

Alcedo Orange Limited

Alcedo Care Bury

Inspection report

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Date of inspection visit:
30 November 2022
12 December 2022

Date of publication:
05 January 2023

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

Alcedo Care Bury is a domiciliary care service registered to provide personal and complex care to both adults and children living in their own homes. At the time of our inspection there were 18 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

At the time of the inspection, the location did not provide care or support for anyone with a learning disability or an autistic person. However, we assessed the care provision under Right Support, Right Care, Right Culture, as it is registered as a specialist service for this population group.

Right Support

People told us they received the support they wanted and needed and felt safe with staff. Support was monitored and reviewed to ensure people's current and changing needs continue to be met. Where people received support with their prescribed medicines this was managed safely. People's social and emotional needs were considered to help promote their health and well-being. 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.

Right Care

People told us staff upheld their privacy and dignity, providing compassionate care and support. Thorough assessments and care plans provided detailed information to guide staff. The complex care team provided additional support and guidance, so people's additional clinical needs were safely met. Good staffing levels were maintained offering continuity and reliability in support. Staff were appropriately recruited and completed a comprehensive induction and training programme on commencement of their employment. Staff understood their role and responsibilities and felt supported by the management team.

Right culture

Robust systems were in place to monitor and review the quality of the service, this included feedback from people and their families. The management team promoted a positive culture with a clear vision and values. Staff were aware of their responsibilities to report any concerns and were confident these would be acted upon. Any issues were reviewed to help inform on-going learning and improvements to the service.

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 19 April 2021 and this is the first inspection.

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.

Alcedo Care Bury

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 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 and complex care to people living in their own homes.

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 no registered manager. A new manager had been appointed and was applying to register with CQC.

Notice of inspection

This inspection was announced. We gave a short period 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 29 November 2022 and ended on 12 December 2022. We visited the location's office on the 30 November 2022.

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 (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 2 people who used the service and 7 family members. We also spoke with 12 members of staff including the operations manager, manager, quality compliance manager, complex care manager, recruitment manager and homecare staff.

During the inspection visit we looked at staff recruitment records and reviewed support plans. We also looked at quality monitoring and safeguarding systems and staff training and support. Additional evidence, sent to us electronically, was reviewed remotely. These included; visit records, medication management and evidence of management and oversight 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.

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; Learning lessons when things go wrong

- Safeguarding adult and children and Whistle-blowing procedures were in place. These were stored electronically and easily accessible to staff. Further information was also contained within the staff handbook.
- One person told us, "I feel very safe with them [carers], they are very nice" and "Absolutely safe, cannot fault them." The relative of another person also said, "I feel so much better knowing someone is with [relative] and he is safe. They are reliable and extremely kind to both of us."
- A review of records showed any concerns were recorded and acted upon. The manager liaised with the local authority, where necessary, so that people were kept safe.
- A review of records showed training in safeguarding adults and children was provided. Staff knew who to speak with if they needed to raise any concerns.
- Audits and checks were completed to monitor areas such as safeguarding and accidents. This included a check for supporting documentation, root cause analysis and Duty of Candour. Any areas of learning were shared with the staff.

Assessing risk, safety monitoring and management

- Areas of potential risk had been assessed and planned. Risk management plans provided staff with the information they needed to support people in a safe manner.
- Appropriate arrangements were in place to keep people's property safe. Staff accessed people's homes using a 'key safe'. Numbers were securely held and only accessible to those who needed it. One person told us, "I have a key safe and I can unlock my door with my phone as there is a camera. I can see who is at the door" and "I have a key safe never any problems."
- At present financial support was not being provided. However, systems to record and monitor this support were available.
- Out of hours support was available for staff working evenings and weekends. We were told, "We can always phone the on-call 24hrs" and "On-call staff are always available no matter the hour."
- A health and safety risk assessment had been completed with regard to the office environment. This explored the premises, equipment and fire safety including fire drills.

Staffing and recruitment

- Robust recruitment processes were in place.
- A review of staff recruitment files showed that all checks were completed before new staff worked with people. This included a Disclosure and Barring Service check (DBS). A DBS provides information including details about convictions and cautions held on the Police National Computer. The information helps

employers make safer recruitment decisions.

- Good numbers of staff were available. The service continued to recruit to allow flexibility in support and be responsive to the changing needs of the service.
- People and their relatives told us staffing arrangements were reliable with a consistent team providing support. We were told, "It's a small group of regular faces very rarely someone different arrives" and "I have got to know them [carers] well. Last week there was a new one I hadn't meet before, but she came an hour early in order to introduce herself and get to know us."

