

Apollo Care (Wirral) Ltd

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## 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

We visited Apollo Care (Wirral) Limited on 19 May 2016. Apollo Care (Wirral) Limited provides care and support to people living in their own homes on the Wirral. At the time of our visit, the service was providing support for 34 people, 21 of whom were in receipt of personal care. There were 18 staff employed by the service including two co-ordinators and a deputy manager.

The service had a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run. The registered manager was on holiday at the time of inspection but the provider, trainee manager and two co-ordinators were in attendance.

The provider had systems in place to ensure that people were protected from the risk of harm or abuse. We saw there were policies and procedures in place to guide staff in relation to safeguarding adults and whistleblowing.

We found that recruitment practices were in place which included the completion of pre-employment checks prior to a new member of staff working at the service. Staff received regular training and supervision to enable them to work safely and effectively.

All of the responses from people who spoke with the inspector and the expert by experience was that the service was either very good or excellent. People told us they were very happy with the staff and felt that the staff understood their care needs. People confirmed that staff stayed for the length of time allocated and arrived on time. All of people we spoke with had no complaints about the service.

The staff employed by Apollo Care knew the people they were supporting and the care they needed. People who used the domiciliary service and staff told us that Apollo Care was well led and staff told us that they felt well supported in their roles. We saw that office staff were a visible presence and it was obvious through our observations that they knew the people who they supported really well.

The care records we looked at contained good information about the support people required and recognised people's needs. All records we saw were complete, up to date and regularly audited. We found that people were involved in decisions about their care and support. We also saw that medications were handled appropriately and safely.

## 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

People were getting visits on time and staff were staying the required length of time.

Staff managed people's medication safely when required.

Staff had been recruited safely. Appropriate recruitment, disciplinary and other employment policies were in place.

Safeguarding policies and procedures were in place and staff had received training about safeguarding vulnerable people.

### Is the service effective?

Good ●

The service was effective

Staff were appropriately inducted and received on-going training.

Staff were provided with regular supervision.

People had given consent for care to be provided.

The service had policies and procedures in place in relation to the Mental Capacity Act 2005.

### Is the service caring?

Good ●

The service was caring

People told us that their dignity and privacy were respected by staff.

People we spoke with said staff were kind, very caring and helpful.

There were plans in place for end of life care.

### Is the service responsive?

Good ●

The service was effective

We saw each person had a care plan that met their individual needs and addressed risks to their well being.

People who used the service told us they were involved in their plan of care and, where appropriate, their support needs were assessed with them and their relatives or representatives.

Care documentation held in people's homes was updated.

### **Is the service well-led?**

The service was well- led

The service had a manager who was registered with the Care Quality Commission.

The office staff were clearly visible and staff said communication was open and encouraged.

The quality of the service was monitored continuously by visits to people who used the service giving them opportunities to express their views.

**Good** 

# Apollo Care (Wirral) Limited

## Detailed findings

### Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

This inspection took place on 19 May 2016. We gave 24 hours' notice to make sure that someone would be available. The inspection was carried out by one adult social care inspector.

Before our inspection, we looked at information the Care Quality Commission (CQC) had received about the service including notifications received from the registered manager. We checked that we had received these in a timely manner. We also looked at safeguarding referrals, complaints and any other information from members of the public. We also contacted the local authority quality assurance team to see if they had any concerns or information about the service.

We visited the office on 19 May 2016 and looked at records, which included six people's care records, five staff files and other records relating to the management of the service. We spoke with the franchise provider, the trainee manager, the two co-ordinators and five other members of staff. We also spoke to an advocacy officer and a mental health nurse who work alongside Apollo Care.

The visit was followed up with telephone calls to people who used the service carried out by 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. The expert by experience spoke with five people who used the service and five relatives of a person who used the service.

# Is the service safe?

## Our findings

People who used the service said they felt safe when supported by the staff. One relative we spoke with told us "They change anything to accommodate [person] to make him safe and happy", another relative told us they felt the support their mum received was 'absolutely' safe. A person receiving care from the service told us that the care she received was safe. We received no reports of missed visits and were told that the staff were almost always on time.

Records showed that all staff had completed training about safeguarding adults. The provider had a policy on safeguarding and this been updated in 2016. Staff we spoke to were aware of the need to report any concerns to a senior person and they had knowledge of their own responsibility to report any concerns about their workplace to an outside body if necessary. Staff were all aware of the safeguarding policy the service had in place, one staff member we spoke to told us "The policies and procedures are fine, we read them regularly and we have to re-read them about every couple of months. We have to sign to say we've read them". The safeguarding policy was also included in peoples care plan files within their homes.

We looked at a sample of five staff files. Records to show that full recruitment and checking processes had been carried out when staff were recruited. This included a Criminal Records Bureau (now Disclosure and Barring Service) disclosure and two written references. This helped to ensure staff were safe and suitable to work with vulnerable people.

Risks to people's safety and well-being had been identified and plans put in place to minimise risk. Risk assessments had been completed with regard to moving and handling, the environment, people's personal care, pressure are care and medication needs.

