

Aurora Home Care Ltd

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Inspection report

Unit 37
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Tel: 01915800920

Date of inspection visit:
20 April 2023
24 April 2023
02 May 2023

Date of publication:
23 May 2023

Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service effective?

Good ●

Is the service well-led?

Requires Improvement ●

Summary of findings

Overall summary

About the service

Aurora Home Care Ltd is a domiciliary care agency providing personal care to a range of people with health and social care needs in their own homes. At the time of the inspection, 58 people received support.

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

People said they felt safe, and that staff were kind and caring to them.

Care plans and risks to people's health, safety and welfare were in the process of a fully review by the new manager as a new system had been purchased and needed to be embedded.

We have made a recommendation about staffing. The provider had enough staff and had a continuous safe recruitment programme in place. People reported some calls running late and rotas often not sent out. The provider was addressing this and had employed new care coordinators to support this process, along with a new manager. The rostering system needed further work.

We have made a recommendation about governance. Quality assurance checks had improved and were starting to be fully utilised by the new manager and provider. Actions identified were not always recorded as having been followed up.

We have made a recommendation about communication. People and staff said that this was improving but further work was needed.

Medicines were generally managed well, and people received them in a timely manner. The new manager was in the process of reviewing medicines procedures.

Staff training had improved. The new manager had a training background and intended to fully review training to enhance the staff team's abilities.

Staff followed infection control procedures and enough PPE was available to support the team.

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.

Staff worked in partnership with health care professionals to support people in their homes.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection and update

The last rating for this service was requires improvement (published 10 October 2022) and there were breaches of regulations. The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

At our last inspection we recommended that the provider review their rostering system and infection control procedures. At this inspection we found the provider had acted on these recommendations and improvements had been made, although further recommendations were made.

Why we inspected

We undertook this focused inspection to check the provider had followed their action plan and to confirm they now met legal requirements. This report only covers our findings in relation to the Key Questions, Safe, Effective and Well-led which contain those requirements. For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

The overall rating for the service has changed from requires improvement to good based on the findings of this inspection. Please see the safe, effective, and well-led sections of this full report.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Aurora Home Care Ltd on our website at www.cqc.org.uk

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?

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 well-led?

The service was not always well-led.

Details are in our well-led findings below.

Requires Improvement 

Aurora Home Care Ltd

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 completed by 1 inspector and 2 Experts 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 care to people living in their own homes.

Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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.

At the time of our inspection there was no registered manager in post, but a new manager had recently started in post and had started the registration process.

Notice of inspection

This inspection was announced. We gave a short period of notice to support us in gaining consent to contact people and gain their views. Inspection activity started on 20 April 2023 and ended on 2 May 2023. We visited the location's office on 24 April. We also visited 2 people in their homes on 2 May 2023.

What we did before the 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 contacted local authority commissioners and safeguarding teams; and Healthwatch. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England. We used this information to plan our inspection.

During the inspection

We spoke with 13 people and 10 relatives. We met with the new manager, a director, and the regional operations manager.

We visited a further 2 people in their homes and met with 1 member of care staff and the new manager at the property.

We contacted all staff to gather feedback either via email, telephone or in person. We also contacted 8 care managers and social workers to gather their feedback.

We reviewed 5 people's care and medicine records in full and various records in part. We looked at multiple records relating to the management of the service and quality monitoring systems. We also reviewed 4 staff files in relation to recruitment, support, and training.

Is the service safe?

Our findings

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

At our last inspection we rated this key question requires improvement. At this inspection, the rating has changed to good. This meant people were safe and protected from avoidable harm.

Using medicines safely

At the last inspection, the provider did not have robust medicines management procedures in place to keep people safe. This was a breach of Regulation 12 (safe care and treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 12.

- Medicines were generally managed safely. We received some concerns from healthcare professionals, however the new manager was working with them to address issues raised. One person said, "They are very good at remembering to apply the cream and the eye drops."
- We found some issues with medicines records at the home of 1 person we visited, but this was addressed by the new manager.
- The new manager was in the process of fully reviewing all medicines procedures, including staff training and competency checks to look for further improvements.

Assessing risk, safety monitoring and management

At the last inspection, the provider's procedures for assessing, reviewing, and managing the risks to people's health and safety were not robust. This was a breach of Regulation 12 (safe care and treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 12.

- Risks to people had been assessed. Some reviews were required but the new manager was in the process of reviewing these as a new electronic system was being installed.
- Environmental risks to people and staff had been assessed and were also in the process of being reviewed.

Staffing and recruitment

At our last inspection we recommended the provider fully review their rostering system to ensure care calls are managed well in line with people's agreed needs. The provider had made improvements.

- The provider had reviewed their rostering system. Travel times were now included in care calls to ensure staff had time to get from one person to another on time.
- The provider had enough staff to attend every care call, however due to the national staffing shortages this had impacted on some calls. The provider had a robust recruitment drive in place to try and address shortfalls and had implemented incentives to attract suitable staff.
- Staff attending care calls did not always stay for the time allocated. One person said, "I'm satisfied with the care, but the girls don't have the time. They are supposed to come for half an hour, but they stay 20 minutes." Another person said, "The carers don't spend 30 minutes and leave by 10 minutes" and "They are very nice and caring but are under great time pressure." The provider had taken action and employed new care coordinators to support their rostering system, and this was now being overseen by the new manager.

