using the service.

People benefitted from staff who were happy in their work and felt well managed and supported. People benefitted from a service which had an open and inclusive culture and encouraged suggestions and ideas for improvement from people who use the service, their relatives and staff.

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 (report published 11 January 2017).

Why we inspected

This was a planned inspection based on the previous rating.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our reinspection 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. Good • Is the service caring? The service was caring. Details are in our caring findings below. Good Is the service responsive? 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 & T Caring Services

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

One inspector carried out this inspection.

Service and service type

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

The service has 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 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 the last inspection. We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all of this information to plan our inspection.

During the inspection

We spoke with the registered manager and reviewed a range of records. These included three people's care plans, associated monitoring records, daily notes and medicine records. We looked at four staff files in

relation to recruitment. We also looked at a variety of records relating to the management of the service, including policies and procedures.

After the inspection

We looked at training data and quality assurance records sent to us after the inspection. We spoke with three people who use the service and received feedback from five relatives about their experience of the care provided. We also received feedback from six members of staff and three social care professionals.



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

- Staff knew how to recognise and protect people from the risk of abuse and had received training in safeguarding adults. They knew what actions to take if they felt people were at risk of harm.
- Social care professionals thought the service, and risks to individuals, were managed so that people were protected.
- People said they felt safe with the staff working for the service. One person added, "101%."
 Relatives said they felt their family members were safe with the staff and one added, "Very safe."

Assessing risk, safety monitoring and management

- People were protected from risks associated with their health and care provision. Staff assessed risks such as moving and handling, and care plans incorporated measures to reduce or prevent potential risks to individuals.
- Environmental risks to the safety of staff when providing the care packages had been assessed to make sure any potential risks to staff were identified and dealt with.

Staffing and recruitment

- People were protected by the recruitment processes in place and followed. These made sure, as far as possible, that people were protected from staff being employed who were not suitable. Staff files included most of the required recruitment information, such as criminal record checks and checks that applicants weren't barred from working with vulnerable adults.
- However, in two recruitment files the employment histories had gaps which had not been explained as required. Another file had a date only reference from a previous social care employer, rather than the required evidence of conduct. The registered manager obtained the missing information promptly after the inspection. They explained that, going forward, they would make sure they checked that all required recruitment information was obtained before new staff were rostered to work with people using the service.
- Staff were provided in line with the hours identified in people's individual care packages. People said staff were available when they needed them and had enough time to support them without rushing during each visit. One person said staff were usually on time but that, if they were held up, they always rang to say they would be late.
- Social care professionals thought the service made sure there were enough suitable staff to keep people safe and meet their needs. On a review website we saw feedback, dated February 2019, from a relative of a person who was using the service. They said, "We found the carer extremely proficient, reliable and thoroughly professional. We both like him very much. We are

more than satisfied with the work he does for us to a very high standard - a credit to your company."

Using medicines safely

- People's medicines were handled safely. Only staff trained in administering medicines and assessed as competent were allowed to do so.
- Medicines administration record (MAR) sheets were completed on the electronic care planning system by the staff administering the medicines. The registered manager was aware of the latest National Institute for Health and Care Excellence (NICE) guidance on managing medicines for adults receiving social care in the community. We saw staff were not always recording if people had taken their medicines when staff were only reminding them to take their medicines, rather than being responsible for administration. We discussed this with the registered manager and he planned to review their current practices and procedures to ensure they were complying with the latest NICE guidance.

Preventing and controlling infection

• People were protected from the risk of infection. Staff had been trained in infection control and people confirmed staff used protective equipment such as gloves and aprons, when appropriate.

Learning lessons when things go wrong

• There had been no accidents or incidents since the last inspection. However, procedures were in place to ensure any incidents or accidents were recorded, together with details of actions taken and the outcome of any investigation. Steps would then be taken to ensure lessons could be learnt when things went wrong.



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. At the last inspection this key question was rated as good. At this inspection this key question remained the same. 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

- People received effective care and support from staff who knew how they liked things done.
- Each care plan was based on a full assessment, included individual preferences and choices, and demonstrated the person had been involved in drawing up their plan.
- The care plans and actions were based on current best practice and showed the registered manager and staff had a good understanding of the person's individual needs.
- The care plans were kept under review and amended when changes occurred or if new information came to light.

