

Ambercare (North West) Ltd

# Ambercare (North west) Ltd

## Inspection report

Hilton House, Duchess Street  
Shaw  
Oldham  
OL2 7UT

Tel: 01706882656

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## Ratings

Overall rating for this service

Requires Improvement 

Is the service safe?

Requires Improvement 

Is the service caring?

Good 

Is the service well-led?

Requires Improvement 

# Summary of findings

## Overall summary

### About the service

Ambercare (Northwest) Limited is a domiciliary care service, providing personal care and support to people living in and around Oldham and Saddleworth. At the time of our inspection they were supporting 85 people. 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

We found improvements were needed in some aspects of managerial oversight and governance of the service. Staff supervision had fallen behind and had not been carried out in line with the service's training policy. Accident/incident reporting needed to be improved so that actions taken following an investigation were fully documented. There had been no overarching analysis of accidents/incidents. This helps to identify trends or patterns and can prevent future reoccurrence. Although the majority of care records were detailed, we found some information was missing.

People and their relatives told us they felt safe using the service. There were enough staff available to meet people's needs at their requested time. The service had a robust recruitment process which ensured suitable staff were employed. Staff followed correct infection control practices.

People and their relatives spoke highly of the care provided by Ambercare (Northwest) Ltd. They told us they were supported by kind and thoughtful staff. Staff maintained people's dignity and privacy during care provision and promoted their independence.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

### Rating at last inspection

The last rating for this service was good (published 29 September 2018).

### Why we inspected

This inspection was prompted by a review of the information we held about this service.

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 good to requires improvement based on the findings of this inspection. We found evidence that the provider needs to make improvements. You can see what action we have asked the provider to take at the end of this full report.

### Enforcement and Recommendations

We have identified a breach in relation to the governance of the service. Please see the action we have told the provider to take at the end of this report.

### Follow up

We will request an action plan from the provider to understand what they will do to improve. 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.

**Requires Improvement** ●

### Is the service caring?

The service was caring.

Details are in our caring 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** ●

# Ambercare (North west) 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 carried out by an 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 care to people living in their own houses and flats.

#### 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 a registered manager in post.

#### Notice of inspection

We gave the service 48 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 7 December 2022 and ended on 20 December 2022. We visited the location's office on 7 December 2022.

#### What we did before the inspection

We used information gathered as part of monitoring activity that took place on 13 October 2022 to help plan the inspection and inform our judgements. 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 gathered feedback from health professionals who worked with the service. We used all this information to plan our inspection.

#### During the inspection

During the inspection we looked at a variety of records, including 3 care records and risk assessments and 2 staff recruitment files. We also looked at records relating to the management of the service, including quality assurance records, policies and staff training records. We talked to the registered manager, the office manager and 3 care assistants. The Expert by Experience spoke with 3 people who used the service and 8 family members on the telephone to get their opinion about the service.

# 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 good. At this inspection the rating for this key question has changed to requires improvement. This meant some aspects of the service were not always safe and there was limited assurance about safety. There was an increased risk that people could be harmed.

### Learning lessons when things go wrong

- There was a system in place for recording information from incidents, accidents and complaints. However, some of the records we reviewed lacked detail and did not always contain information about the actions taken to resolve the incident.
- There was no over-arching analysis of accident or incidents. This can help a service identify patterns or trends and prevent re-occurrence. We found one person had received minor injuries from a repeated incident, which might have been identified if analysis of the incidents had taken place.

### Using medicines safely

- People were supported by staff who had been trained to give medicines and had their competency assessed.
- People had medicines care plans which provided information to help staff administer medicines safely.
- We found some minor improvements were needed in medicine administration records (MAR), including more consistent use of body maps to show where creams should be applied.

### Systems and processes to safeguard people from the risk of abuse

- People who used the service and relatives told us they felt safe when receiving care and support from staff. Comments included, "She is safe, and when we see her she looks well"; "She is safe with Ambercare. I haven't a bad word to say against them. They are well trained" and "My care is brilliant. I used to be a carer, so I know."
- Staff had completed training in safeguarding. Staff we spoke with knew how to recognise signs of abuse or neglect and who they should speak to if they had any safeguarding concerns.

### Staffing and recruitment

- Pre-employment checks, including a Disclosure and Barring Service (DBS) check were completed to ensure people recruited to the service were suitable. DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.
- There were enough staff to support people at the times they wished. People we spoke with told us staff were punctual and stayed for the required length of time. Comments included, "The carers are on time, but if they are running late due to traffic or other delays they contact me to inform me they are running a bit late"; "If they are late I am informed, but they always stay for the time they are supposed to at each call and never cut it short, even if they are a little late" and "She has pleasant carers who are on time and there have been no missed calls."

