

AngelcareservicesUK Ltd

Angel Care Services UK HQ and Support services

Inspection report

Unit 7
Wilsons Park, Monsall Road
Manchester
Lancashire
M40 8WN

Tel: 01612250033
Website: www.angelcareservice.co.uk

Date of inspection visit:
24 July 2023
25 July 2023

Date of publication:
04 September 2023

Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service caring?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

Angel Care Services is a domiciliary service providing personal care to adults with a range of support needs, including people with a learning disability and autistic people. The service provides support to people in their own houses and flats. At the time of our inspection there were 89 people using the service.

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 expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

Right Support:

The provider ensured risks were assessed and mitigated effectively; medicines were managed safely. Audits in place were robust enough to identify and address any ongoing issues. The ethos, values, attitudes and behaviours of leaders and care staff ensured people lead confident, inclusive, and empowered lives. Staffing levels were sufficient to meet people's needs and managers recruited staff safely. Staff followed an induction programme, and training was on-going throughout employment.

Staff thoroughly assessed people's needs before commencing a package of care. Care plans included information about support required in areas such as nutrition, mobility, and personal care to help inform care provision. Staff made appropriate referrals to other agencies and professionals when required.

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. People were supported by staff to pursue their interests and staff supported them to achieve their aspirations and goals.

Right Care:

Care was person-centred and promoted people's dignity, privacy, and human rights. Staff promoted equality and diversity in their support for people and understood people's cultural needs and provided culturally appropriate care. People received kind and compassionate care. Staff protected and respected people's privacy and dignity and understood and responded to their individual needs. Staff understood how to protect people from poor care and abuse. Staff had training on how to recognise and report abuse and they knew how to apply it. The provider worked well with other agencies.

People's care plans reflected their range of needs, and this promoted their wellbeing. People told us they were well treated, and their equality and diversity were respected. People felt staff considered their views when agreeing on the support required. Staff identified people's communication needs and addressed these with appropriate actions.

Right Culture:

People led inclusive and empowered lives because of the ethos, values, attitudes and behaviours of the management and staff. Staff knew and understood people well and were responsive to people's needs. People received consistent care from staff who knew them well.

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 good (published 31 May 2017).

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.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Angel Care Services UK HQ and Support services 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?

Good ●

The service was safe.

Details are in our safe findings below.

Is the service caring?

Good ●

The service was caring.

Details are in our caring findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

Angel Care Services UK HQ and Support services

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

This inspection was undertaken 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 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 we needed to be sure that the provider or registered manager would be in the office to support the inspection.

Inspection activity started on 24 July 2023 and ended on 25 July 2023. We visited the location's office on 24 July 2023.

What we did before the inspection

We reviewed information we had received about the service since the last 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 used all this information to plan our inspection.

During the inspection

We spoke with the registered manager who was also the nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider. We spoke with the quality care manager, a co-ordinator and 16 care staff. We spoke with 10 people who used the service and 14 relatives about their experiences of the care provided. We looked at 4 staff files in relation to recruitment and supervision. We reviewed 9 people's care plans and associated information including medicines records. A variety of records relating to the management of the service, including policies and procedures, auditing and governance records were reviewed.

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. The rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were protected from abuse. The provider had policies and procedures for safeguarding and whistleblowing to protect people from the risk of abuse.
- Managers encouraged people to raise any safeguarding concerns. A person told us, "At the moment I have a regular carer; they come when they say they will in the morning and in the evenings. I'm really very happy with the carer that I have, and I feel safe with everybody who comes."
- Safeguarding incidents were recorded and investigated by managers.

Assessing risk, safety monitoring and management

- Risks to people and the environment had been assessed and regularly reviewed. The provider had systems in place to identify and reduce the risks involved in supporting people.
- Managers involved people, and where appropriate their relatives, in assessing risks to their support. Decisions about risks were recorded in people's support plans. A person told us, "When [my care] started, they [staff] came and talked to me about what I wanted, and I was happy with that. The staff who comes checks up on my welfare; they are very friendly, and we go walking to the shops."
- Staff had completed the appropriate mandatory training to keep people safe, and understood where people required support to reduce the risk of avoidable harm.

Staffing and recruitment

- There were enough staff, with the right training and skills, to meet people's needs. A relative said, "They [staff] are full of joy and they really put a smile on [person's] face. They are all lovely people, always on time and they stay for the full amount of time they're supposed to. [Person] is definitely very safe with them; they are very respectful towards [person] and they are very respectful of [person's] home keeping things tidy and putting things back."
- The provider had effective recruitment processes. Recent records showed staff being recruited safely, with appropriate checks completed. Disclosure and Barring Service (DBS) checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.
- An electronic staff scheduling system ensured managers knew the whereabouts of staff, to ensure the safety of both people and staff. Late calls could be tracked, and alternative arrangements made through consultation with people.

Using medicines safely

- Medicines were safely managed. The provider had systems in place to ensure people were receiving their

medicines as prescribed. A relative told us, "They [staff] give [person] their medication four times a day and there has never been a problem. They even text me when the dossett packs are low."

- Managers ensured staff had received medicines training and had their competency assessed to ensure they gave medicines safely.
- Medication records were completed in line with the provider's policies.