We looked at how the service supported people with their medication. Some people were prompted to take their medication, whilst other people needed support with administration of their medication. Medication Administration Record sheets (MARS) were available within the care files, and we saw these had been completed appropriately. People who required support with medication were encouraged to use blister packs. We were told by everyone we spoke to that there were no problems with medicines. Staff had received training in medication administration and the service had a medication policy and procedure available for staff to refer to.

We looked at the log sheets of five different people who received support with medication. Two of the records showed that staff had applied creams that had not been prescribed or in the care plans for administration. We brought this to the attention of a senior member of staff who investigated our findings and found that this had been agreed between the person and the agency. They then arranged for their procedures to be updated so this information was clearly recorded. This included adding to care plans so that they could document any changes, also changes had been made to the services auditing systems of communication logs.

We saw that personal protective equipment such as gloves, foot protection, face masks and aprons were

available to staff. One person who used the service said "They [staff] are very particular. They wash their hands and wear gloves". This helps to minimise the risk of spreading infection.

We saw that the registered manager ensured that accident records were completed in full and monitored for trends that may occur and could therefore be addressed.

## Is the service effective?

### Our findings

People we spoke with told us that the staff calling on them were fully trained and had the relevant skills. One relative said about the staff "The ones I've met I would say have the skills and experience needed, [relative] likes the young ones". One staff member told us "They are pretty good on training to be fair, they have relevant courses".

We reviewed five staff files in relation to the staff employed and saw evidence that staff had received an induction when they first started working at the service. Staff who were new to care had started the Care Certificate, which was accredited by 'Skills for Care' this is a national qualification.

Records showed that a range of training was undertaken by the staff team and this was confirmed by the staff we spoke with. The training was provided by an external training organisation. Subjects that had been covered during 2015/2016 included health and safety, infection control, basic first aid, food safety, moving and handling and medication. We also saw how staff were encouraged to attend additional training such as understanding dementia, skin care and end of life care. A health professional who had input to the care of a person who used Apollo Care told us "The carers all seem more than competent".

Apollo Care had an up-to-date policy in place regarding the Mental Capacity Act 2005 and the training provider explained to us that information regarding mental capacity was incorporated into the training being delivered to the staff. This gave staff guidance when providing care for people who may not have capacity to make some of the decisions needed in relation to their support. Everyone we spoke to told us their choices were respected, one person said "They ask me how do you like your cup of tea".

Everyone we spoke to was happy with their support with eating and drinking. One person told us how staff would ensure their snacks were prepared for them. People were satisfied with everything that was done for them. One family member told us "They will go to the shops and get my mum some milk if she runs out".

The care files we saw for each person held information that included allergies and other nutritional information. This was seen to have been reviewed regularly and on speaking to the staff any updates were communicated to them immediately.

The six care plans we looked at showed care had been agreed to by the person receiving the service. We saw that people who used the service had signed to say they were giving their consent to receive the care outlined in their care plans. One person told us "They [staff] will do anything I ask of them. They are glad to be able to help".

Care plans included examples of specialist advice that had been sought. For example, a person's fire alarm had been identified as being unsafe so the provider called the fire brigade on behalf of the person. Other examples included when the service identified faulty equipment and acted on the reports and facilitating the change of lifting equipment for the person. One relative told us "Apollo Care is open to changing things around when I give them notice. They were very good when [person] needed to go into hospital as they



came more often".

## Is the service caring?

### Our findings

People told us that staff were always kind and compassionate when attending to them. One person said ""They are very, very thoughtful. They can see things that need doing without having to be asked. They know what to do after being once. They are just so caring. The girls are so obviously happy with their work. I never feel rushed", another person told us "I give them ten out of ten. They [staff] are very caring and trusting and would do anything for me. I can't fault them. They are really lovely". We were able to speak to a mental health nurse who had input into the care of a person who used Apollo Care, they told us "They are absolutely brilliant and will go the extra mile".

People supported by the service and their relatives told us they were well informed and were also involved in the care being delivered. We saw how each person had a care file, this had a service user guide that included information regarding assessments and delivery of care. One person told us "Someone came out to see me to explain about the service before the care began" and a relative told us "Someone came out to see [person] and myself to explain about the service before they started. I have Power of Attorney. They talked to both of us. They sounded positive".

People felt that staff respected their privacy and dignity when supporting them with their daily tasks. We asked people if they were able to make their own choices, all the people we spoke to said that they were. One person told us "I tell them [staff] what I want. They do what I ask", a relative also told us "It has made a tremendous difference [person] sees them as friends. She thinks they are wonderful".

We observed that confidential information was kept secure whilst we were in attendance in the office because we saw that records were kept locked and only accessed by staff.

Apollo Care at the time of inspection were not providing end of life care but were able to show how they had prepared the organisation for the future by accessing end of life training for the staff and by preparing end of life care plans that were to be immediately implemented if needed.

