

ARCH Care Services Limited

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Inspection report

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Date of inspection visit:
21 April 2021

Date of publication:
26 May 2021

Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Arch Care Services Ltd provides personal care to people living in their own homes. 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. At the time of the inspection there were 65 people receiving support with their personal care.

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

Medicines were administered when required and records had clear guidance for staff to follow. Staff had checks undertaken prior to starting work within the service. Staff were familiar with different types of abuse and who to raise concerns with. People and relatives felt the service was safe. Incidents and accidents were recorded including actions taken. People's care plans had risk assessments and guidance for staff to follow should a risk be identified.

Staff had received training in the use of personal protective equipment (PPE). People confirmed staff washed their hands and they used PPE as required. Most people knew their staff well, however on occasions people experienced care delivered by staff who were not familiar to them. Staff felt supported and told us it was a nice place to work. People's views were sought, and people felt able to raise any issues with staff in the office. Not everyone was familiar with who the registered manager was. Audits were in place that checked medicines, care delivery, safeguarding and incidents and accidents. There was provider oversight of these audits.

Rating at last inspection: The last rating for this service was requires improvement (published 4 October 2019).

Why we inspected

We carried out a comprehensive inspection of this service on 10 July 2019. A breach of legal requirements was found. The provider completed an action plan after the last inspection to show what they would do to improve the safe recruitment of staff.

We undertook this focused announced inspection of this service on the 21 April 2021. This was to check they 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, which contain those requirements and Well-led.

The ratings from the previous comprehensive inspection for those key questions not looked at on this occasion were used in calculating the overall rating at this inspection. The overall rating for the service has changed from Requires Improvement to Good. This is based on the findings at this inspection.

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

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-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?

Good ●

The service was safe.

Details are in our safe findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-Led findings below.

ARCH Care Services Ltd

Detailed findings

Background to this inspection

The inspection

This was a targeted inspection looking at Safe and Well-led. We also checked whether the provider had met the requirements of the breach in relation to Regulation 18 (Staffing) of the Health and Social Care Act 2008 (regulated Activities) Regulations 2014.

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

Inspection team

The inspection was carried out by one inspector and one 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.

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

This inspection was announced. We gave a short period notice of the inspection so that we could ensure we managed the risks related to Covid-19 and ensure the registered manager would be in the office to support the inspection.

Inspection activity started on 21 April 2021 and ended on 28 April 2021. We visited the office location on 21 April 2021.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. The provider was not

asked to complete a Provider Information Return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report. This information helps support our inspections. We used all of this information to plan our inspection.

During the inspection

We spoke with five people who used the service and seven relatives about their experience of the care provided. We spoke with four members of staff including the registered manager. We reviewed a range of records including people's medications records, incidents and accidents, training records, recruitment records, audits and policies and procedures.

After the inspection

We continued to seek clarification from the registered manager to validate evidence found and quality assurance records which we have used to support our judgements in the report.

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 Requires improvement.

At this inspection this key question has now improved to Good.

This meant people were safe and protected from avoidable harm.

At our last inspection the provider had failed to ensure safe recruitment measures were in place. This was a breach of regulation 18 (Staffing) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

At this inspection improvements had been made and the provider was no longer in breach of regulation 18.

Staffing and recruitment

- At our last inspection staff did not always have a completed Disclosure and Barring Service check (DBS) in place. At this inspection we found improvements had been made and staff now received a DBS which confirmed satisfactory checks had been completed prior to starting their employment.
- Staff had references had been sought from their previous employer.
- People were mostly supported by regular care staff. One person told us, "I mainly get regular carers but the odd new one turns up". Another person told us, "I get a rota a week ahead, so I know who is coming. Occasionally I have a new carer but I usually have a couple of carers who are regular".

