

Assisted Living Care Group Ltd

Assisted Living Care

Inspection report

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service effective?

Good ●

Is the service caring?

Good ●

Is the service responsive?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Assistive Living Care is a domiciliary care agency who are registered to offer support to older and younger adults with; learning disabilities, autism, and mental health. They provide personal care to people living in their own homes. Not everyone who can use the service receives 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. At the time of the inspection three people were receiving personal care.

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

People were supported by staff who knew them well, had adequate training and were recruited safely.

Care plans and risk assessments were detailed and included the person's holistic needs. People's likes/dislikes, routines and history was documented. People and significant others were involved in the care planning process.

Staff were supported by managers who were open and transparent. Staff felt supported and told us they could give feedback or suggestions to the registered manager and their views would be listened to.

People were supported with dignity and respect and were encouraged to be as independent as possible.

Medicines were managed and administered safely. Staff supported people to make and attend health appointments. The staff team worked closely with external professionals to ensure people's health needs were met.

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.

Systems and processes were in place to ensure oversight of the service and to ensure person centred care was delivered.

We expect health and social care providers to guarantee autistic people and people with a learning disability the choices, dignity, independence and good access to local communities that most people take for granted. Right Support, right care, right culture is the statutory guidance which supports CQC to make assessments and judgements about services providing support to people with a learning disability and/or autistic people.

The service was able to demonstrate how they were meeting the underpinning principles of Right support, right care, right culture.

Right support:

- Staff maximise people's choice, control and independence. The service was working to the transforming care programme.

Right care:

- Care is person-centred and promotes people's dignity, privacy and human rights

Right culture:

- Ethos, values, attitudes and behaviours of managers and care staff ensure people using the service can lead confident, inclusive and empowered lives

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 30 May 2019 and this is the first inspection.

Why we inspected

This was a planned inspection based on the registration date.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Good ●

The service was safe.

Details are in our safe findings below

Is the service effective?

Good ●

The service was effective.

Details are in our effective findings below

Is the service caring?

Good ●

The service was 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

Assisted Living Care

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

The inspection was completed by one inspector.

Service and service type

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

The service had two managers 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 24 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 July 2021 and ended on 12 August 2021. We visited the office location on 22 July 2021.

What we did before the 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. 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 were unable to speak to people who used the service. We spoke to one relative about their experience of the care provided. We spoke with five members of staff including the provider, registered manager and care workers

We reviewed a range of records. This included two people's care records and medication records. We looked at two staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at training data and quality assurance records.

Is the service safe?

Our findings

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

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

Systems and processes to safeguard people from the risk of abuse

- The provider had effective safeguarding and whistleblowing systems in place and staff receive training on safeguarding.
- Staff had a good understanding of what to do to make sure people were protected from harm or abuse.
- The registered managers were aware of their responsibility to liaise with the local authority if safeguarding concerns were raised.

Assessing risk, safety monitoring and management

- Risks were assessed and mitigated. We found risk assessments had been completed for all known risks to a person's health, safety and welfare. For example, behaviour, mental health, equipment, activities, communication and finances.
- Staff received training to ensure risks could be mitigated and people kept safe.

Staffing and recruitment

- Safe recruitment practices were in place and the provider used references and the Disclosure and Barring service (DBS) to ensure staff did not have any criminal convictions and were suitable to provide support for the people living at the service.
- People were supported by regular staff who knew them well. Relatives told us, staff were approachable and helpful.

Using medicines safely

- People received medicines as prescribed by staff who had training and their competency checked to administer medicines.
- As required (PRN) medicines had protocols in place to ensure staff knew the reason and dose to administer. Staff recorded the reason for giving PRN medicines, however, the reasons were not always consistent. The registered managers were going to discuss this with staff after the inspection.
- We found medicines were received, stored, administered and disposed of safely.

Preventing and controlling infection

- Staff told us they had plenty of personal protective equipment (PPE) and followed government guidance on what PPE was required. Staff wore masks, gloves and aprons.
- Staff supported people to keep their home clean.
- The provider was accessing testing for people using the service and staff.
- The provider had an updated infection prevention and control policy.

Learning lessons when things go wrong

- The registered managers looked for trends and patterns over a variety of records to ensure lessons could be learnt and improvements to people's experience could be made.

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

- People's holistic needs were assessed before they started using the service. Preassessment plans were completed with the person and significant people as appropriate.
- Care plans were detailed, and person centred they included people's likes, dislikes and choices.
- Staff told us they felt the care plans were well written and gave them all the information they needed to complete care tasks.

Staff support: induction, training, skills and experience

- All staff completed an induction which included training and shadow shifts, to ensure they had the knowledge and skills to carry out their roles and responsibilities. One staff member said, "My induction was good, I learnt a lot and started to understand my role more."
- Staff training records confirmed training completed was appropriate to their roles and responsibilities. Additional training was offered to keep up to date with best practice guidelines.
- Staff were confident in their roles and told us their training was "very good."
- The registered managers completed competency checks to ensure staff understood the training provided.

