

Agape Care Solutions Ltd

Agape Care Solutions

Inspection report

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Date of inspection visit:
30 August 2019
03 September 2019
06 September 2019

Date of publication:
17 October 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

Agape Care Solutions is a small domiciliary care agency that provides personal care and support to people in their own homes.

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

People felt safe. Staff training, and policies ensured people were safe. Staff knew how to recognise signs of abuse and who to report concerns to.

Care plans were detailed and explained how people liked personal care provided and what activities they enjoyed. Risk assessments were in place to ensure people's safety.

Medicines were managed and administered safely and recruitment practices continued to be followed.

There continued to be a range of checks in place to ensure people and staffs' safety. Staff were well supported through training and supervision.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

The registered manager was readily available to people, relatives and staff. They had an open and honest approach to complaints.

People told us staff were kind and caring and treated them with respect.

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 (published 2 March '17).

The overall rating for the service has remained good. This is based on the findings at this inspection.

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 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?

The service was safe.

Details are in our safe findings below.

Good ●

Is the service effective?

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.

Good ●

Is the service well-led?

The service was well-led.

Details are in our well-Led findings below.

Good ●

Agape Care Solutions

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 team consisted of one ASC inspector.

Service and service type

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

The service had 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 we needed to be sure the provider or registered manager would be in the office to support the inspection.

Inspection activity started on 30 August 2019 and ended on 9 September 2019. We visited the office location on 30 August 2019.

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 this information to plan our inspection.

During the inspection

We spoke with three people who used the service about their experience of the care provided. We spoke with two members of staff including the registered manager.

We reviewed a range of records. This included three people's care records and three staff files in relation to recruitment and staff supervision. We also viewed a variety of records relating to the management of the service, including quality monitoring and complaints and compliments.

After the inspection

We requested further information from the registered manager related to the service. This was provided.

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 had a good understanding of safeguarding and whistleblowing procedures and knew how to identify and act on any concerns.
- People and their relatives told us they felt safe with the service.
- The registered manager told us they had a good relationship with the local authority safeguarding and commissioning teams.
- Records showed referrals to safeguarding had been made where appropriate.

Assessing risk, safety monitoring and management

- People had risk assessments for all aspects of their care and support. This included environmental risk assessments for each person's home and surrounding area.
- Staff had a good knowledge of people's risks. Staff were trained to meet each person's needs and to understand the risks involved. The service worked to provide continuity of staff which meant they could monitor for changes in condition and escalate concerns as needed.
- Assessments included clear instructions for staff on how to minimise risks to people.

Staffing and recruitment

- The registered manager confirmed there had not been any changes in the staff recruitment processes since the last inspection, where we found the systems to be safe.
- Staff files contained appropriate checks, such as references, health screening and a Disclosure and Barring Service (DBS) check. The DBS checks people's criminal record history and their suitability to work with people in a care setting.
- The service had enough staff to support people. Staff told us they did not feel rushed and had enough time to provide the care and support the person needed.
- People told us they were informed if staff were going to be late.

Using medicines safely

- Medicines continued to be managed safely and people told us they received their medicines as prescribed.
- Staff responsible for the administration of medicines had their competency assessed.

Preventing and controlling infection

- Staff were clear on their responsibilities with regards infection prevention and control.
- Staff had access to supplies of Personal Protective Equipment (PPE). People told us staff "always wore

gloves and aprons" when supporting them.

- Staff had received training in the control and prevention of infections.

Learning lessons when things go wrong

- Accidents, incidents and complaints were recorded and reviewed for themes that might suggest further action was required.
- Lessons learned were shared with staff through team meetings or supervision as appropriate.

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 has 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 had their needs assessed before they started with the service. The assessment formed the basis of the person's care plan. The registered manager went to see each person before the service was agreed.
- People's outcomes were identified and guidance on how staff met them was recorded.
- Staff knowledge and records demonstrated plans had been created using evidence-based practices. This was in relation to medicines, mobility and nutritional needs.

Staff support: induction, training, skills and experience

- Staff received the training and support needed to carry out their role effectively. They told us they felt confident. A staff member told us, "We have training and updates regularly and can request additional training if we feel it necessary". A relative told us, "They [staff] are competent".
- Staff knew people and their needs well and were skilled in caring for people. Competency was checked through regular spot checks. Records showed staff were up to date with training.
- Staff were supported through regular supervision and appraisals with opportunities to discuss any concerns, how best to meet people's needs, and their own personal development.
- New staff had an induction and were expected to attain the Care Certificate if they did not have qualifications and experience in care work. The Care Certificate represents a nationally accepted set of standards for workers in health and social care. Staff told us their induction training had given them the necessary skills they needed to carry out their role.