Preventing and controlling infection

- The provider used effective infection, prevention, and control measures to keep people safe, and staff followed guidance. A relative told us, "Staff have gloves and aprons, and they wear a uniform and even have a sort of headband."
- A business continuity plan was in place to alert other agencies to infection control concerns affecting people's health and wellbeing.
- The provider's infection prevention and control policy was up to date and staff had received training in infection control. We received no complaints about staffs' infection control practice.

Learning lessons when things go wrong

- There were systems in place to manage, monitor and support learning from accidents, incidents, and safeguarding.
- Staff understood the importance of reporting and recording accidents and incidents and how best to respond.
- Accidents and incidents were monitored by the registered manager to identify themes and trends, in order to reduce the chance of a reoccurrence.

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. The rating for this key question 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

- People were supported by staff who treated them with respect and equality. Staff were subject to spot checks of their practice to ensure they treated people with dignity and respect and supported people in a professional manner. One person told us, "The staff are all very nice and we've all got used to each other. It's very nice to have the carers that they have; they all work very hard and really look after me. There is one carer in particular who is very, very good; they are friendly and really look after me, the care is excellent. I do feel safe."
- People received kind and compassionate support from staff who used positive, respectful language which people understood and responded well to. A relative told us, "Someone from Angel Care came to train the carers and [person] has seen 6 carers over the days. They've all seen [person] numerous times, and cover is always from someone who [person] has seen before. I have their number so would know who to call and they've always been available; their contact details are in the book they leave with [person]."
- The provider had an equal opportunities policy in place and equality and diversity formed part of the staff induction process. A recent positive comment received by the provider stated, 'The carers are doing an excellent job which I appreciate and hope it carries on. The carers are very competent, and also kind and considerate towards [person].' A staff member told us, "If a person refused care, I try to understand the reason as to why in a polite way; using a different approach sometimes helps, like asking a different person to provide care. Perhaps we would discuss the person with other colleagues to suggest the best way to manage their situation or liaise with family and friends to suggest the alternative method of support."

Supporting people to express their views and be involved in making decisions about their care; Respecting and promoting people's privacy, dignity and independence

- People and relatives told us they were involved in making decisions about the care provided. A relative told us, "I have a very good relationship with [staff names]. I don't complain very often but they do know me, and I have a good relationship with them."
- In the assessment and care planning process, people were asked about their desired outcomes and what they needed staff to do to support them. This meant people's views and opinions were understood and acted on. A staff member told us, "Person centred care is about involving the person in the care process and giving them autonomy to decide on their individual needs, allowing them to participate and assist where needed."
- Staff contacted people and relatives to ask them for their general feedback about care. Recent feedback received included positive comments, for example one comment from a relative stated, 'I would like to thank you for the excellent way you looked after [person] during the period you were with us. You have all

been so very caring and understanding with [person] and myself and have given us lots of support, and I want to thank you for everything that you have done for us. Keep well and keep doing the job you are so good at.'

- Staff knew about the importance of maintaining people's independence by encouraging them to do what they could for themselves. A staff member told us, "It's essential to maintain people's dignity and respect. One such example is when doing personal care. Ensuring that the person provides consent before helping them is important, while providing as much privacy as possible. I ask people their choices and support them in making those choices. I find out how they feel about the service we provide, and where can we improve."

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. The rating for this key question has remained good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; 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 had the skills, knowledge, and experience to perform their role and a clear understanding of people's needs and oversight of the services they managed. The registered manager was aware of their responsibilities to report significant events to CQC and other agencies; our records confirmed this.
- The provider promoted openness and honesty and kept in contact with people and their relatives. A relative told us, "I've got the manager's number; I've phoned the office and spoke to one of the staff about the lateness and they did something about it."
- The registered manager and management team reflected on past performance issues and used this to improve the services provided. A staff member told us, "I feel supported in my role by both the management and the staff. We work together as a team to achieve best quality care. Angel Care is a good place to work, and I enjoy my job and I always get help from my seniors if there's anything that I need help with."

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- Managers led by example and demonstrated open and transparent approaches.
- The provider worked closely with people to ensure staff understood their support needs and could deliver quality outcomes.
- Managers promoted a person-centred, inclusive, and empowering staff culture.
- The provider had processes in place for receiving feedback and suggestions on how to improve the quality of support.
- Relatives told us they found staff approachable, friendly, and professional. One relative said, "They [staff] first came out to see [person] for a good hour when they set up the care. I found all the office staff to be very approachable both face to face and on the phone and if there were any issues, I'd have no hesitation in speaking to them about it. About once a month they phone and check in from the office to make sure that everything is okay but there have been absolutely no problems. All the paperwork is in the folder, and they record everything such as the times they arrive and leave and what they've done and how [person] has been. I would highly recommend them to anybody."

Working in partnership with others; Continuous learning and improving care

- There was evidence of joined-up work between the provider and other professionals.
- The provider worked well with other organisations to ensure people's needs were met. This included liaison with statutory health and social care bodies.
- There were systems in place in relation to the monitoring of complaints, accidents, incidents and near misses.
- Staff performance was closely monitored by the registered manager who worked in collaboration with the staff team and completed regular audits and spot checks of the service.