Using medicines safely

- Appropriate systems were in place to ensure people received their prescribed medicines safely.
- At the time of the inspection only four people required assistance with their medication. Support plans outlined the level of support to be provided. Audits were completed to check people received their medication as prescribed.
- Records showed and staff confirmed relevant training had been provided. Additional training and assessments of competency were also carried out where support was provided for those people with complex care needs.
- People and family members we spoke with said they had the help they needed. We were told, "They supervise me taking my medication out of the blister pack" and "[Relative] does his own medication but they check he's had it."

Preventing and controlling infection

- Effective arrangements were in place to minimise the risk of cross infection.
- Staff continued to carry out COVID testing and wore personal protective equipment (PPE) when carrying out support tasks; such as masks, aprons and gloves. Staff told us, "We have plenty of PPE" and "It's always available in the office."
- Policies and procedures were in place to guide staff along with training in health and safety and infection control. Records showed these had been completed by all staff.

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.

Staff support: induction, training, skills and experience

- A range of learning and development opportunities were made available for staff. Nursing staff within the complex care team also provided additional training in clinical areas such as emergency medication, maintaining airways and feeding tubes.
- Prior to commencing work with people staff completed a comprehensive induction programme and shadowed experienced members of the team.
- People and their relatives told us, "If a new one [carer] starts, they come in and shadow. They get to know me and how I like things to be done", "I think they are very competent" and "They are very well trained."
- Staff told us they had completed an induction as well as face to face and e-learning training. We were told, "I received an induction and an opportunity to shadow some one more experienced" and "I've completed all mandatory training on my induction. I've also recently been trained on gastrostomy care and controlled drugs as part of the complex care support."
- Staff were provided with a handbook, which provided relevant information about their role and responsibilities, policies and procedures and what they can expect working for the service.

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

- People's nutritional and hydration needs were assessed and planned for. Likes and dislikes were outlined within people's care plans.
- Support was provided for people whose dietary needs were met through a percutaneous endoscopic gastrostomy (feeding tube). Training and assessments were carried out by the complex care nursing staff who worked alongside the care staff, so people's individual needs were safely met.
- Additional training to promote people's health and wellbeing had been completed. These included; food safety, nutrition and good oral care.

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- The service worked partnership in with other professionals to ensure people's healthcare needs were understood and appropriate support was provided.
- People's relatives told us they were kept informed if there were any concerns about their family member. We were told, "They have mentioned things to me prompting me to call the doctor" and "Never needed to contact a Dr for [relative], but I'm certain they [staff] would contact me if they felt something wasn't right."
- The service also has a complex care team who work alongside staff, providing training and support so people's clinical care needs were safely met. We were told the team were "Brilliant. The nurses are so supportive and responsive. We are kept well-informed and work well together."

Assessing people's needs and choices; delivering care in line with standards, guidance and the law; 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.

- Capacity and consent were explored as part of the initial assessment process.
- Records showed that people had been consulted with about their care and support and had signed to confirm their agreement. The records outlined their wishes and feelings and how they wanted their support delivered.
- This was confirmed by people we spoke. We were told, "They are always polite ask permission" and "My [relative] makes her own choices about everything."
- Policies and procedures along with staff training were provided to help staff understand their responsibilities regarding the MCA.

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 and their relatives told us they were well supported. We were told, "The carers are absolutely excellent", "They have a nice manner and speak to [relative] in a kind way". "They [carers] are kind and caring; yes, nice manner" and "They make sure the curtains are closed for personal care, maintain [relative] dignity."
- Staff received equality and diversity training providing guidance on how to treat people equally whilst recognising and respecting their differences.

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

- People told us, and records showed they were actively involved in making decisions about the care they wanted and needed. One person told us, "Two girls from the office came out to the house to speak to me and my wife about what we need now and in the future."
- People were able to express their views through regular reviews and staff spot checks.
- Information was available in the service user guide advising people of advocacy services available to them should they need independent advice and support in making a decision that's important to them.

Respecting and promoting people's privacy, dignity and independence

- People gave examples of how staff protected their privacy and dignity when providing care and support. We were told, "They are compassionate, really care" and "They make sure the curtains are closed for personal care to keep my dignity."
- People were encouraged to remain as independent as possible. Care plans clearly identified what people were able to do for themselves. One person told us, "I always try to do what I can, and they know I'm like that."
- Staff received training in privacy and dignity, to help promote good practice.