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

- Each person had a nutrition and hydration care plan and this detailed which level of support they required.
- Where people did have support to eat and drink their likes and dislikes had been considered.

Staff working with other agencies to provide consistent, effective, timely care

- Care plans addressed any support people needed to manage their health.
- The service was proactive about referring to health professionals if there were any concerns about people's health. Care records contained details of contact with an occupational therapist and GP.
- Staff were knowledgeable about people's needs and the importance of working with others.

Supporting people to live healthier lives, access healthcare services and support

- People were supported to receive health care services when they needed them. Records showed referrals made from the service to a variety of professionals, such as doctors and occupational therapists.
- The registered manager said they worked well with all professionals and were comfortable seeking their input when needed.

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.

- The registered manager had a good understanding of the MCA. Staff had received training, records were complete, and staff told us the key principles of the act.
- People's consent to their care was recorded in their care records.
- Staff told us how they supported people to make decisions about their care and support. People confirmed that staff asked them before supporting them in tasks or with personal care.

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 and a relative described the staff as being 'very polite, cheerful, hardworking, caring and kind'.
- Several people described not feeling rushed at all when staff were supporting them.
- Staff had developed positive relationships with people and spoke about people in ways that demonstrated they cared for them.
- People's cultural and spiritual needs were respected. People were asked about their beliefs and practices during their assessment, these were recorded in their care plans.
- Staff received training in equality and diversity. Staff told us they would care for anyone regardless of their background or beliefs.

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

- People told us they felt included in how their care and support was planned and delivered and had opportunities to provide feedback to the service. Comments received via surveys and in reviews included; 'Carers are punctual, supportive, extremely caring and supportive'.
- Staff told us it was important for them to support people with choices. Records showed they supported people with choices for different aspects of their care. An example was where staff offered people a different choice of meals or the preferred gender of the staff who provided their care.
- People were able to express their needs and choices and staff understood their way of communicating.

Respecting and promoting people's privacy, dignity and independence

- Staff treated people with dignity and respect and received training in dignity. A staff member told us, "I treat people like I want to be treated".
- Staff understood the importance of supporting people to do as much as they could for themselves.
- Regular spot checks on staff considered how they respected and promoted dignity. People told us their privacy, dignity and independence were maintained and respected.

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 personalised care that was responsive to their needs. Care plans were detailed and involved the person. They included information such as summary life histories which helped staff understand people's backgrounds.
- Staff told us the information they had about people's needs was of a good standard and that they had all the information they needed to provide care to people.
- People and their relatives were involved in their care. Reviews were held regularly or as things changed. The registered manager or care co-ordinator completed the review and people, relatives and staff were involved in these.
- People described having regular staff who arrived when they expected them.

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.

- Each person had a communication care plan which detailed how they wished or needed to communicate.
- Records showed people's communication needs had been assessed and were known to staff.

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

- People were encouraged to pursue interests and participate in the local community, where this formed part of their contract with the service.

Improving care quality in response to complaints or concerns

- Everyone we spoke with knew how to make a complaint and the service had a policy and procedure in place.
- The service had a record of complaints which showed the registered manager had resolved issues to people's satisfaction.

End of life care and support

- During the inspection the service was not supporting anyone who was anticipated to be close to the end of their life.
- People's assessments and care plans reflected their preferences for end of life care.

- Staff said they had received training in end of life care, which would be refreshed if someone using the service was nearing the end of their life.

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.

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

- Staff told us they "enjoyed" working for Agape Care Services. They were complimentary about their colleagues and said they "worked well as a team".
- There was a clear, positive and open culture amongst the management team and the care staff.
- All staff said that it had been made clear to them what their roles and responsibilities were.

How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong

- The registered manager understood the requirements of the duty of candour, that is, their duty to be honest and open about any accident or incident that had caused or placed a person at risk of harm. They told us the circumstances in which they would make notifications and referrals to external agencies and showed us records where they had done this.

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

- The management and staff understood their roles and responsibilities.
- Staff told us they got letters from the management team to thank them. One stated "everyone worked with great compassion which was lovely".

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Continuous learning and improving care; Working in partnership with others

- The registered manager told us the service had good working partnerships with health and social care professionals.
- Staff had training in equality and diversity and described how they would respect and promote people's rights and differences.
- People's opinions about the service were sought in many ways, such as regular telephone calls, reviews and during staff spot checks. Feedback included "this is the first agency [person's name] has enjoyed" and "never been happier".
- Regular staff meetings took place to ensure information was shared and expected standards were clear and minutes were shared with all staff.
- All staff said that they felt well supported by the management and were encouraged to get in touch in the event of any problems.