Staff support: induction, training, skills and experience

- People received care from staff that had the necessary knowledge, skills and experience to perform their roles. People and relatives thought staff had the training and skills they needed when supporting them.
- Staff received formal supervision every four months to discuss their work and how they felt about it. Staff felt this enhanced their skills and learning. Once a year staff had a formal appraisal of their performance over the previous 12 months.
- The service provided training in topics they considered mandatory, such as moving and handling, first aid and fire safety. All training the provider considered to be mandatory was up to date.
- Staff received additional training in specialist areas relevant to the needs of individual people, such as training in caring for people with dementia. Staff felt they received the training they needed to enable them to meet people's needs, choices and preferences.
- Social care professionals felt the service provided effective care, from staff who had the knowledge and skills they needed to carry out their roles and responsibilities.

Supporting people to live healthier lives, access healthcare services and support; supporting people to eat and drink enough to maintain a balanced diet; staff working with other agencies to provide consistent, effective, timely care

- Social care professionals felt the service supported people to maintain good health, have access to healthcare services and receive ongoing healthcare support. One professional added, "In working with one individual, A & T have been very responsive in liaising with health colleagues to promote their health and wellbeing. This included liaising with the GP and emergency services as needed with the individual's consent."
- Staff worked well with other agencies to understand and meet people's individual and changing needs. On a review website we saw feedback, dated January 2019, from a relative

- of a person who was using the service. They said, "I have been grateful to A & T Caring Services as they have liaised with the occupational therapist to obtain a suitable chair for my husband who is 'housebound'."
- People felt the service helped them maintain and improve their health and wellbeing. On a review website we saw feedback, dated May 2019, from a person who was using the service. They said, "A & T Caring Services put a lot of hard work into their job. Nothing is any trouble. As a team, they work well. Without their care and help, I would not be as well as I am now. I would like to thank them all very much. I appreciate very much all their hard work." One relative told us, "Dad has improved in health and his personal care has greatly improved since A & T have been attending him."
- Where providing meals was part of the care package staff also recorded what people ate and drank. If there was a concern that someone was losing weight or was putting on too much weight referrals would be made to the GP.

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 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 with appropriate legal authority. 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 found the service was working within the principles of the MCA. Staff received training in the MCA and were clear on how it should be reflected in their day-to-day work.
- People's rights to make their own decisions were protected. The records seen demonstrated that people were involved in making decisions regarding their care and support as well as their everyday life.
- People and their relatives confirmed staff asked permission before any care was carried out. One relative commented, "They are very good, they talk with him and explain what they are doing."



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 said they were treated with care and kindness. One person added, "They remind me of little angels." A relative said staff were caring when they supported their family member and added, "Very caring." One relative told us, "Staff seem to genuinely care about my mother's happiness and wellbeing." Social care professionals thought the service was successful in developing positive, caring relationships with people.
- People's equality and diversity needs were identified and set out in their care plans. Staff provided support to meet the diverse needs of people using the service including those related to disability, gender, ethnicity and faith.

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

- People's views on the support they received was regularly sought. People confirmed they were asked their opinion on how things were run at the service.
- The care plans were drawn up with people, using input from their relatives, health and social care professionals and from the staff teams' knowledge from working with them in the service.
- Relatives said staff knew how their family members liked things done. One relative commented, "Absolutely. My family member often likes things done a very specific way. It is clear staff are briefed about how she likes things done."

Respecting and promoting people's privacy, dignity and independence

- Rights to privacy and dignity were supported. People told us staff treated them with respect and dignity. On a review website we saw feedback, dated October 2018, from a relative of a person who was using the service. They said, "We are very happy with the kind care that has been shown to our father. The morning carer, in particular, goes beyond what is expected of her but all carers and A & T Caring Services owners show great respect and care for dad..."
- People's care plans focused on what they could do and how staff could help them to maintain and increase their independence and protect their safety wherever possible. Relatives felt staff encouraged their family members to be as independent as possible. One relative told us, "Staff are most encouraging."
- People's right to confidentiality was protected. All personal records were kept locked away in the office, on a password protected computer and in a place of people's choice in their homes.



Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs. At the last inspection this key question was rated as good. At this inspection this key question has remained the same. 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 support that was individualised to their personal needs. People and their relatives said staff knew how they liked things done. Social care professionals thought the service provided personalised care that was responsive to people's needs. One professional commented, "A & T have been able to respond to one individual's changing needs promptly, raising any issues with social care or the family and adapting care as needed."
- People's care plans were based on a full assessment, with information gathered from the person and others who knew them well. The assessments and care plans captured details of people's abilities and wishes regarding their personal care. The daily notes demonstrated staff provided personal care based on the way individuals liked things done.
- People's needs and care plans were regularly assessed for any changes. People's changing needs were monitored, and their care plan was adjusted to meet those needs if necessary.