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

- People were supported to choose what they wanted to eat and drink and were encouraged to make healthy choices.
- People's meal choices were documented to ensure a balanced diet could be supported.

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

- When people needed referring to other health care professionals such as GP's, occupational therapists or district nurses, this was arranged by staff or relatives. Staff supported people to attend any appointments required.
- Within the care plans all communication from healthcare professions had been logged and acted upon.

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 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.

- Mental capacity assessments were completed as required.
- Where people were unable to make decisions for themselves, records showed significant people had been involved in the decision-making process to ensure all decisions were in the person's best interest.

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's care plans included details of religion, culture and preferences. Staff were able to share examples of how they met people's diverse needs.
- Where people were unable to communicate their needs and choices, staff understood their way of communicating. Staff observed body language, eye contact and simple sign language to interpret what people needed.
- Staff supported people to attend celebrations and special events.

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

- We saw evidence in care plans that people had been involved and asked likes/dislikes, preferences and routines. A relative confirmed they were involved in the care planning and shared information about the person.
- People were treated respectfully and were involved in every decision possible. A staff member told us, "We always give people choices." A relative told us, "Staff will offer choices to [person]."
- No one being supported currently required the support of an advocate. An advocate is someone that helps people to speak up about their care. However, the registered managers would support people to access advocacy services should they need to.

Respecting and promoting people's privacy, dignity and independence

- Staff told us how they ensured people's dignity and respect. They used examples such as 'closing doors, knocking and waiting for a response before entering someone's bedroom or bathroom and ensuring curtains or blinds were drawn when personal tasks were being completed.'
- People's independence was promoted. A staff member told us, "I encourage [person] to help wash up or make dinner, there is no pressure to do it but by encouraging and asking most times they help." Another staff member said, "We promote peoples independence so they can learn skills and move into more independent living if possible." A relative told us, "They [staff] support [person] to be independent and encourage [person] to things for themselves."

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

- Care plans were person centred and put the person at the heart of all the information. People's communication needs were documented and detailed how to best communicate with a person.
- Staff knew people well and told us the care plans were updated regularly which supported staff to know and understand people's changing needs and choices. A relative told us, "Staff know [person] well, they [staff] are able to interact with [person]."
- Care plans had 'what a good days/bad day looks like for me' and 'what's important to me' section, which included past and present information such as, places, events, relationships, hobbies and routines that were important to the person. This supported staff to deliver person-centred care for people.
- Staff told us that the management ensured staff and people were matched together based on personalities, strengths and similar interests. This supported a person-centred approach to care delivery.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- The registered managers understood their responsibility to comply with the AIS and could provide information about the service in different formats to meet people's diverse needs. Care plans and other documents had been formatted into easy read and we were told that information could also be transferred into different languages when needed.

Improving care quality in response to complaints or concerns

- The provider had a complaints policy in place. There had not been any complaints made.
- Staff and relatives told us they knew how to complain and felt they would be listened to and their concern rectified.

End of life care and support

- At the time of the inspection, the service was not supporting anyone who required end of life support. However, the registered managers were in the process of gaining information from people and their relatives regarding any end of life support or information.
- The registered managers told us if anyone required end of life support, they would ensure all staff had the appropriate training and support and they would liaise with the appropriate health care professionals.

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

- Staff could explain the ethos of the service. A staff member said, "We aim to give people a good life, promote their independence and ensure they have as much choice and control over their lives."
- We saw evidence of quality audits and spot checks on staff completed. This helped ensure person-centred care was delivered and to make any improvements to the quality of the service.
- Staff were clear about their roles and understood what the provider expected from them.
- Planned reviews of people's care were completed regularly with people and their relatives involved.
- The registered managers understood their role and shared information with CQC about all aspects of the service including quality performance, risks and regulatory requirements.
- Staff spoke positively about the registered managers. A staff member said, "They are both supportive and understanding. I could go to them for anything and they would listen and help."

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 managers understood, and would act on, their duty of candour responsibility, however, no incidents had occurred which would require action or investigation in this regard.

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

- Effective systems were in place to ensure all staff were involved in developing the service. They received appropriate training and support for them to keep up to date with best practice guidelines in providing high quality, person-centred care.
- People and relatives knew who the registered managers were. One relative told us, "[Registered manager] is friendly and approachable, I can contact [Registered manager] at any point I need."
- The registered managers arranged regular staff meetings, within these meetings staff were encouraged to raise any concerns, queries or suggestions.
- The registered managers gained feedback from people, relatives and staff via a feedback questionnaire which were positive.

Continuous learning and improving care; Working in partnership with others

- The registered managers had quality assurance systems in place. Audits in place enabled the management team to monitor the service and drive improvements as required. Where improvements were identified actions were put in place to address any issues.
- The registered managers were committed to working towards improving care for people. They welcomed feedback and were open to the inspection process.