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; End of life care and support

- People were involved in the assessing and planning of their care and support. We were told, "We discussed the care plan at the beginning" and "We sat as family with someone from the office and prepared a plan."
- We found care plans were personalised and included routines, choices and preferences. Daily notes and monitoring of people's well-being were also completed. Reviews were completed to check plans reflected the current and changing needs of people.
- Staff used an electronic care planning system. All interactions and support were recorded using the App, which ensured records were completed in a timely manner and accurately maintained.
- Staff confirmed information about people needs was easily accessible. We were told, "There is plenty of information and clear instructions on how to support clients" and "There's always details down to even personalised preferences for example. how many sugars a client has in their tea or coffee."
- People's end of life wishes was explored, where appropriate, this includes details of any advanced care plans and if a do not attempt resuscitation (DNAR) is in place.
- Staff were provided with end of life training. The service was also exploring how after care support can be offered to those family members who have been bereaved, to check on their well-being.

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 identified through the assessment process.
- Information was provided with the 'Service User Guide' advising where people have a disability, impairment, sensory loss or require any communication support; documentation would be supplied in a format that they were able to read and understand. This may include; easy read, large prints or audio recordings.

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

- Peoples social and emotional needs were explored during the assessment and care planning process. This included completion of 'This is me' and 'What is important to me' documents exploring past employment, hobbies and interests and family and friendships.

- People told us visits were not rushed and staff took time to talk with them.

Improving care quality in response to complaints or concerns

- Systems were in place for the reporting and recording of any complaints and concerns.
- People and their relatives told us they would talk to staff or office staff if they needed to. Those who had raised queries were satisfied with the response provided. Others told us, "No need to make a complaint but I would ring the office if I did" and "No complaints so far!"
- Staff were aware of how to deal with people's concerns if necessary. One staff member told us, "If they [people who use the service] raise a complaint with myself I would let the service user know that I can pass this into management."

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.

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

- The manager was new to post and was applying to register with CQC. The manager was aware of her legal responsibilities and felt support in her role. The manager said, "All resources are made available" and "I have a team that I trust, good support for each other."
- The service had a thorough quality assurance framework to monitor and review the service. Action plans were put in place and kept under review by the management team where areas of improvement were needed. Plans were used to help drive improvement and inform areas of learning and development.
- Managers spoke positively about the provider and their commitment in developing high standards of care. We were told, "The Provider has clear oversight, proactive and very involved" and "They focus on delivering good quality care for people."
- Spot checks were carried out to check staff were providing care and support to a good standard and in line with policy and procedure. These included observations of moving and handling, administration of medication and infection control. Staff said, "We do receive spot checks frequently and we are not aware when these checks will take place."
- Staff also told us they had confidence in the management team. Comments included, "The managers are very supportive; they are very proactive" and "They [managers] have always supported me and encourage me to push myself."
- All the people we spoke with were complimentary about the service and quality of care and support provided. We were told, "I would recommend this company", "Very happy with this company" and "Happy with them and would recommend."

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 told us staff treated them as individuals, encouraging and enabling them to live life as they wanted.
- A service user guide was provided detailing what people can expect from the service and how they will be involved in planning and developing their support plans.
- The provider was developing a 'survey monkey' to help encourage feedback about the quality of service provided. Reviews seen on external websites were complimentary about the high standard of care and

support people received from the service.

- Staff told us they felt supported and were confident in raising any issues or concerns. We were told, "Any concerns I have had in the past have always been resolved", "I can always raise concerns, the managers are approachable" and "Any concerns I feel I can contact the office, any problems or concerns I've had in the past have been acted on almost immediately."
- The service had a staff incentive scheme, 'Care Friends'. Staff were awarded points for their work, comments and compliments received and if nominated for carer of the month. Points were then converted into cash rewards.
- The provider had signed up to 'Disability Confident'. This is a government scheme designed to encourage employers to recruit and retain disabled people and those with health conditions.

Working in partnership with others

- The service worked in partnership with other professionals so that people received the care and support they wanted and needed.
- The provider was committed to supporting staff health and well-being. Staff had access to Able Futures, an independent service providing confidential advice and support.
- The service had put together essential information to help people. A 'Keeping Safe and Keeping Well' guide provided information and contact details for relevant agencies who could support people to stay safe within their own homes.