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 service identified people's information and communication needs by assessing them and recording this in their care plans.
- The registered manager was aware of the specific requirements of the AIS and was in the process of documenting the communication needs of people in a way that meets the criteria of the standard.

Improving care quality in response to complaints or concerns

- Staff were aware of the provider's complaints procedure and knew what to do if anyone raised a concern. There had been no formal complaints made to the service since their last inspection.
- People and relatives knew what to do and who they would talk to if they had any concerns. They were confident action would be taken if they did raise concerns with the staff or the registered manager. On a review website we saw feedback, dated July 2018, from a relative of a person who was using the service. They said, "We have been extremely happy with the service provided. The carers are reliable, efficient and very competent. Any issues raised are dealt with speedily and with sensitivity."

End of life care and support

- Details of a person's wishes regarding end of life care and support was recorded in their care plan and all staff received training in end of life care. On a review website we saw feedback, dated October 2018, from a relative of a person whose family member had passed away. They said, "The manager and his team provided excellent, compassionate care for my mother during the latter stages of her life coping well with her complex needs. It was a great comfort to me not living close by that she was in safe, kind hands." Another relative had commented, "Everyone at the agency was professional, helpful and friendly. We feel very lucky to have had the agency take care of my husband. He was treated with dignity and respect throughout his illness."
- We saw a letter sent by a relative to the service after their family member had passed away. The relative explained that their mother's wish had been to spend her last few months at home and not in hospital. The relative said in their letter, "We would never have managed without the care you gave, not simply physical but also psychological and spiritual... The fact that she had a peaceful death at home is a gift you have given us."



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.

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

• There had been no incidents that had fallen under the definition of those that should be dealt with under the duty of candour regulation. The registered manager was clear in their understanding of the duty of candour and knew the action to take should something go wrong. The provider had a policy that set out the actions staff should take in situations where the duty of candour would apply.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- The registered manager and staff were clear about their roles. All the registration requirements were met and, although none had occurred, the registered manager knew what incidents required to be notified to the Care Quality Commission.
- Records were up to date, fully completed and kept confidential where required.

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

- •There were a number of different ways that the views of people, staff and professionals were sought and used in the monitoring and development of the service. For example, three to six-monthly telephone surveys of people and their relatives. An annual quality assurance survey was carried out and the registered manager monitored an external website where people or their relatives could leave reviews of the service. We saw, if any issues were raised, action was taken and documented to deal with them swiftly.
- There were monthly staff meetings where views were sought on any proposed changes, as well as suggestions requested for any improvements to the service.
- Staff confirmed they were asked for suggestions on how to improve the service and felt any suggestions they made were taken seriously.
- People and their relatives confirmed they were asked their opinions on the way things were run. One relative told us, "[The registered manager] often asks our opinion about the service. He checks we are happy with how things are being done and listens to any suggestions we may have."

Continuous learning and improving care; Working in partnership with others

•There was an effective audit system in place that included audits of different aspects of the

- running of the service. The new electronic care planning system had made audits and monitoring easier and less time consuming for the registered manager. If any care or calls were missed an alert would flag this to the manager or the staff member monitoring the system.
- Social care professionals felt the service worked in partnership with them and other agencies. One professional added, "A & T have shown a keen interest in working with social care and health agencies to improve the support they provide to their clients." One professional said the service demonstrated good management and leadership and added, "I would have no hesitation in placing other people in need of support with this provider."

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

- Staff told us they enjoyed working with people who use the service. They felt they were provided with training that helped them provide care and support to a high standard. They felt well supported by the registered manager and were confident they would be listened to if they had any concerns.
- People received a service from staff who worked in an open and friendly culture. Staff said their managers were accessible and approachable and dealt effectively with any concerns they raised. One staff member commented, "I am happy to work for this agency." Another member of staff spoke about the registered manager saying, "He is a really good manager. He will try to do anything you ask, like if you need time off. He is a brilliant boss, I wouldn't work for anyone else." One member of staff highlighted that there was, "...splendid communication between the managers, office and staff." They added, "We have a smooth, very good working environment and [I] would not hesitate to recommend this agency to a member of my own family."
- People and their relatives said the service was well-managed. One relative told us, "We find the staff extremely kind caring and competent. We have used A&T caring services since [Name] came out of hospital after a very serious stroke. Our lives have been made easier due to the care and help received from [the registered manager] and staff. We have found the carers to be extremely pleasant and helpful and they have a good rapport with [Name] which is essential. I recommend the company most heartily. We are fortunate to have found them." One person told us, "[The registered manager] is a fantastic man. He is lovely and has a heart of gold. He has fantastic staff and they are lovely too."