We recommend the provider enhance their quality checks on rostering systems with further input from people.

- Safe recruitment procedures took place, including Disclosure and Barring Service checks on all new staff and obtaining suitable references.

Preventing and controlling infection

At our last inspection we recommended the provider review their procedures, including training, in line with government guidelines and best practice. The provider had made improvements.

- Infection, prevention and control procedures were adequate. People told us staff wore appropriate PPE.

Learning lessons when things go wrong

- There was evidence that lessons were learnt when things went wrong. This included logs of issues arising and what action was going to be taken, including discussion with the staff team.
- Accidents and incidents were recorded and reported correctly.

Systems and processes to safeguard people from the risk of abuse

- People felt safe. One person said, "Yes, I do (feel safe). My visits are adequate for me. Steps were taken to reduce the risk of me falling."
- Staff received safeguarding training. Most staff were knowledgeable regarding different types of abuse and protecting people from harm. The new manager told us they had a plan to update and source local authority safeguarding training to enhance this.
- Safeguarding and whistleblowing policies and procedures were in place to support people and 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.

At our last inspection we rated this key question requires improvement. At this inspection, the rating has changed to good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Staff support: induction, training, skills and experience

At the last inspection, the provider had failed to ensure staff were always suitably trained and fully supported. This was a breach of Regulation 18 (staffing) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 18.

- Staff had received a programme of training and induction.
- People generally thought staff were trained and supported them well. One person said, "I would say they are good at their jobs except for some blips. Some (care staff) come in and know exactly what they are doing, and others have to ask and to be told what to do." Staff induction and training was being fully reviewed by the new manager who had a previous background in training.
- Staff felt better supported now and told us the new manager had made good improvements. An action plan was in place to enhance this further.

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

- People's needs had been assessed, and the provider continued to ensure that people were reassessed when their needs changed. We found some records in need of review. A new system was being installed and the new manager was going to review all records to ensure they were up to date and in line with good standards.
- People told us the care they received was good. One person said, "Because of my skin condition they have to be very careful They are always telling me how my body is doing and are very gentle with me. I have never had a bed sore."

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

- People were supported to sustain a balanced diet and have enough to eat and drink. One person said, "They do basic meals like sandwiches or soup and will make whatever I ask. I am lactose intolerant and stock up with the right products. They are aware of my diabetes needs. On a few occasions they have done an emergency shop for me."

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live

healthier lives, access healthcare services and support

- Staff worked with other health and social care professionals and made referrals when this was required, including to the GP or district nurse teams. One family member said, "The carers arrange all the healthcare arrangements. [Person] was taken to the hospital. The manager phoned to let me know. One of the carers stayed at the hospital with [person]."

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.

- Management and staff had an understanding of the MCA and worked within its principles.
- Consent was requested before care was agreed or undertaken. One person said, "They always ask me if I need any help."

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 our last inspection we rated this key question requires improvement. At this inspection, the rating has remained the same. This meant the service management and leadership was inconsistent. Leaders and the culture they created did not always support the delivery of high-quality, person-centred care.

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

At the last inspection robust governance procedures were not in place to effectively manage the service. This was a breach of Regulation 17 (governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 17.

- The new manager was clear about their role and had already put an action plan in place for those areas which needed to be further improved, including medicines, risk assessments, care planning, rostering procedures, and training. One person told us, "The new manager has just taken over and has great hopes and intentions."
- Quality assurance monitoring was in place and had improved but needed further embedded with the new manager, this included following up on actions and ensuring they had been addressed fully.
- Other staff in the organisation appeared clear on their roles but some said they would benefit from further training. The new manager was working to address this.

We recommend any actions identified via quality monitoring procedures are monitored and followed up in line with best practice.

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

- People and families felt better engaged and involved. Many of the people and families we spoke with thought the organisation was on the road to recovery and was running better than previously.
- Some people and staff said that communication could still be improved. One relative said, "Communication could be better. No one rings to say they will be late for visits." One staff member said, "Communication is non-existent because there have been a few instances I have called management and been told that I will get a call back and I never do."

We recommend the provider review all communication methods, including with people and staff.

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

- Staff told us they thought the new manager was improving the culture and communication. One staff member said, "The new manager is nice and has a good open-door policy for staff to ask questions. I think they will get things sorted. [One of the office coordinators] has been good when I have asked questions."
- People and relatives told us the new manager was addressing any issues they raised and felt overall the service was better managed now. One person said, "Apart from the visit times, I can't say it's badly managed." Another person said, "Hopefully, touch wood, the new manager will get things done. They have answered when I've phoned over the past four weeks and got things done. They sound lovely."
- The new manager had worked with healthcare professionals and families to improve outcomes for people.
- The new manager understood their responsibility under duty of candour and the need to apologise when things went wrong.

Continuous learning and improving care

- The management team were keen to continue to learn and improve the service provided. They listened and acted on feedback and already had action plans in place to address issues they had found.

Working in partnership with others

- The management team and staff worked in partnership with other health and social care staff. One healthcare professional said, "Since the new manager has taken over issues raised are being resolved quite quickly."