Preventing and controlling infection

- Infection Prevention and Control (IPC) procedures had been considered within the office environment however there was no environmental risk assessment in place which confirmed what arrangements staff should follow whilst in the office. For example, relating to social distancing, good ventilation, hand hygiene and wearing a surgical mask. We fed this back to the registered manager following our inspection.
- All staff were part of regular weekly testing, this included office staff.
- Staff and people had received the Covid-19 vaccine.
- Staff had received infection control training and COVID-19 training in response to the pandemic.
- People confirmed staff wore personal protective equipment (PPE). One person told us, "Yes they do use gloves aprons and masks". Another person told us, "They do (wear PPE) and they wash their hands regularly".
- Staff had access to plenty of PPE and they knew how to safely use their PPE. One member of staff told us, "I always wear a mask which is changed regularly. I also wear gloves and aprons for personal care. I'm also washing my hands regularly before personal care and afterwards".
- The provider had an infection prevention and control policy in place.

Systems and processes to safeguard people from the risk of abuse

- People felt safe. One person told us, "I feel totally safe with my carers". Another person told us, "Yes I do feel safe". One relative told us, "I feel my (spouse) is safe with all the carers who come in to help".
- Staff had received safeguarding training and they had a good knowledge of the different types of abuse and who they would raise a concern with. One member of staff told us, "If I had any concerns, I would raise it with The Care Quality Commission, the director, a social worker and the council. I would not leave it". Another member of staff told us, "Abuse can be, financial, sexual, verbal, mental. I would let the office know or the director including The Care Quality Commission and the local authority".

Assessing risk, safety monitoring and management

- People's care plans contained risk assessments these contained individual risks and guidance for staff to follow.
- Risk assessments included, people's environments, moving and handling and risk of falls.

Using medicines safely

- People received their medicines safely and when required. One person told us, "They check what we have taken and always write up what we have had and what they have given us".
- Care plans had confirmation of what medicines people took daily and any creams including where these should be applied.
- Staff had training in the safe administration of medicines.

Learning lessons when things go wrong

- There was a system in place to monitor incidents and accidents.
- An overview of all incidents and accidents identified any trends and patterns so actions could be taken to prevent similar situations from occurring.

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 Requires improvement.

At this inspection this key question has now improved to Good.

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 felt supported and happy. One member of staff told us, "There is always someone there to support you". Another member of staff told us, "I feel very supported".
- People and relatives felt there was a good rapport with staff. One person told us, "I have built a good rapport with the more regular carers". Another person told us, "I have a really good rapport with the carers". One relative told us, "I have a good relationship with (Name) carer".

Continuous learning and improving care

- People's views were sought through regular phone call monitoring. Feedback was recorded through regular reviews. One person told us, "I have had reviews. Sometimes someone comes in person, other times they do it by telephone. They will listen and if required changes can be made".
- Monthly newsletters were sent to staff. Newsletters shared important information such as any changes to the staff team, changes to lock down restrictions, suggestions of what staff could access within their community, online groups and activities and a poem.
- Staff felt able to contact the office at any time should they require assistance or support with anything. Information was sent to staff either electronically or via the post. This meant staff were kept informed of any changes to guidance and policies.

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

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

- The provider and registered manager was correctly registered with us.
- Staff were clear about their roles and responsibilities.
- The registered manager undertook regular checks on the quality of the service. These included medication audits, allocations of calls, safeguarding concerns, incidents and accidents.
- The registered manager sent an overview of the quality monitoring system they had in place each month to the provider. This meant there was an additional level of scrutiny in the audits and checks undertaken.
- The registered manager made notifications when required. Copies of these were retained in the office.

Incidents and accidents were recorded and monitored including actions taken.

- The provider was displaying their rating on their website.
- The service had a positive culture. One member of staff told us, "I trust the people I work with. It is a friendly atmosphere. It is a happy and nice place to work".

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

- The registered manager had gained feedback from people and staff through the pandemic via yearly surveys. This was an opportunity for the service to make improvements to people's and staff's experience.
- People and their relatives told us they had a positive experience with the provider. One person told us, "I have a very good service from this company". One relative told us, "The service works as well as I had expected".

Working in partnership with others

- Staff liaised with GP's and district nurses when required. One member of staff told us, "I liaised with (person's name) GP so they could get vaccinated. They are all vaccinated now".
- The registered manager confirmed they liaised with social work teams, safeguarding, local authorities, health care professionals such as physio and occupational therapists, GP's and district nurses.