

Allot Healthcare Services Ltd

# Allot HCS Kirklees

## 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

### About the service

Allot HCS Kirklees is a domiciliary care agency providing personal care to people living in their own homes. At the time of our inspection there were 7 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. At the time of our inspection there were 3 people using the service who received personal care.

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

People shared positive feedback with us about their experience of Allot HCS Kirklees. Care records provided staff with guidance on how to provide care to people. Staff were aware of people's dietary needs and supported people appropriately. Care plans included information about people's healthcare needs and any interventions or support they required. Staff asked people for consent before supporting them. People were able to make choices and their communication needs were identified and recorded in their care plans.

Staff were recruited safely. Staff had received appropriate training to enable them to meet people's needs. People were treated with kindness and had positive relationships with staff.

Complaints and concerns were logged and investigated. The registered manager had carried out investigations in response to any concerns they received. There was a culture of learning from incidents when things went wrong. The service responded to any changes in people's care promptly.

Systems and processes were in place to protect people from the risk of abuse. The provider had established systems to monitor the quality of the service and to organise and monitor calls. The provider worked in partnership with various other health and social care professionals.

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.

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

This service was registered with us on 22 March 2022 and this is the first inspection.

### Why we inspected

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

### 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 caring?

The service was caring.

Details are in our caring findings below.

Good 

### Is the service responsive?

The service was responsive.

Details are in our responsive findings below.

Good 

### Is the service well-led?

The service was well-led.

Details are in our well-led findings below.

Good 

# Allot HCS Kirklees

## 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

One inspector carried out this inspection.

#### 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 not a registered manager in post.

#### Notice of inspection

We gave the service a short notice period 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.

#### What we did before the inspection

We reviewed information we had received about the service since the date it was registered. We used all this information to plan our inspection. The provider was not asked to complete a Provider Information Return (PIR) prior to this inspection. A PIR is information providers send us to give some key information about the service, what the service does well and improvements they plan to make.

During the inspection

We spoke with 2 people and 2 relatives about their experience of the care provided. We spoke with 4 members of staff including the nominated individual and compliance manager. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

# Is the service safe?

## Our findings

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

This is the first inspection of this newly registered service. This key question has been rated good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- Systems and processes were in place to protect people from the risk of abuse. The provider had a clear safeguarding policy in place.
- Relatives told us their loved ones were safe. One relative told us, "[Relative] is certainly safe with the carers."
- The provider had systems in place to deal with potential concerns. Concerns were investigated and dealt with appropriately.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- Care records provided staff with guidance on how to provide care to people.
- Risks to people's safety were regularly assessed, their impact monitored, and changes were made to care and support needs to keep people safe.
- There was a culture of learning from incidents when things went wrong. Processes were in place to analyse incidents and consider how to reduce risk going forward. This was communicated to staff to help prevent reoccurrence.

Staffing and recruitment

- Staff were recruited safely. Appropriate pre-employment checks were carried out to ensure staff were suitable for the role, including Disclosure and Barring Service (DBS) checks. These checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.
- Effective systems were in place to organise and monitor calls, making sure visits had been completed.
- People and relatives gave us positive feedback about the staff.

Using medicines safely

- The provider's care recording system gave clear information to staff about the support people needed with their medicines.
- Staff had received appropriate training and competency observations to support with administering medicines.
- People were supported to administer their own medicines where safe to do so

Preventing and controlling infection

- Staff had received training in the prevention and control of infection.
- Disposable personal protective clothing, including gloves and face masks, were available.

# 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.

This is the first inspection for this newly registered service. This key question has been rated good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

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

- People's needs, choices and preferences were assessed, and individual support plans were created to meet those needs.
- People's care plans were up to date and gave clear guidance for staff.

Staff support: induction, training, skills and experience

- Staff had received appropriate training to enable them to meet people's needs.
- Staff received regular supervisions and competency checks.
- Relatives felt staff were well trained in their roles. One relative said, "[Staff] are trained and certainly know [relative] well and how to care for him."

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

- Where people required support with their meals, this was part of their care plan. Staff were aware of people's dietary needs and supported people appropriately.
- Staff recorded when they had given people food and drink so this could be monitored.

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- Care plans included information about people's healthcare needs and any interventions or support they required.
- The service worked in partnership with external professionals, such as community nurses and GPs to support and maintain people's long-term health.

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.

- People who used the service did not have any court of protection applications in place.
- Staff had completed MCA training.
- Staff asked people for consent before supporting them. One person told us, [Staff] always ask me before they do anything, and I like that."

# 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.

This is the first inspection for this newly registered service. This key question has been rated 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 treated with kindness and had positive relationships with staff. One person told us, "[Staff] certainly are kind. They know me well enough now to know how I want to be treated."
- Staff understood their role in providing people with compassionate care and support. One staff member said, "Treat people like you want to be treated. Be caring, kind and compassionate towards them and their needs."

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

- People's support needs were discussed with them and their relatives before the care package started.
- People and relatives told us staff understood their needs and preferences. One relative said, "We are more than happy with the care [relative] gets."
- People were able to make choices. One person told us, "I always make my own choices."

Respecting and promoting people's privacy, dignity and independence

- People told us staff treated them with respect.
- People told us their independence was maintained where possible. One person said, "[Staff] only do what they need to do, anything I don't need help with I tell them."

# Is the service responsive?

## Our findings

Responsive – this means we looked for evidence that the service met people's needs.

This is the first inspection for this newly registered service. This key question has been rated good. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- People's care plans were personalised to reflect their care needs and included information about their life history, likes or dislikes.
- People received personalised care and support specific to their needs and preferences.

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- People's communication needs were identified and recorded in their care plans.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- People received social support as they preferred. One person told us, "I like it when staff spend some time with me at home, it means a lot to me."
- At the time of the inspection, no body received support into the community. The nominated individual informed us they would support people out in the community if that was included in their support package.

Improving care quality in response to complaints or concerns

- Complaints and concerns were logged and investigated. The registered manager had carried out investigations in response to any concerns they received.
- Where concerns had been raised, these were addressed promptly.
- There were no open complaints at the time of the inspection.

End of life care and support

- The service was not caring for any one on end of life care.
- The management team knew who would be available to support if they were going to support people with end of life care.

# 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.

This is the first inspection for this newly registered service. This key question has been rated 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

- The nominated individual and compliance manager were committed to delivering a person-centred service which achieved good outcomes for people. They were knowledgeable about people's needs and preferences.
- The service was accommodating to any changes to people's care packages.
- Staff felt supported by the nominated individual.

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 provider understood their responsibility around the duty of candour and of the requirement to notify appropriate agencies including CQC if things went wrong.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

- The provider had established systems to monitor the quality of the service. This included checks on all records.
- People were respected and encouraged to make choices and decisions about their care.
- There was a plan in place to oversee the service whilst a registered manager was recruited.

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

Working in partnership with others

- People, relatives and staff were invited to give feedback on the service.
- Feedback received was generally positive. Actions were set and completed where improvements could be made.
- The provider worked in partnership with various other health and social care professionals.