We spoke to an advocacy officer who told us about the care being received by a person. They said "I understand [name] gets so many hours a week, spread over the week. [Name] seems very happy with the care and [carer name] seems to be very attentive. The three of us had a discussion about the service user and their needs and she took it on board, obtained some information and enabled us to move forward. Not everyone does that and I am very impressed".

## Is the service responsive?

### Our findings

All the people who we spoke with were satisfied with the way care was provided and felt listened to. They told us that they would certainly be comfortable with expressing concerns about the service if they had any. One relative told us "[Name] would know who to contact if she had any concerns. If I was worried I would ring [trainee manager]. She is very good and always seems to want to listen and be helpful", another person said "If I had any concerns I would talk to the carers. I have never had any complaints. They [staff] know how to treat your own home." A third person told us "If I was not happy, I would talk to [trainee manager]. I know she would listen and put it right".

Apollo Care had a clear written complaints policy and a condensed version of this was included in the service user guide given to people when they started using the service. The complaints procedure advised people what to do regarding concerns and complaints and what to do if they were not satisfied with any outcome. It gave contact details for the local authority complaints service and for CQC.

Health and social care professionals said they felt the service was responsive to people's needs. Comments included, "If things aren't in place, they get them in place".

We spoke with the two co-ordinators, the trainee manager and the provider who told us the processes followed when a referral was received. This included making appointments with people and family for initial assessments, developing care plans and risk assessments. We saw records of these assessments in people's care files. The assessment forms had been completed in detail and recorded agreement for the service to be provided. The forms were signed by the person requiring a service or a family member.

Care plans were in place for the care people required, this included personal care, medication and nutrition. The documentation was clear and had been completed in full. Care staff completed a visit log after each visit, and these were then archived. We identified that the service did not have a system in place to check that daily log sheets recorded the care that was being delivered was what had been agreed in the care plan. This was put into place following the inspection by the management team. One person told us "They [staff] write in a book. I can't fault them. I miss my car and the carers will always go out and get me milk or sugar if I run out. They are tremendous. They are very honest".

We observed care staff coming into the office to report a person who was receiving care needing more time in the morning than was allocated. The staff and the manager showed that they had an intimate knowledge of the person and they brought forward a planned review of the person's care to ensure the care being received was appropriate. We were also able to observe the manager telephoning the family member of a person who had had a fall asking how they were following the fall. The manager was also contacting benefits offices on behalf of another person who used the service. This action taken was seen to be communicated to all the relevant people, this included people who used the service.

We asked people if they felt their independence was encouraged. Everyone said they did, we were told "They are a step ahead of me all of the time with their ideas. They will do anything I ask of them. They are glad to

be able to help".

## Is the service well-led?

### Our findings

The service had a registered manager who had been in post since March 2015. She was supported by two care co-ordinators and was in the process of training another manager. Both co-ordinators and trainee manager took responsibility for staff rotas and planning service reviews. They also spent time working directly with people who used the service.

All the staff who spoke with us said the service was well led and that they felt supported. One person told us "They're all great staff in the office", another staff member said "The office staff are so hands on".

Senior staff carried out staff supervisions, spot checks as part of the quality assurance systems, and liaised with the local authority and other professionals such as occupational therapists, advocacy services, district nurses and mental health teams. We were told by one person who uses the service "They seem to get very good support from their managers".

The office staff told us how the service was also actively supported by the provider who carried out site visits and anything the manager thought appropriate, this included additional management training. The provider visited the service regularly and gave on going support to the registered manager and office staff. This showed that the manager was supported in her role and that these meetings gave the manager the opportunity to suggest improvements and highlight any issues.

We saw a number of audits had been carried out and that they were up to date. These audits were based on the Care Quality Commission five key lines of enquiry, examples of these were service user files and staff files. The office staff also went out into the community to monitor the service. Other quality assurance included asking people who used the service to express their views through a satisfaction survey as well as by a continuous improvement system. This meant that there was an on going process of the service acting on issues and comments made. Comments from questionnaires included 'I am so glad my daughter-in-law found Apollo Care' and 'I really appreciate how prompt all the carers have been. I know exactly who is coming through the door when the key box is being used'. One relative told us "They are one hundred and ten per cent brilliant. There are no other words to describe them".

The provider and the office staff understood their responsibilities in relation to the service and to registration with CQC and knew to regularly update us with notifications and other information. There was evidence of transparency. We were shown evidence that care records and daily log sheets were regularly audited.

The services policies and procedures had been reviewed in 2016 by the provider and these included policies on health and safety, confidentiality, mental capacity, medication, whistle blowing, safeguarding, recruitment and lone working. This meant staff had access to up-to-date guidance to support them in their work.

People's care files were stored securely to protect their confidential information.

Staff meetings had been held on a six monthly basis, the last meeting was held January 2016. The minutes showed that staff were comfortable speaking out and airing their views. One staff member told us "I'm listened to and they're approachable", another staff member told us "They're all for the clients, to me it's not just a job".