- As far as possible people received support from a regular and familiar team of care staff. Comments we received about this included, "She has the same 2 girls who cover the calls from morning until 6pm, Monday to Friday"; "She has regular carers that she knows and trusts" and "What the family like is the continuity of care [name] receives, as it keeps her safe as she always knows who is coming in."

#### Preventing and controlling infection

- Staff had completed training in infection prevention and control.
- All staff used personal protective equipment (PPE) in line with current guidance.
- People confirmed that staff wore PPE when carrying out personal care tasks. One person told us, "They always wear their masks and gloves."

#### Assessing risk, safety monitoring and management

- There were systems in place to minimise risks to people. Care records included assessments which identified potential risks and how these should be managed by staff. These covered a range of areas, including moving and handling.
- Environmental risks in people's homes had been checked to ensure staff were safe to work there.



# 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 our last inspection we rated this key question good. At this inspection the rating has remained 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

- Everyone we spoke to was happy with the care and support provided by Ambergcare (Northwest) Ltd. People told us the staff were kind, caring and patient. Comments included; "They are so supportive and very kind and genuinely care"; "They are dead friendly and put her at ease" and "The girls are very kind and patient with [name] as she is non verbal and the carers manage to interact with her well."
- Staff knew people's likes and dislikes and their life history. They used this knowledge to support them in the way they wanted. Comments we received about this included, "The carers know that [name] likes music and they will help her with the remote control and put on her favourite music"; "The carers have got to understand [name's] facial expressions as a means of communication" and "They are very aware that she goes out for lunch on a Wednesday so they will rearrange her call and come earlier to make sure she is clean and comfortable before she goes out."

Respecting and promoting people's privacy, dignity and independence

- People and their relatives told us staff respected privacy and dignity when providing care. One person told us, "Her personal care is carried out with dignity and respect and they always close the door to give her privacy."
- Staff encouraged people to be as independent as possible. One relative said, "They really encourage her to do things for herself, like make a brew."

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

- The office team contacted people/family members every 12 weeks to review their care, get their feedback and ensure they were happy with the care and support provided. One relative told us, "I have had been asked to feedback on the care [name] receives."
- People told us they were involved with decisions about their care. Comments included, "They will always ask [name] if she is happy with the clothes they have organised for her that day and she will either nod or shake her head and the carers will give her choices" and "The carers always ask [name] if it is ok to get her washed and dressed and she nods in response."

# 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 good. At this inspection the rating has changed to requires improvement. 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; Continuous learning and improving care

- We found improvements were needed in some aspects of oversight and governance of the service.
- Although the majority of care records were comprehensive, some lacked detail. For example, one person who received catheter care did not have an appropriate care plan.
- Although accidents and incidents were documented, we found some records lacked detail about the actions taken. In addition, there was no over arching analysis of incidents to help identify any trends or patterns.
- Staff supervision had fallen behind and had not been carried out every 3 months as outlined in the service staff training policy.
- Minor improvements were needed in the management of medicines records.

The provider had failed to provide consistent oversight of the service. This was a breach of regulation 17 (good governance) of the Health and Social Care Act 2008 (Regulated Activities) 2014.

- The registered manager had taken steps to address the issue of supervision and all staff had received a recent supervision.

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

- We received many positive comments about Ambercare (Northwest) Ltd. These included, "I would rate the company 10 out of 10" and "We have no complaints. The company is well run and the carers are wonderful."
- The management team and staff demonstrated a commitment to support people according to their wishes and choices. One person told us, "If a new person is going to look after me for a while, my regular carer will introduce me to her and she will stay, and see what, and how I like things to be done."
- Staff spoke positively about the service and told us they enjoyed their work. One care worker told us, "I love Ambercare."

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

- People and their relatives were involved with planning and reviewing their care and were happy with the way the service communicated with them. Comments included, "The manager communicates well with me and reviews Mum's care to make sure her needs are being met "; "The manager comes to see me and asks

me questions about my care" and "The office and carers are very easy to communicate with."

- Where required, the service communicated and worked in partnership with external agencies, which included healthcare professionals.
- During the COVID-19 pandemic the service had stopped holding staff meetings in order to limit the number of people visiting the office. These had not been restarted. We discussed this with the registered manager, who told us they had plans to reintroduce regular staff meetings in future.

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 their legal responsibility to be open and honest with people when things went wrong.

This section is primarily information for the provider

## Action we have told the provider to take

The table below shows where regulations were not being met and we have asked the provider to send us a report that says what action they are going to take. We will check that this action is taken by the provider.

| Regulated activity | Regulation   |
|--------------------|--|
| Personal care      | <p>Regulation 17 HSCA RA Regulations 2014 Good governance</p> <p>The provider had failed to ensure consistent oversight of the service. Improvements were needed in the frequency of staff supervision, in documentation and in the management of accidents and incidents.</p> |